

# 2025 Providence Health Care Climate Change Accountability Report



Providence  
Health Care



BRITISH  
COLUMBIA

Carbon Neutral



# Our Commitment to Indigenous wellness and reconciliation

Providence Health Care is committed to the process of Truth and Reconciliation with Indigenous Peoples, and it is embedded in everything we do. This bold commitment from *Mission: Forward*, Providence's strategic plan, means that everyone at Providence holds responsibility to advance Indigenous wellness and reconciliation.

Truth and Reconciliation requires each of us to develop a shared understanding of the past and its lineage into the present. The truth is that our inheritance — collectively and individually — is one of continued colonialism, systemic and interpersonal racism, and profound injustice and inequities faced by Indigenous Peoples.

Reconciliation requires us all to take responsibility — as human beings and as an organization — for taking action grounded in humility and anti-racism. We are responsible for advancing Indigenous human rights in partnership with Indigenous Peoples, through processes underpinned by mutual respect and dignity.

First Nations, in what is now known as British Columbia, have been stewards and caretakers of the lands and waters since time immemorial. We affirm that efforts toward reconciliation are directly tied to the environment and respect for the land, plants and animals. We acknowledge that there is much to be learned about environmental stewardship from First Nations traditional knowledge, histories and teachings.

We would like to humbly and gratefully acknowledge that the work guided by our mission, vision and values is delivered on the unceded, traditional and ancestral lands of the Coast Salish Peoples — in particular, the x<sup>w</sup>məθk<sup>w</sup>əy<sup>əm</sup> (Musqueam), Sk<sup>w</sup>xwú7mesh (Squamish) and səliwətat (Tsleil-Waututh).

## Declaration statement

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This PSO Climate Change Accountability Report for the period January 1, 2025 to December 31, 2025 summarizes our greenhouse gas (GHG) emissions profile, the total offsets to reach net zero emissions, the actions we have taken in 2025 to minimize our GHG emissions and our plans to continue reducing emissions in 2026 and beyond.

## Authors

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This report was written by Energy and Environmental Sustainability (EES), a regional collaboration team of four health organizations that works to drive change for environmentally sustainable and climate resilient care across planning, design, construction and operations. Housed within the Facilities Management, Projects & Planning department, the EES team cannot do this work alone and works with diverse teams, departments, staff and medical staff across Providence Health Care.

## Contributors

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In particular, we would like to acknowledge the contributions of the following teams: Communications, Commuter services, Corporate Strategic Planning and Management, Environmental Stewardship, Environmental Services, Food Services, Facilities Management, Projects & Planning and many others named throughout this report.

## 2026 Energy and Environmental Sustainability team. All rights reserved.

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## Suggested citation:

**Providence Health Care.** *Climate Change Accountability Report 2025*. Vancouver, BC: Energy and Environmental Sustainability team; May 2026.

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Downtown Vancouver, B.C.

## Executive message

I am pleased to present our 2025 Climate Change Accountability Report, which highlights the actions we are taking to reduce carbon emissions, enhance climate resilience and environmental sustainability and continue our progress toward our climate goals.

This year was one of health authority reviews and continued budgetary constraints, and it showed how sustainability work can be a practical response to these pressures. By reducing energy use, waste and emissions, we can lower operating costs, improve the environments where staff and medical staff work, support high-quality patient care and contribute to healthier communities.

In 2025, our greenhouse gas emissions offsets from buildings, vehicles, paper and refrigerants totalled 8,714 tCO<sub>2</sub>e, representing a 7.6 per cent increase in offsets from the previous year, mostly due to an increase in the emissions factor for electricity. To balance emissions and meet the legislated requirements, we invested \$228,743 in carbon offsets.

In 2025, Providence achieved our greenhouse gas emissions reduction target, reaching a 28 per cent reduction compared to our 2010 baseline, and surpassed our target for staff and medical staff commutes, with 48 per cent made by clean transportation. These results show how operational changes, infrastructure planning and staff and medical staff action are helping Providence reduce emissions and make lower-carbon choices easier across our sites.

Across Providence, teams continued to find creative ways to reduce waste, improve care and support healthier environments. We achieved our 2030 recycling target five years early, supported by our partnership with the Binner's Project to hand-segregate waste and ensure recyclable items are captured. Providence also switched to reusable breathing circuits for anesthesiology procedures and expanded recycling for patient care items, including PPE, IV bags and tubing, and inhalers.

We advanced work that connects sustainability with well-being by planting 50 trees across Providence facilities. Patients, staff, medical staff, Indigenous knowledge keepers and representatives, senior leaders and the Environmental Stewardship Team participated in planting events.

I want to thank staff, medical staff, volunteers and partners for their leadership and commitment. Together, we are making meaningful progress toward a more sustainable, resilient health care system that supports people, communities and the planet.



*Fiona Dalton*

**Fiona Dalton**

President and Chief Executive Officer  
Providence Health Care | Driven by compassion and social justice, we are at the forefront of exceptional care and innovation

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Yellow-faced bumble bee, a pollinator native to B.C.

# Our story

Providence is committed to embedding planetary health principles of environmental sustainability and climate resilience in all we do, from changing business practices and how we manage our buildings, to moving toward reusable medical supplies and low-carbon care delivery, to supporting opportunities for staff and medical staff to improve sustainability in their own day-to-day work.

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# About Providence Health Care

## Overview

**600,000+**  
**patients**

treated annually



**18 sites**

**10,000+**  
**surgical procedures**

performed annually



**12,300 workforce**

staff and  
medical staff

Health care contributes approximately

**5 per cent**

of global greenhouse gas (GHG) emissions<sup>A</sup>. Canada has **the second highest health care emissions** per capita relative to other high-income countries<sup>B</sup>.

## Environmental

### impact

**1 site**

certified with Leadership in Energy and Environmental Design (LEED)<sup>C</sup>



**8,989 tCO<sub>2</sub>e**

total emissions from legislated sources



**3,041,264 kg**

waste generated



**373,787 m<sup>3</sup>**

water used at metered sites



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# Commitment to planetary health

With climate change posing a serious threat to human health, the urgency to focus on sustainability and build climate resilience is clear. Providence is accelerating activities to significantly reduce the harmful environmental impacts of the health system and strengthen resilience to climate shocks and stressors, in alignment with the B.C. Ministry of Health 2025 Mandate Letter and [the CleanBC Roadmap to 2030](#).

## Environmental stewardship, a foundational principle

Sustainability has been a foundational principle of our Mission: Forward strategic plan since its launch in 2019. As a foundational principle, it signifies our commitment to embed sustainability in all that we do and recognizes that our actions today impact the health and well-being of generations to come.

## Sustainability and resilience at our core

In 2025, we updated our environmental sustainability policy to serve as a practical tool to guide how we plan, design and build health facilities to embed sustainability and resilience into the core of health care operations. Find out more about the new Facilities Management: Low Carbon Resilience & Environmental Sustainability policy [here](#).

## Planetary Health Strategy

In 2024, we launched Providence's Planetary Health Strategy (2024-2029), supported by an internal governance structure. Our plan includes three overarching commitments to: Reduce our Impact, Build our Capacity and Develop our Resilience. Each year, we build a robust cross-organizational work plan with objectives, key results and key performance indicators. Twice a year, we report our progress to senior leadership and the Board of Directors and post our report for transparency and accountability.

### Environmental Stewardship Team

Founded in 2022, Providence Health Care's Environmental Stewardship Team brings together health care professionals committed to advancing the organization's planetary health strategy. This cross-disciplinary group welcomes participation, whether as core team members or project-based contributors, to drive progress on sustainability initiatives that benefit patient care and the planet.



Rendering of the new St. Paul's Hospital

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Great blue heron, a bird native to B.C.

# Our progress: Targets and dashboards

Providence Health Care is committed to measuring, assessing and reporting progress towards a more sustainable health system. We recognize that sustainability is an ongoing journey that requires consistent, long-term monitoring and the ability to adjust strategies as we learn. Through tracking progress and sharing results, we are accountable to the communities and First Nations we serve, and we are better able to make informed decisions to reduce our environmental impact.

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# About our targets

Providence is working towards both legislated and voluntary targets that measure progress on our journey towards planetary health. While legislated targets apply to all public sector organizations, we set our voluntary targets by analyzing trends over time alongside best practices in other jurisdictions. The following pages include dashboards and graphs that show 2025 results and track trends over time.

As we reflect on progress toward the 2025 targets, we are also planning actions toward the 2030 targets, including new ways of working with collaborators.

In 2025, we:



Surpassed the **16% target** to decrease total GHG emissions from owned and leased buildings, fleet vehicles, paper use and refrigerants



Surpassed the **40% target** to increase the percentage of staff and medical staff commutes by clean transportation



Surpassed the **16% target** to decrease GHG emissions from owned and leased buildings



Surpassed the **30% and 40% targets** for increasing waste recycled or composted at acute and non-acute care owned sites respectively

While we celebrate these milestones, we also recognize that we face challenges in meeting our targets, including the impacts of climate change, growing demand for new health facilities, as well as funding and resource gaps. These results and insights provide context on our progress to delivering low-carbon, resilient care.

### Legislated targets

In B.C., public sector organizations are expected to follow government requirements and meet set goals as outlined in [The Climate Change Accountability Act](#). The legislation sets ambitious greenhouse gas (GHG) emissions reduction targets (from a 2007 baseline) for public sector organizations:

**40%** by 2030    **60%** by 2040    **80%** by 2050

These targets include emissions from owned and leased buildings, the use of fleet vehicles, paper consumption and refrigerants.

The provincial government's [CleanBC Plan and Roadmap](#) sets even more ambitious targets for buildings and a specific target for fleet vehicles (from a 2010 baseline). The targets for all public sector organizations are:

**50%**

reduction in emissions for public sector buildings **by 2030**

**40%**

reduction in fleet vehicle emissions **by 2030**

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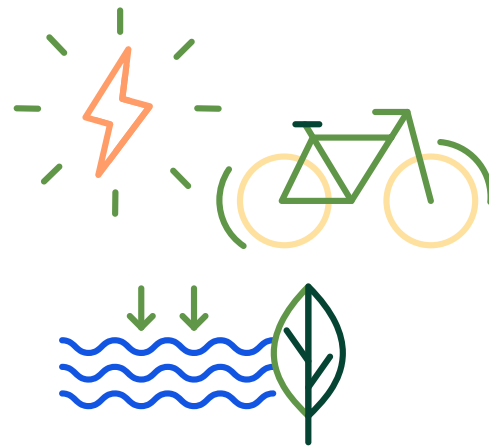
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# About our key performance indicators

We track progress across key performance indicators (KPIs) in greenhouse gas emissions, energy use, waste, transportation and water. These KPIs are informed by legislated requirements, data availability and research into methodology best practices. Together, they provide a comprehensive picture of our progress.

[+ Learn more about the methodology for calculating KPIs](#)



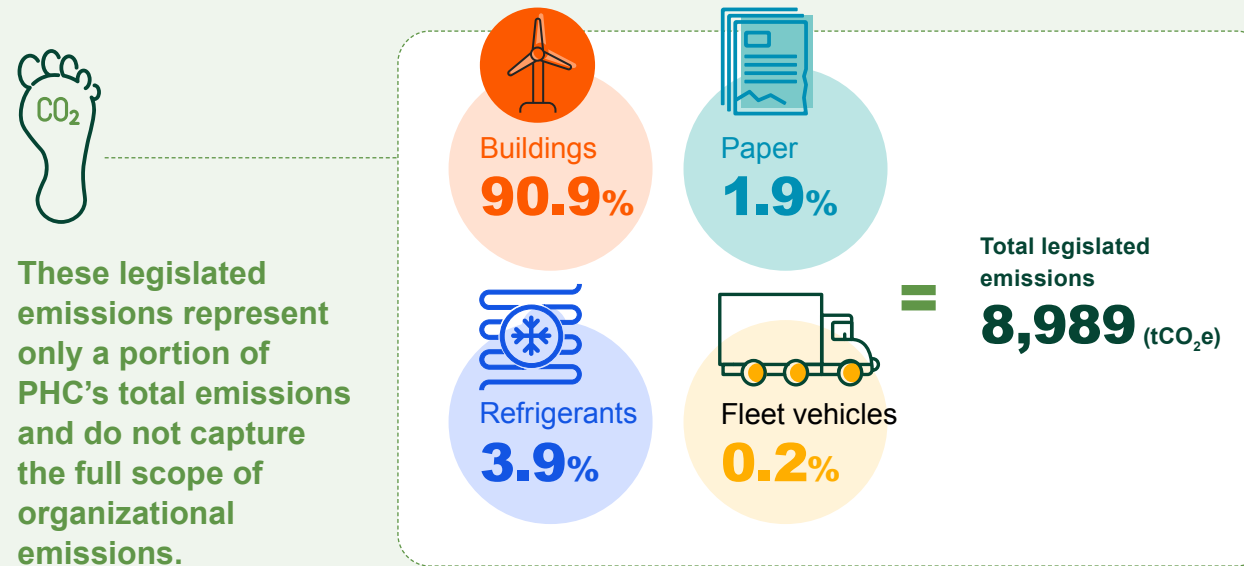
As a leader in environmentally sustainable and high-quality, low-carbon, resilient care, Providence Health Care recognizes that meaningful climate action extends beyond legislated emissions reporting. Work to minimize adverse impacts on the natural environment is not simply a regulatory requirement; it is an essential component of delivering excellent care to the communities we serve.

In 2025, health authorities across B.C. came together to develop a standardized methodology and calculator for all sources of health care emissions beyond legislated requirements. The results (expected mid-2026) will help us better understand the emissions

from individual sources, including our supply chain, and prioritize further reductions in the future. For example, a source of health care emissions that has not previously been included in reporting is staff and medical staff use of personal vehicles to deliver clinical and non-clinical services. While emissions from Providence-owned and leased fleet vehicles are measured, emissions from staff and medical staff use of personal vehicles were not previously tracked. In 2025, staff travel using personal vehicles was quantified for the first time, totalling 375,000 km and generating 68 tonnes of CO<sub>2</sub> — four times the emissions currently reported from the Providence fleet.

## 2025 Providence Health Care legislated GHG emissions

There are four sources of emissions that are legislated for reporting.



Percentages in the above figure may not total 100 per cent due to rounding.

These legislated emissions represent only a portion of PHC's total emissions and do not capture the full scope of organizational emissions.

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## Energy and carbon

	Key performance indicator (metric)	2025 results	2030 target
Legislated targets	<b>CCAA target:</b> total GHG emissions from owned and leased buildings, fleet vehicles, paper use and refrigerants from 2007 levels (% change of tCO <sub>2</sub> e*/year)	<b>24%**</b>	40%
	<b>CleanBC target:</b> total GHG emissions from owned and leased buildings from 2010 levels (% change of tCO <sub>2</sub> e*/year)	<b>27%**</b>	50%
	Amount of GHG emissions generated per usable floor area of owned and leased buildings from 2010 levels (% change of tCO <sub>2</sub> e*/m <sup>2</sup> /year)	<b>19%**</b>	50%
	Amount of energy used per usable floor area of owned buildings <sup>□</sup> from 2007 levels (% change of kWh/m <sup>2</sup> /year)	<b>2%</b>	25%

- On track to meet target
- Slow progress toward target
- Behind schedule to meet target and requires attention

- \* tCO<sub>2</sub>e refers to tonnes of carbon dioxide equivalent.
- \*\* In 2025, a significant increase in the emissions factor for purchased electricity affected overall emissions performance.

### Understanding results

- ▶ Ongoing budget pressures limit the ability to implement large-scale capital projects or adopt emerging low-carbon technologies at the pace required.
- ▶ Some health care facilities are aging buildings with inherent structural and design limitations. These legacy systems were not designed for electrification, high-efficiency equipment or integration with modern energy systems, making retrofits technically complex and often cost-prohibitive.
- ▶ Technologies that are effective in newer buildings — such as full electrification and advanced heat recovery systems — are not always feasible in older facilities without significant infrastructure upgrades.
- ▶ Operational requirements specific to health care environments, including strict ventilation, infection control and reliability standards, also limit the range of available solutions.

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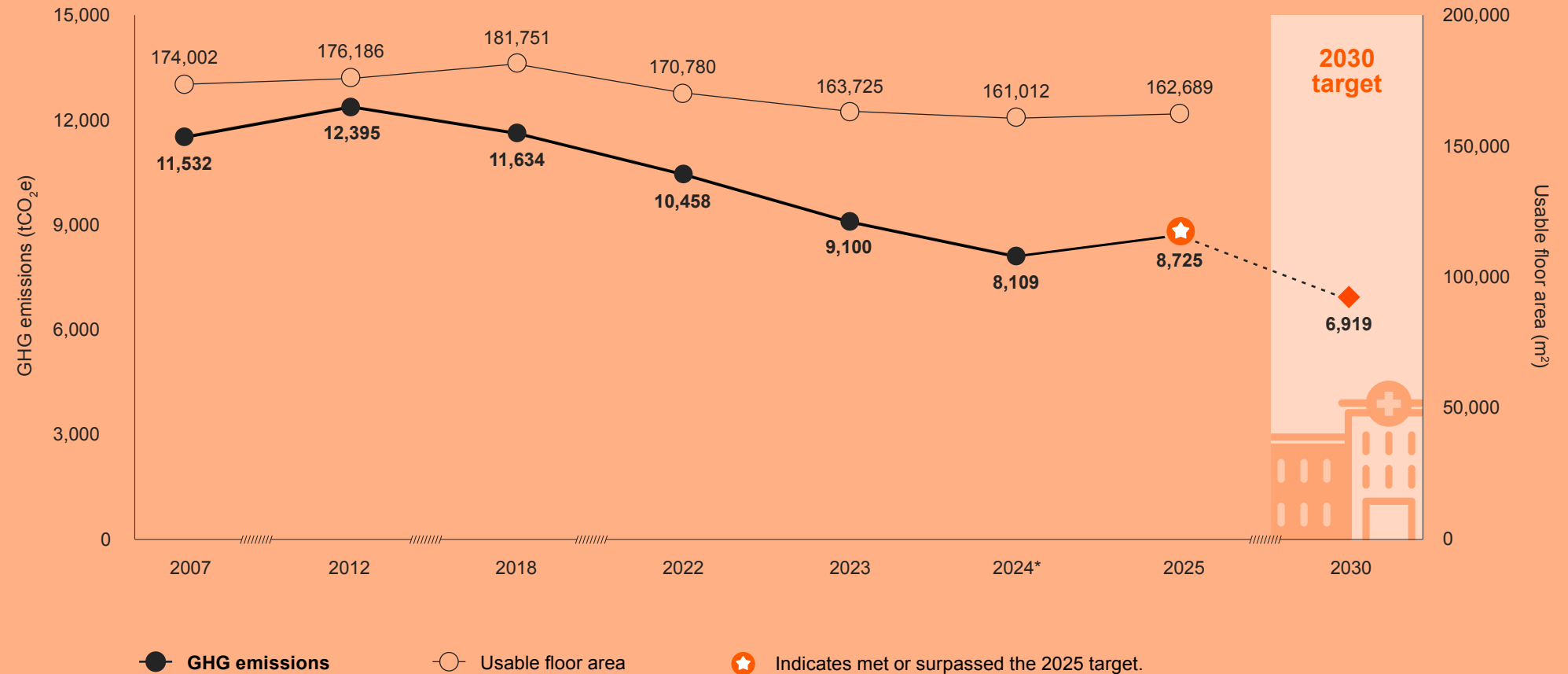
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# GHG emissions and usable floor area

*Emissions from buildings, fleet, paper and refrigerants*



\* 2024 was the first year that refrigerants were included in reported emissions data.

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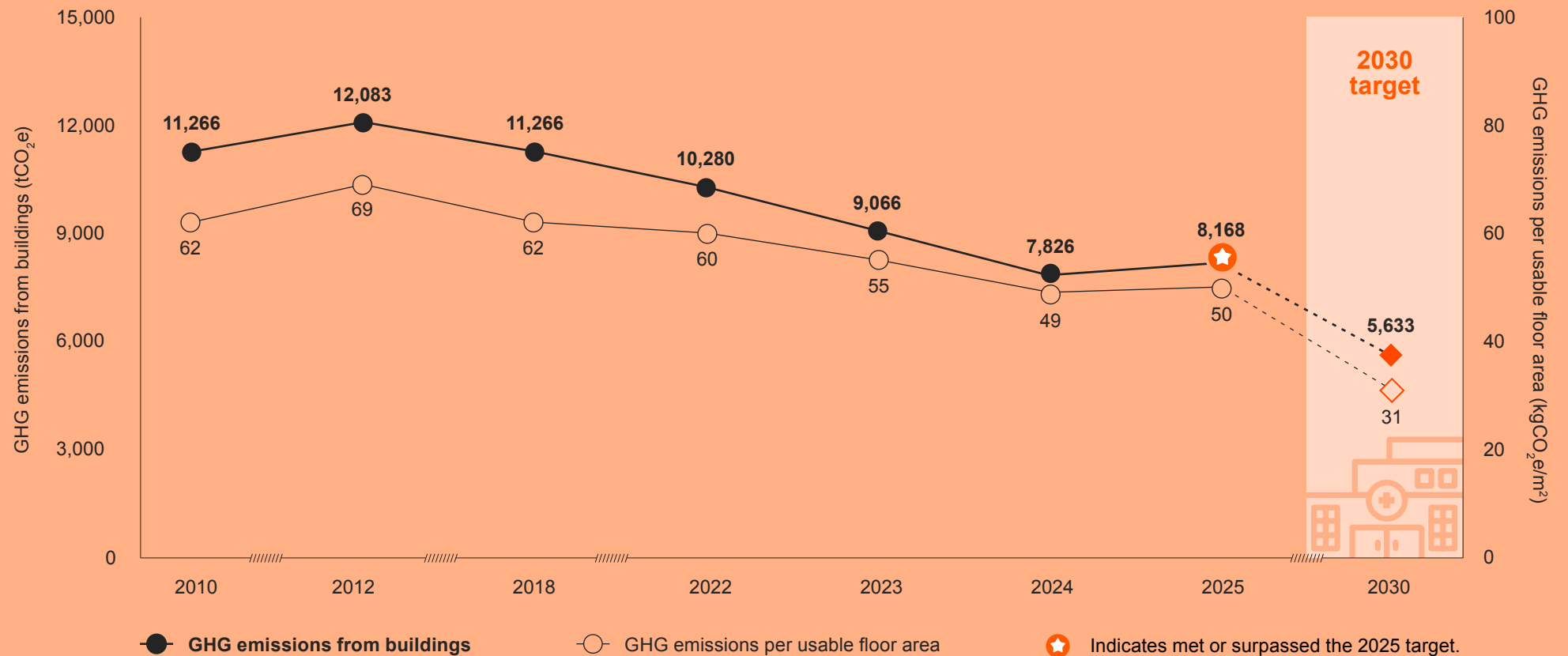
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# GHG emissions from buildings and GHG emissions per usable floor area



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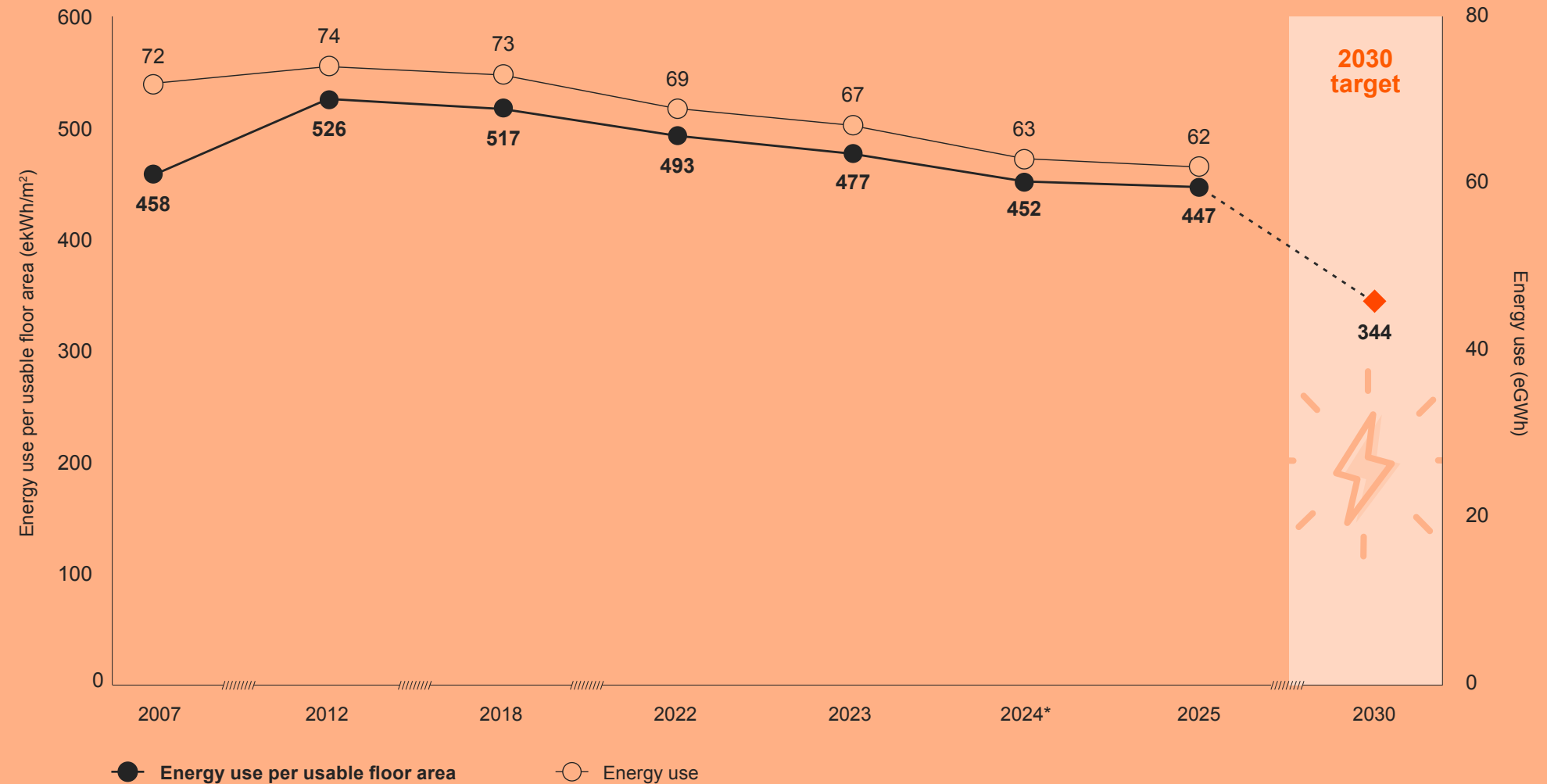
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# Energy use and energy use per usable floor area



\* In 2024, PHC added three sites, consequently increasing usable floor area and energy use.

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# Transportation

Key performance indicator (metric)	2025 results	2030 target
Percentage of staff and medical staff commuting by active transportation (annual average)*	<b>18%</b>	35% ◆
Percentage of staff and medical staff commuting by clean transportation (annual average)*	<b>46%</b>	50% ■

- On track to meet target
- ◆ Slow progress toward target
- Behind schedule to meet target and requires attention

\* Data from the 2026 GreenCare survey<sup>E</sup>.

## Understanding results

How people get to work is a personal choice shaped by individual needs and behaviours. These choices are strongly influenced by where people live and whether safe, convenient, sustainable transportation options, such as transit, walking or biking infrastructure, are available in their community to support travel between home and work.

Modeshare captures a snapshot of staff and medical staff travel behaviour, but a complete view of commuting trends requires additional indicators, such as participation in commuting programs.

## Understanding clean and active transportation

**Active transportation** is powered by people, often with light electric assistance. This includes:

- Walking
- Cycling
- Using wheelchairs
- Electric-assisted transportation such as e-bikes and e-scooters

**Clean transportation** includes lower-emission options that reduce reliance on single-occupancy, gas-powered vehicles. This includes:

- Public transit
- Carpooling
- Car sharing
- Electric and plug-in hybrid vehicles
- Hospital shuttle services

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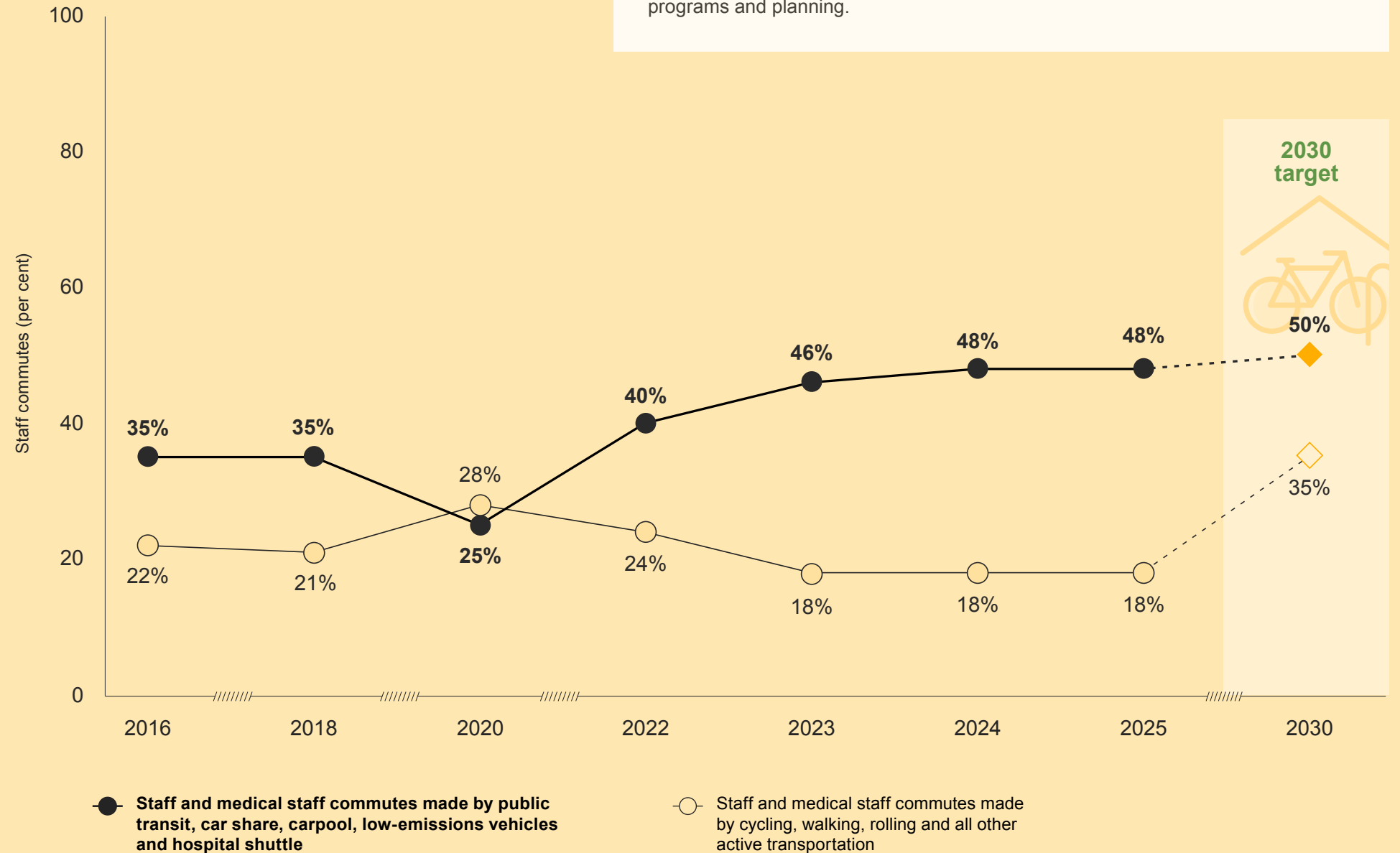
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# Staff and medical staff commuting

## Active and clean commuting trends:

Post-pandemic data shows a resilient and stable baseline across active and clean travel modes. Supportive transit programming for staff and medical staff has brought clean commuting to within 2 per cent of the 2030 target. Active transportation has stabilized at 18 per cent, providing a strong foundation for future programs and planning.



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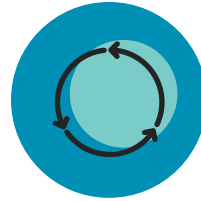
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## Waste

Key performance indicator (metric)*	2025 results	2030 target
Waste recycled or composted in acute care owned sites <sup>E</sup> (% recycled, annual average)	<b>40%</b>	40% 
Waste recycled or composted in non-acute care owned sites <sup>G</sup> (% recycled, annual average)	<b>44%</b>	60% 
Waste generated per usable floor area in acute care owned sites (kg/m <sup>2</sup> /year)	<b>18.8</b>	10.2 
Waste generated per usable floor area in non-acute care owned sites (kg/m <sup>2</sup> /year)	<b>18.2</b>	13.7 

-  On track to meet target
-  Slow progress toward target
-  Behind schedule to meet target and requires attention

\* Does not apply to leased buildings because waste management is the responsibility of the property manager and is not overseen by Providence Health Care.

## Understanding results

### ▶ Recycling

Providence has achieved its 2030 recycling target five years early. This achievement has been supported by Providence's partnership with [the Binner's Project](#), which enables waste to be hand-segregated and helps ensure recyclable materials are captured.

▶ We continue to expand recycling streams and work closely with vendors to manage waste in the most environmentally sustainable way.

### ▶ Waste

Biomedical waste, which was not included in reporting before 2024, is now included to provide a more complete picture of our waste footprint.

▶ The target for waste generated per usable floor area is increasingly difficult to meet as new waste streams are added to reporting, services expand and care activity levels rise. In 2026, we will review the metric and re-evaluate the 2030 target.

▶ Initiatives such as Choosing Wisely and Reusables First help reduce unnecessary waste, while renovation, construction and deconstruction activities can influence site-level waste generation per usable floor area.

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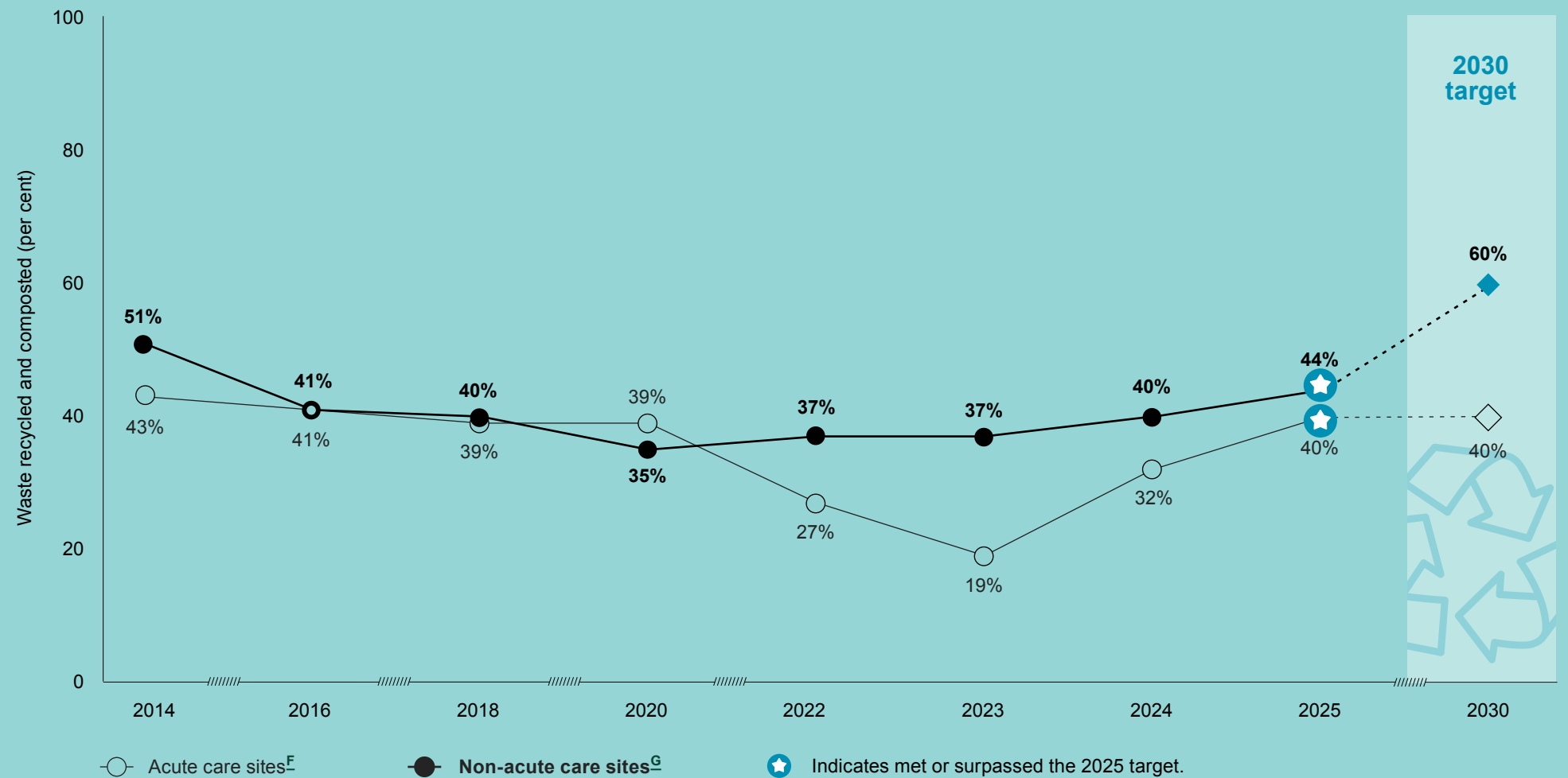
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# Recycling\* rates



Waste recycled or composted in acute health care sites has **met the 2030 target**.



\* Includes: cardboard, soft plastics, mixed recycling, contrast glass, organics, confidential paper shredding, PPE recycling, e-waste, Styrofoam, furniture, batteries, PVC (IV bags), donations and pallets.

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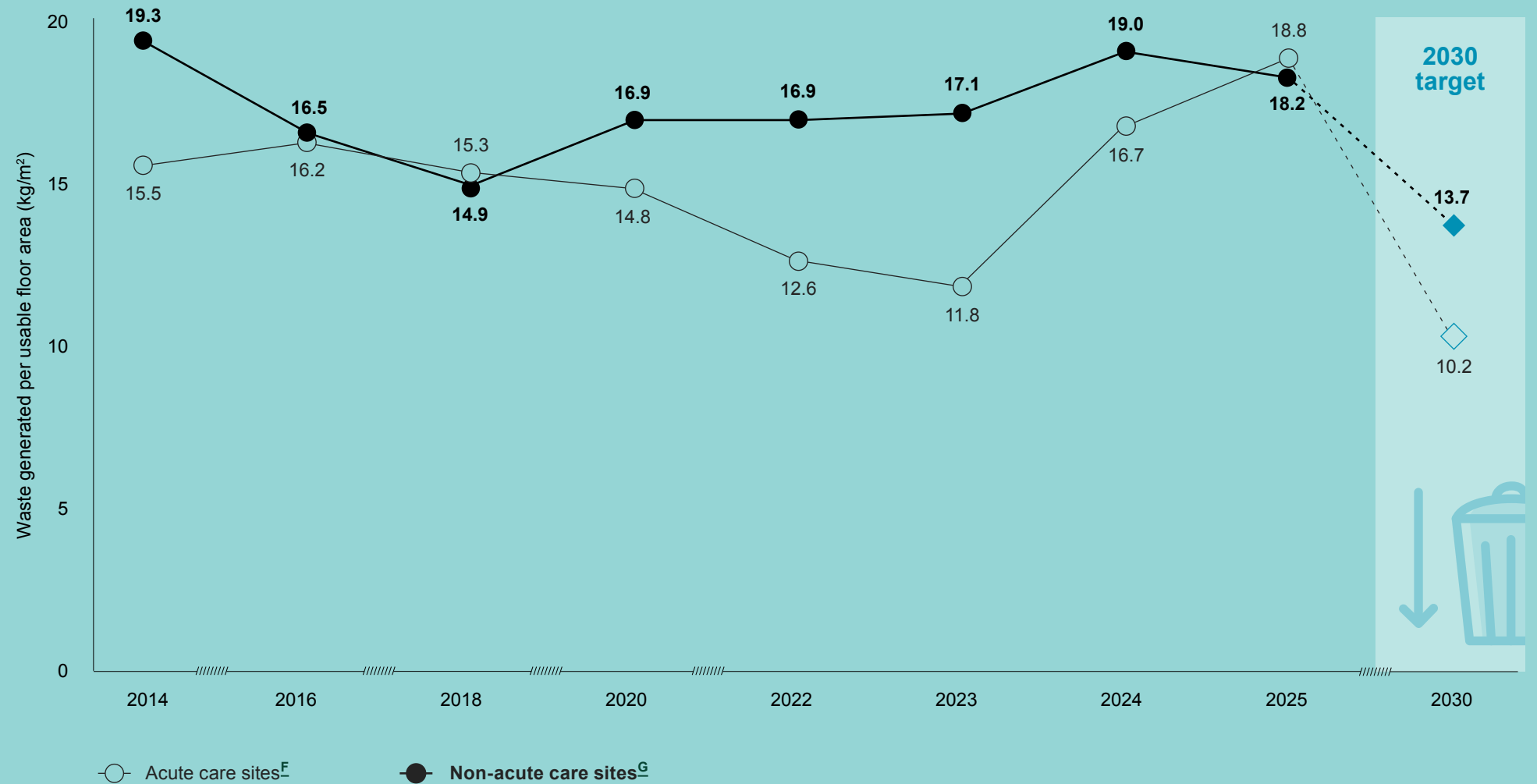
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# Waste generation per usable floor area



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## Water

Key performance indicator (metric)	2025 results	2030 target
Decrease the amount of water used per usable floor area in owned <sup>H</sup> buildings from 2010 levels (% change of m <sup>3</sup> /m <sup>2</sup> /year)	<b>13%</b>	35% 

- On track to meet target
- Slow progress toward target
- Behind schedule to meet target and requires attention

### Understanding results

- ▶ Patient care and infection control requirements necessitate adherence to health and safety standards, which often limit opportunities to reduce water usage. Many processes — such as sanitation, sterilization and patient hygiene — are water-intensive and cannot be scaled down without the potential of compromising care quality or regulatory compliance.
- ▶ Older facility infrastructure and plumbing systems may not support the integration of advanced water-saving technologies without substantial upgrades. As a result, while efficiency improvements are pursued where feasible, the potential for overall water reductions in health care environments remains limited.
- ▶ Our ability to effectively monitor water use across sites is limited, primarily due to insufficient sub-metering infrastructure. As a result, it is challenging to accurately identify issues, target opportunities for improvement and implement timely corrective actions.

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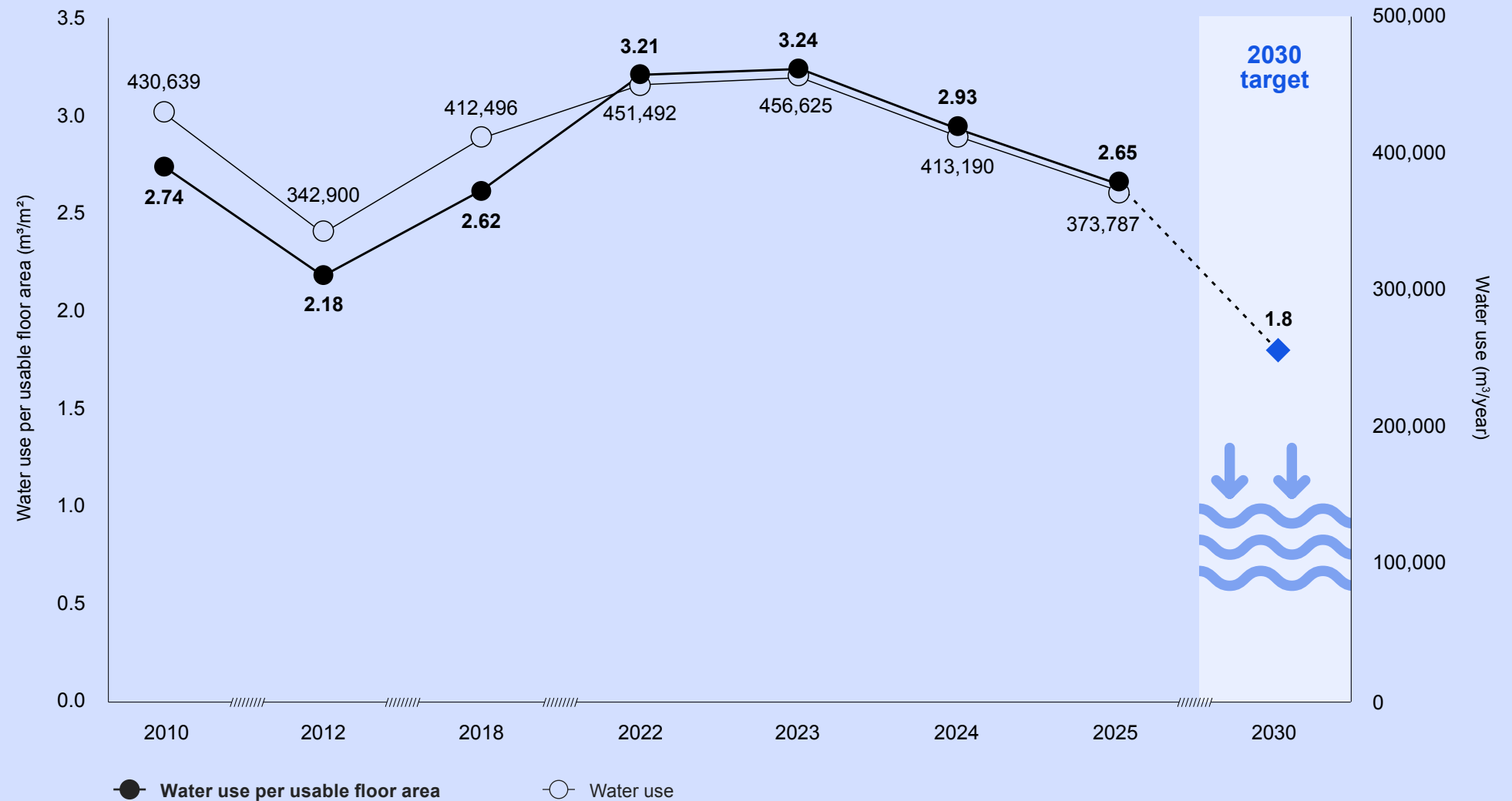
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# Water use\* and water use per usable floor area



\* Water use is not metered in all areas of facility space<sup>H</sup>.

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Burnaby, B.C.

# Our leadership

Providence embraces planetary health through initiatives that reduce emissions, enhance climate resilience and improve our operational practices. We are committed to responding to evolving climate challenges while maintaining our exceptional standards for care. The following highlights showcase our recent progress.

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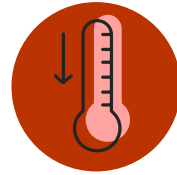
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# Climate risk management

## Select 2025 actions and achievements

### ▶ Climate resilient health infrastructure

Integrated climate resilience considerations into the planning of the new St. Paul's Hospital and St. Vincent's: Honoria Conway-Heather long-term care home, with a focus on enhanced cooling capacity, indoor air quality and preparedness for extreme weather and future climate conditions.

### ▶ Extreme weather resilience in long-term care

Completed a climate vulnerability survey at Youville Residence, identifying priority adaptation actions and informing site-specific planning while contributing to the national HeatADAPT initiative to advance evidence-based heat management strategies and protect vulnerable patients, staff and medical staff in long-term care.

### ▶ Heat resilient infrastructure

Advanced infrastructure resilience upgrades, including cooling system enhancements and targeted building envelope improvements such as window replacements at Mount Saint Joseph Hospital, improving thermal comfort and building performance during extreme heat. Clinical staff provided positive feedback on the improvements.

### ▶ Climate ready operations

Supported the integration of climate considerations into facility operations and emergency preparedness planning, drawing on lessons from site-level assessments, infrastructure upgrades and recent extreme weather events.

### ▶ Climate informed care delivery and research

Contributed to research and knowledge generation on climate-related health impacts, including work exploring the relationship between extreme heat and patient outcomes, helping inform future planning, operational decision-making and care delivery approaches.



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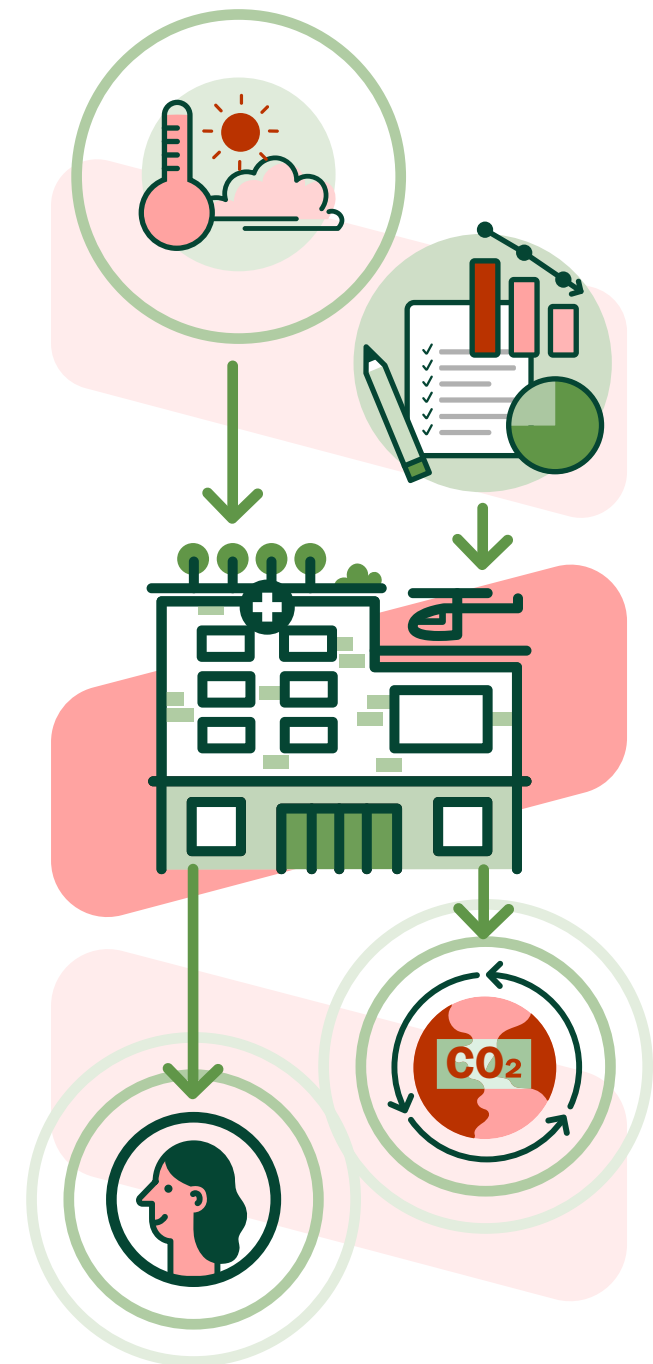
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### Plans moving forward

- ▶ Advancing low-carbon resilience through existing building upgrades, energy studies and continuous optimization, while strengthening integration into new construction and major renovations through application of the LCRES Guidelines, site-specific performance targets and early engagement with planning and design teams.
- ▶ Expanding climate resilience planning and assessment activities, including climate vulnerability surveys and exposure screening, to inform master planning, capital investment decisions and retrofit prioritization across aging facilities.
- ▶ Enhancing readiness for climate-related events by integrating climate considerations into facility operations, infrastructure planning and emergency preparedness, while supporting coordination between facilities, clinical teams and leadership.
- ▶ Leveraging insights from HeatADAPT and site-level assessments to improve cooling strategies, indoor environmental quality and protection of vulnerable patients, staff and medical staff during extreme heat events.
- ▶ Advancing innovation through demonstration projects, renewable energy systems, electrification and emerging technologies, while collaborating with external partners to support long-term resilience, energy security and reduced emissions.
- ▶ Expanding staff and medical staff engagement initiatives, including GreenCare and Energy Wise programs, to build awareness of climate impacts and support actions that reduce energy use and improve environmental performance.
- ▶ Strengthening education, outreach and internal tools to connect climate action to health outcomes, improve staff and medical staff understanding and support consistent, informed action across the organization.



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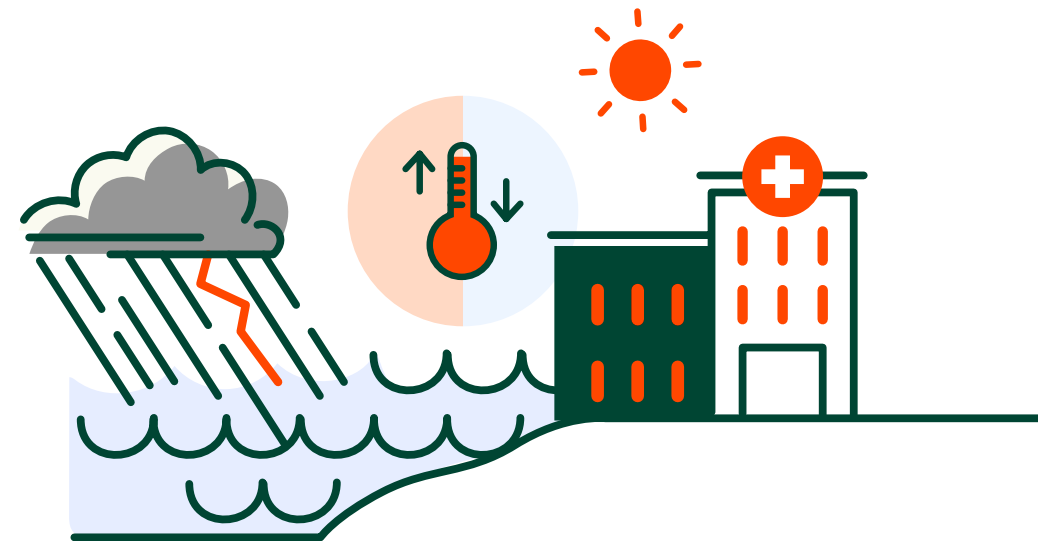


# Buildings

## Select 2025 actions and achievements

- ▶ **Central energy monitoring system**  
Initiated the ISO 50001 project to develop a comprehensive central monitoring system for energy consumption of Providence's seven core facilities. The system will provide detailed insights into buildings and equipment performance to support future planning and prioritization of energy-efficiency improvements.
- ▶ **Food waste-to-energy initiative**  
Launched a food waste-to-energy initiative in collaboration with the University of British Columbia biotechnology research group. The project aims to convert food waste generated at hospital facilities into renewable energy (biogas) and nutrient-rich compost.
- ▶ **Direct digital control system**  
Initiated installation of a direct digital control system at St. Vincent's: Honoria Conway-Heather to enhance energy efficiency, reduce operational costs and improve occupant comfort through automated control of lighting, heating, ventilation and air conditioning systems.
- ▶ **Dual-fuel rooftop unit**  
Initiated installation of a new dual-fuel rooftop unit at Holy Family Hospital. The system combines electric heat pumps and gas furnaces to reduce heating energy consumption and greenhouse gas emissions.
- ▶ **Solar energy projects**  
Initiated installation of a solar array at St. Vincent's: Brock Fahrni and an expansion of the existing solar array at Holy Family Hospital.
- ▶ **Research on emissions reduction**  
Completed an assessment of steam condensate recovery opportunities at St. Paul's Hospital to identify options for reducing steam and natural gas consumption.

Providence proactively partners with utility companies to fund energy-efficiency and emissions-reduction initiatives, reinvesting revenue into infrastructure and operations that improves risk management alongside energy and emissions management. In 2025, we generated \$2.15 million in capital revenue and \$178,000 in operating revenue, helping reduce operational financial pressures, fund studies to support data-informed decision-making, test innovative technologies and support business cases for capital project implementation.



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### Plans moving forward

- ▶ Identifying opportunities to integrate energy and emissions-reduction strategies, optimize infrastructure and equipment performance and support system-level planning as energy infrastructure and assets are renewed.
- ▶ Implementing a combination of low-emission designs for new construction and energy retrofits for existing facilities in collaboration with internal and external partners.
- ▶ Initiating a study to assess the feasibility of a net zero microgrid at St. Vincent's: Honoria Conway-Heather. The proposed system is designed to manage and optimize multiple energy sources, such as solar photovoltaic panels and battery energy storage, to reduce reliance on the utility grid, lower emissions and enhance energy resilience and reliability for critical health care operations.
- ▶ Exploring innovative solutions such as displacement ventilation, which delivers low-velocity cool air near floor level. This approach carries contaminants away from occupants, improves air quality, reduces energy use and enhances infection control compared to conventional ventilation systems. Learn more [here](#).



Launched the updated [Low Carbon Resilience and Environmental Sustainability Guidelines](#) for Health Care New Construction. The revised format improves clarity and ease of use for project managers and consultants, helping teams embed climate resilience, emissions reduction and environmental sustainability into project design and construction.

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# Fleet vehicles and transportation

## Select 2025 actions and achievements

- ▶ **Facility design guidelines for electric devices**  
Created clear design guidelines to support the design and construction of facilities for electric devices such as e-bikes and e-scooters. The guidelines reduce safety risks, improve consistency across health care sites and support more sustainable travel options.
- ▶ **Active transportation study**  
Completed an active transportation accessibility scan reviewing how easy it is to walk, bike, roll or take public transit to 10 Providence health care sites. This work identified barriers and opportunities to improve access and enable staff and medical staff to travel by active and public transit modes.
- ▶ **Electric mobility community of practice**  
Launched an Electric Mobility Community of Practice that brings together teams from across the health system to share knowledge on topics such as electric vehicle fleets and safe storage for e-bikes and e-scooters.
- ▶ **Business-related vehicle use emissions**  
Analyzed emissions from staff and medical staff using personal vehicles for work purposes. Identified potential opportunities to reduce transportation-related emissions and operational costs.
- ▶ **Commuting by public transit**  
Increased participation in the Transit Discount Program by nine per cent in 2025, demonstrating growing uptake of a program designed to support sustainable commuting options. The percentage of commutes made by public transit continues to exceed the percentage made by single occupancy gas- and diesel-powered vehicles (GreenCare Survey).

## Plans moving forward

- ▶ Purchasing an electric utility truck for inter-facility equipment and supply transfers.
- ▶ Continuing to expand measurement of transportation emissions beyond fleet vehicles to identify and target the most significant opportunities for emissions reduction.
- ▶ Continuing to work collaboratively with transportation partners to address gaps and improve access to sustainable transportation options.
- ▶ Applying the active transportation accessibility scan to inform transportation strategies across Providence facilities.
- ▶ Continuing to collaborate with municipal and regional partners to improve access to Providence sites by sustainable transportation.



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# Paper

## Select 2025 actions and achievements

### ▶ Switching to sugar sheet

In 2025, PHSA Procurement fully transitioned its largest Lower Mainland warehouse from virgin paper stock to 100 per cent sugar sheet stock<sup>1</sup>, which is now the only option for printer paper orders for Providence. This high-quality paper stock is produced with sugar cane pulp instead of wood fibre. The shift supports emissions reduction efforts, achieving up to 55 per cent lower life cycle GHG emissions and saving 26 trees per tonne of paper produced.

### ▶ Digital technologies

Implemented Jolt, a temperature monitoring and inspection reporting system, to help Food Services improve food safety management while reducing manual record-keeping and paper use.

### Plans moving forward

- ▶ Promoting paperless invoicing within departments where operationally feasible.



# Refrigerants

## Select 2025 actions and achievements

### ▶ Refrigerant audit

Established an annual audit to monitor the types and quantities of refrigerants used across Providence facilities. This helps identify potential leaks, ensure proper handling and maintain compliance with environmental reporting requirements. Providence collected equipment inventories and refrigerant charge data for major mechanical, kitchen and medical systems, enabling refrigerant leakage calculations using the Climate Action Secretariat methodology.

### Plans moving forward

- ▶ Collecting more detailed technical data — such as refrigerant type, charge quantity and applicable leak-rate standards — to better monitor equipment performance and inform maintenance and replacement decisions.
- ▶ Reviewing refrigerant phase-out plans and assessing their implications for equipment performance and environmental impacts.



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# Improving patient care with planetary health

Staff and medical staff across many disciplines and departments at Providence are working together to improve sustainability in practical ways that support day-to-day care. This work improves the quality of service delivery and reduces operating costs while supporting better health outcomes and staff and medical staff well-being. The examples below show how we are reducing the environmental impact of our services while building a more resilient and effective health system.

## Select 2025 actions and achievements



Launched a project to increase the reuse of retired medical devices within Lower Mainland Biomedical Engineering by piloting a shared web-based platform.

Secured **\$160,000** in funding to develop an emissions methodology and calculator that will support a standardized provincial approach to baselining and tracking health care emissions.



Researched the impact of carbon emissions when patients and providers choose virtual care options instead of in-person mental health appointments.

An in-person visit emits the equivalent of **2.93** kilograms of carbon dioxide (kg CO<sub>2</sub>e),

compared with **0.004** kg CO<sub>2</sub>e for a phone consultation and **0.07** kg CO<sub>2</sub>e for a virtual consultation. The findings will inform policy and practice within the Mental Health Program.



Reimagined the total testing process in clinical laboratories at St. Paul's Hospital and Mount Saint Joseph Hospital. Reduced monthly specimen container usage by **40** per cent,

cut solid waste per test result by up to **78** per cent, reduced freezer archive storage volume by **67** per cent and saved an estimated **486** hours of manual transcription annually.

[Learn more.](#)



Developed medication returns process for the new St. Paul's Hospital to reduce medication waste.

Launched a food waste-to-energy initiative in collaboration with the University of British Columbia to convert food waste generated at hospital facilities into renewable energy (biogas) and nutrient-rich compost.



Developed a provincial food strategy to coordinate sustainable food-system action through 2027, including shared governance, sustainability indicators, plant-forward menus, sustainable procurement and food waste reduction.

Hosted sustainability fairs at St. Paul's Hospital and Mount Saint Joseph Hospital, engaging nearly

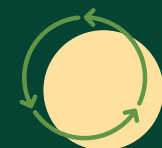
**300** staff and medical staff with interactive and educational activities focused on sustainable quality improvement, water stewardship, waste sorting, sustainable commuting options and more.



Expanded recycling of patient care items, including PPE, IV bags and tubing to Mount Saint Joseph Hospital. Launched a new inhaler recycling program.



Switched to reusable breathing circuits for anesthesiology procedures.



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# Impact stories



Youville Residence, Providence Health Care

### From research to readiness



Extreme heat is a growing threat in long-term care, where residents are especially vulnerable. At Youville Residence, Providence is combining research with insights from residents, staff and medical staff, and facility assessments to build a comprehensive understanding of how people and buildings experience extreme heat. This approach supports evidence-based responses grounded in the operational realities of long-term care.

[Read more](#) ►



Solar array at Holy Family Hospital, Providence Health Care

### Power security meets cost savings



Providence has installed 350 photovoltaic panels across nearly the entire rooftop of Holy Family Hospital. The installation marks the largest solar deployment across Providence facilities to date. Since March 2025, the system has generated 192 megawatt-hours of electricity, supplying roughly 12 per cent of the facility's total power consumption and helping support the transition from natural gas to renewable energy.

[Read more](#) ►



Planting a tree at Holy Family Hospital: Dr. Melissa Lem, Fiona Dalton and Raluca Radu

### Trees for health



Staff, residents and community members planted trees at several Providence care sites as part of the Trees for Health Campaign, with a goal of planting more than 50 trees. The trees are primarily native to B.C. and were selected to support local birds, insects and wildlife. Each tree was donated to honour a health care worker, patient or resident.

[Read more](#) ►



Left to right: Marty Klassen, Erick Nguyen, Kathy Kohli, Kathleen Moore and Benson Low

### The PPE bench



The PPE Bench Project turns used PPE into durable outdoor benches. Each bench is made from more than 7,000 masks, and the recycled plastic is processed locally through a partnership with Vitacore. The first prototype was showcased at the St. Paul's Hospital sustainability fair, with bench installations planned for Mount Saint Joseph Hospital and other sites.

[Read more](#) ►

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# Our partners

We are grateful to the organizations listed below, whose partnership and collaboration have been instrumental in advancing our ongoing planetary health initiatives. We also work with a wide range of consultants who provide valuable expertise to support this work. While we are not able to acknowledge everyone individually, we recognize and appreciate their ongoing contributions.



Powell River, B.C.

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## B

BC Emergency Health Services  
BC Housing  
BC Hydro  
BC Institute of Technology  
BC Ministry of Emergency Management and Climate Readiness  
BC Ministry of Energy and Climate Solutions  
BC Ministry of Environment and Parks  
BC Ministry of Health  
BC Ministry of Infrastructure  
Binners' Project

## C

Canadian Association of Nurses for the Environment  
Canadian Coalition for Green Health Care  
CASCADES Canada  
Clean Start Property Services  
Clean River Recycling Solutions  
Climate Data Canada  
Clinical and non-clinical direct-care staff and leadership  
Clinical dietitians  
Communications  
Climate Solutions Division

## E

Environment and Climate Change Canada  
Environmental Services

## F

Facilities Maintenance and Operations  
Facilities Management Procurement  
Facilities Management Projects and Planning  
Finance  
First Nations Health Authority  
Food Services  
FortisBC  
Fraser Health

## G

Green Cities Foundation

## H

Health Canada  
Health Emergency Management BC  
Health Quality BC

## I

Indigenous Wellness and Reconciliation  
Infection Prevention and Control  
Innovation, Planning and Transformation  
Interior Health  
Island Health

## L

Local and regional governments

## N

National Research Council of Canada  
New St. Paul's Hospital Project team  
Northern Health

Nourish Leadership

## O

Office of Strategy & Results

## P

Pacific Climate Impacts Consortium  
Pacific Institute for Climate Solutions  
People and Health Informatics  
Provincial Nursing Skin and Wound Committee  
Provincial Health Services Authority

## Q

Quality and Patient Safety

## S

Simon Fraser University  
Support Services

## T

Trees for Life

## U

University of British Columbia

## V

Vancouver Coastal Health

## W

Waste Management  
Workplace Health and Safety

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# 2025 GHG emissions and offsets summary table

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<b>GHG emissions for the period January 1–December 31, 2025</b>	
Total BioCO <sub>2</sub>	264
Total emissions (tCO <sub>2</sub> e)	8,989
Total offsets (tCO <sub>2</sub> e)	8,725
<b>Adjustments to offset required GHG emissions reported in prior years</b>	
Total offsets adjustment (tCO <sub>2</sub> e)	-11
<b>Grand total offsets for the 2025 reporting year</b>	
Grand total offsets to be retired for the 2025 reporting year (tCO <sub>2</sub> e)	8,714
Offset investment (\$)	\$217,850
Offset investment (\$) including GST	\$228,743

**Retirement of offsets**

In accordance with the requirements of the Climate Change Accountability Act and the Carbon Neutral Government Regulation, Providence Health Care (the Organization) is responsible for arranging for the retirement of the offsets obligation reported on the left for the 2025 calendar year, together with any adjustments reported for past calendar years (if applicable). The Organization hereby agrees that, in exchange for the Ministry of Energy and Climate Solutions (the Ministry) ensuring that these offsets are retired on the Organization’s behalf, the Organization will pay within 30 days, the associated invoice to be issued by the Ministry in an amount equal to \$25 per tonne of offsets retired on its behalf plus GST.

- i BioCO<sub>2</sub> is included in total emissions but not total offsets. BioCO<sub>2</sub> (biological carbon dioxide) emissions are generated from organic, renewable sources such as biomass, waste, or fermentation, rather than fossil fuels.
- ii Emissions and offset investment amounts will be validated by the Climate Solutions Division prior to distributing invoices.
- iii “Grand total offsets to be retired” are rounded to a whole number before multiplying by \$25 per tCO<sub>2</sub>e.

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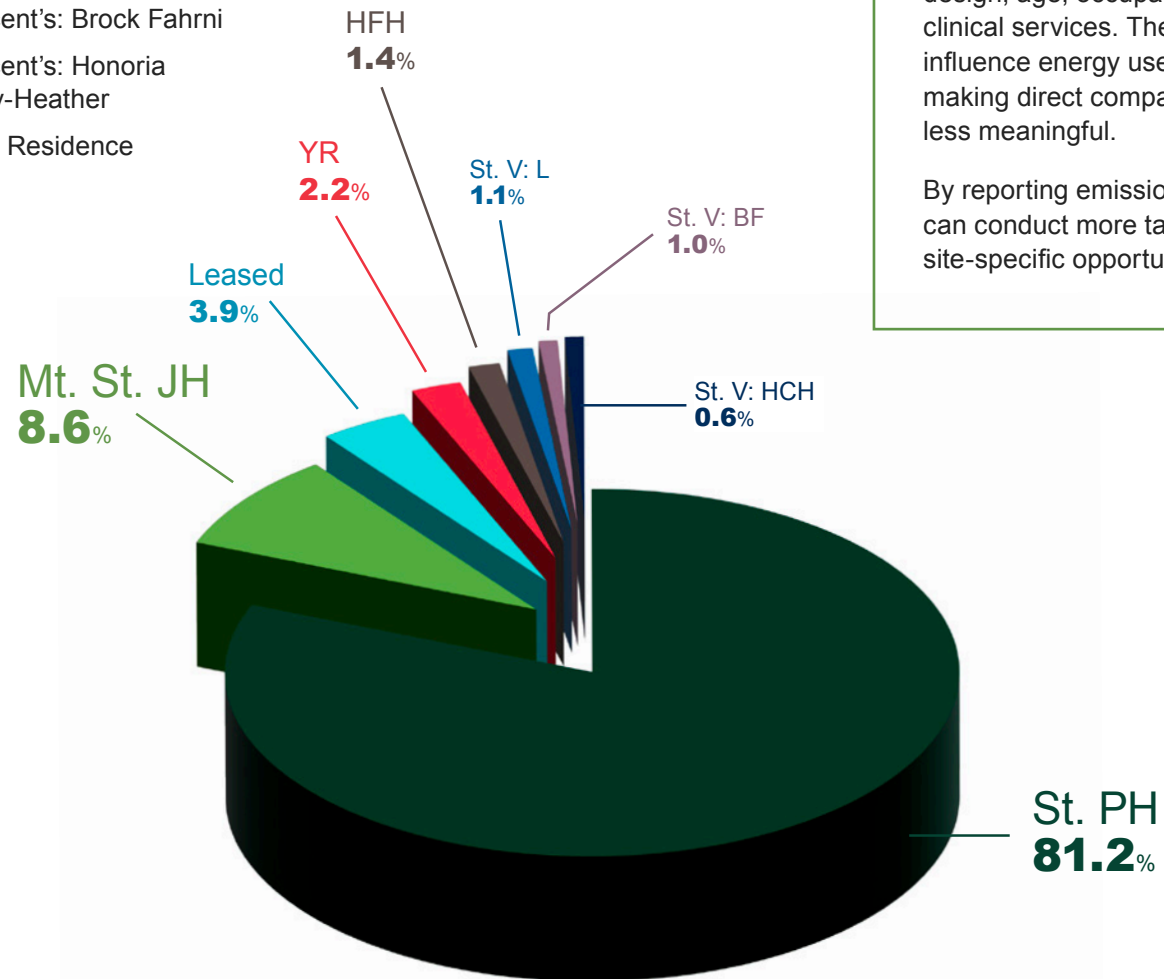
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# Site by site emissions

## Site legend

- ▶ **HFH** Holy Family Hospital
- ▶ **Leased** Leased sites
- ▶ **Mt. St. JH** Mount Saint Joseph Hospital
- ▶ **St. V: L** St. Vincent's: Langara
- ▶ **St. PH** St. Paul's Hospital
- ▶ **St. V: BF** St. Vincent's: Brock Fahrni
- ▶ **St. V: HCH** St. Vincent's: Honoria Conway-Heather
- ▶ **YR** Youville Residence



## Understanding site emissions

Site-level emissions are presented to provide a more accurate and meaningful understanding of performance across our portfolio. Each facility operates under different conditions, including variations in function (e.g. acute care hospitals, long-term care and specialized services), building design, age, occupancy levels and scope of clinical services. These factors significantly influence energy use and associated emissions, making direct comparisons at an aggregate level less meaningful.

By reporting emissions for individual facilities, we can conduct more targeted analysis and identify site-specific opportunities for improvement.

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- A World Health Organization: Measuring greenhouse gas emissions in health systems [cited 2026 May 6]. Available from: <https://www.who.int/publications/i/item/9789240118423>
- B [Organizational Readiness Playbook - CASCADES Canada](#)
- C Information source for LEED: [Canadian Green Building Council project database](#).
- D In 2025, Providence-owned facilities included in energy metering were:
- Holy Family Hospital
  - Mount Saint Joseph Hospital
  - St. Paul's Hospital
  - St. Vincent's: Brock Fahrni
  - St. Vincent's: Honoria Conway-Heather
  - St. Vincent's: Langara
  - Youville Residence
- E The GreenCare survey is an annual survey distributed to staff and medical staff within Fraser Health, Providence Health Care, Provincial Health Services Authority and Vancouver Coastal Health. The survey assesses perspectives, experiences and behaviours related to the environment and planetary health. Results help EES and Planetary Health teams monitor progress and identify opportunities to build a sustainable, climate resilient health system.
- F The waste portfolio reported is expanding, which will require our targets to be re-evaluated in 2026. At a provincial level there is work on standardizing waste metrics, which may influence how we report waste moving forward. Providence acute care sites included in waste-related key performance indicators were:
- Mount Saint Joseph Hospital
  - St. Paul's Hospital
- G Providence non-acute care sites included in waste-related key performance indicators were:
- Holy Family Hospital
  - St. Vincent's: Brock Fahrni
  - St. Vincent's: Honoria Conway-Heather
  - St. Vincent's: Langara
  - Youville Residence
- H In 2025, Providence-owned facilities included in water metering were:
- Holy Family Hospital
  - Mount Saint Joseph Hospital
  - St. Paul's Hospital
  - St. Vincent's: Brock Fahrni
  - St. Vincent's: Honoria Conway-Heather
  - St. Vincent's: Langara
  - Youville Residence
- I Trucost. Environmental Performance from Sugar Sheet Paper. Social Print Paper, 2017. Available from: <https://www.kpu.ca/sites/default/files/SocialPrintPaper-Trucost-SugarSheet-2017.pdf>.



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