Chairman Merrin, Vice Chairman Manning, Ranking Member Boyd and members of the House Health Committee, my name is David Axelson, M.D., Chief of Psychiatry, Big Lots Behavioral Health Services at Nationwide Children’s Hospital. I am here today to testify on HB 12 sponsored by Representative Don Manning and Representative Thomas West, which establishes the Ohio Children’s Behavioral Health Prevention network Stakeholder Group.

Nationwide Children’s Hospital is now building the United States’ largest behavioral health and research center dedicated to children and adolescents on a pediatric medical campus. We have spent the last seven years dramatically expanding our behavioral health initiatives, including creating the national On Our Sleeves campaign to raise public awareness about pediatric mental health, training community providers to better provide behavioral health services, and integrating behavioral health programs into schools.

We have undertaken these efforts not because we want to brag about them, but because we feel we have no other choice if we truly care about the wellbeing of children and their families. The statistics surrounding pediatric mental health conditions can be shocking:

- 11% of children 8-11 years of age have had a mental illness with severe impairment
- 22% of teens 13-18 years of age have had a similarly impairing mental illness
- 50% of all mental illness starts by age 14
- The suicide rate in the 10-19 year old age group increased 56% from 2007 to 2016, and it is now the second leading cause of death at these ages, behind only motor vehicle crashes

Beyond those national statistics, we have found that every time we expand our services, we are met with greater need. In 2014, we saw 31,000 Behavioral Health patients. In 2018, that number was over 33,000. We created an emergency psychiatric evaluation center in 2014, and had 1,379 visits the first year. Last year, we had 4,944 visits.
Nationwide Children’s Hospital is doing life-saving work in the cutting-edge science of genomics through the Abigail Wexner Research Institute. We have created one of the largest and oldest pediatric accountable care organizations in the country with Partners For Kids. And yet the Board of Directors and senior hospital leadership have made Behavioral Health a pillar of our future strategic plans, standing alongside those other groundbreaking projects. Behavioral health is that important to children’s overall health.

While health system strategies to address behavioral health needs are appropriate and necessary, this is a state and national problem. To best position Ohio to support the mental wellbeing of children and best outcomes for those children with mental illness we must take a new approach, such as that outlined in House Bill 12. The legislation creates a stakeholder group charged with coordinating the creation of a “comprehensive learning network to support young children and their families and facilitate children’s social, emotional, and behavioral development.”

A statewide comprehensive learning network is a concept that has proven effective through the success of the Solutions for Patient Safety (SPS). Founded by Ohio children’s hospitals, SPS is now an international network of over 130 hospitals committed to transparency and shared learning in the interest of patient safety.

House Bill 12 suggests applying a similar structure to pediatric behavioral health. In the interest of promoting healthy social, emotional and behavioral development, those engaged in the network will participate in robust data collection, develop and test prototypes, analyze results and spread best practices. This is the kind of collaborative focus on children’s behavioral health that can make a difference.

Chairman Merrin and members of the committee, thank you for allowing me to testify today on House Bill 12. I am happy to answer any questions at this time.