



October 5, 2019

Ontario Ministry of Health
5700 Yonge St., Floor 6,
Toronto ON M2M 4K5

To Whom It May Concern:

The McNally Project for Paramedicine Research was established in 2014 to foster the growth and development of research capacity within and related to paramedicine by those close to practice. We do this through collaboration, education, engagement, and advocacy. The McNally Project now consists of over 60 members, fellows, senior fellows, and scientists from across Canada. We bring together a diverse set of research interests and expertise, connected by the common theme of paramedicine. It is our aim to contribute knowledge to the academic (scientific) literature on paramedicine and topics related to paramedicine. This is our motivation for providing comments on “Enabling New Models of Care for Select 9-1-1 Patients”.

In reviewing the proposed changes presented by the Ministry of Health to the Ambulance Act, we recognize these as positive contributions to meeting the diverse healthcare needs of Ontarians. We believe that the proposed changes will modernize our system and move to align it with a more patient-centred healthcare system, while improving care models and doing so with fiscal responsibility. We expect that these changes will improve provider experience, enable care provided by paramedics to be better aligned with the healthcare needs of the populations and sub-groups served, improve system performance and promote patient-centered outcomes. We view these changes as being aligned with strategies and evidence from other provinces and jurisdictions, and a global shift towards a greater recognition of the paramedic as an integrated health care provider.

As a group comprised of researchers within the paramedic discipline, we are excited to see that a clause has been added to the Ambulance Act to allow for pilot projects. Facilitating the production of knowledge through research is an important first step. However, there is presently an absence of language that would enable paramedic-led knowledge production, translation, use, and/or implementation of such evidence. Supporting and enabling these activities through legislative language or policy directives would provide a mechanism to enable the evaluation of existing practices and proposed changes - as well as advances and growth in the system - by those closest to practice. Further, including such language would align with other related partners, including the Canadian Institute of Health Research, which has provided significant information and guidance on these issues ¹.

There is now an increased and growing capacity for paramedics to lead and contribute to knowledge production, translation, use, and evaluation targeted toward the evolution of paramedicine. As

¹ See *Knowledge Translation in Health Care: Moving from Evidence to Practice* available at <http://www.cihr-irsc.gc.ca/e/40618.html> as an example of the Knowledge-to-Action Cycle and a guide to enabling implementation of research findings.

paramedicine evolves, it will be increasingly important to enable our system and paramedics, who are close to practice, to conduct scientific inquiries in support of advances. The human resources and will necessary to conduct this research now exist. We therefore encourage the Ministry to provide language that formally supports these efforts such that the system can advance using scholarship and evidence for the benefit of all Ontarians. The McNally Project is at the service of the Ministry to aid in the development of such language or strategy.

On behalf of The McNally Project,

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