



Ohio Children's Hospital Association
Saving, protecting and enhancing children's lives

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Opposition Testimony before Ohio Senate Health Committee
House Bill 73
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Chairman Huffman, Vice Chair Johnson, Ranking Member Antonio, and members of the Ohio Senate Health Committee. Thank you for the opportunity to submit opposition testimony in response to House Bill 73. I serve as the President & CEO of the Ohio Children's Hospital Association (OCHA) and also have the privilege of serving as President to the Children's Hospitals' Solutions for Patient Safety (SPS).

OCHA represents the world's best statewide network of children's hospitals – Akron Children's Hospital, Cincinnati Children's, Dayton Children's, Nationwide Children's Hospital, UH/Rainbow Babies & Children's Hospital and ProMedica Russell J. Ebeid Children's Hospital. Several of our institutions are ranked among U.S. News & World Report's best children's hospitals, and all our members are ranked best in class in the nation in various aspects of pediatric care. Ohio is the only state in the nation with a flagship children's hospital within a two-hour drive of every family, including our most rural parts of the state.

SPS represents 150 children's hospitals working together to help each individual hospital make progress on a journey to zero harm. SPS is the only such effort in the nation that is specifically focused on improving pediatric and employee safety. This mission requires an all teach, all learn commitment alongside partnering with families and front-line staff. Since 2012, our national effort has saved 27,509 children from serious harm and led to an estimated savings of \$585.9 million, with a consistent upward trend of harm prevented every month. Adverse drug events are one of the hospital-acquired conditions that SPS aims to eliminate. On behalf of OCHA and our member hospitals, I write to you today in opposition of HB 73.

HB 73 would mandate the filling of prescriptions from outside prescribers not affiliated with one of our children's hospitals by our clinical staff inside a children's hospital. It also seeks to require children's hospitals grant temporary privileges to an outside physician prescriber in certain instances. Blindly administering medication to a child, outside the recommendation and approval of the patient's clinical care team, is deeply concerning. It is important to note we take no issue with the use of off-label medications, generally speaking. This is a common practice in pediatrics and children's hospitals would never oppose the use of medication solely on the basis of its use being deemed "off-label."

The scope of HB 73 eliminates the checks and balances of safe and effective medication use including the professional judgement of the pharmacist and the patient's children's hospital care team. The majority of patients in the hospital for care are managed by multidisciplinary care teams. These teams include physicians, nurses and pharmacists who work together and are focused on using evidence based, data informed treatment plans that will provide the best outcomes for our patients. If enacted, HB 73 would erode children's hospital physicians' decision-making abilities, allowing a single external provider to usurp the plan of care established by full the hospital treatment team.

To maintain quality and patient safety, the process for granting privileges takes time, and generally longer than five days. Standard credentialing processes for physicians require we verify all of their training and licenses. We occasionally find physicians are not qualified as they say they are. In order to ensure the accuracy of the process and safety to the patient it takes up to six weeks to do this correctly. The five day window would put patients and families at risk. This bill would ultimately allow out of state physicians to come in and override the evidence-based care plan developed by the children's hospital care team. We are extremely concerned that this bypassed system would be allowed for all patients in all circumstances. This is far beyond "Right to Try" policies.

Children's hospitals regularly incorporate a team approach in caring for all children. This includes the family and willingness to consider multiple ideas to optimize health. We would support the opportunity to share best practices with other hospitals and healthcare providers and learn from one another. We cannot support being forced to administer medication that could be harmful to the patients we serve.

Under SPS, we often say, "People don't make mistakes, systems make mistakes." We pride ourselves in constantly pursuing quality improvement, to achieve a culture of safety for patients and employees. HB 73 has emerged due to patients and their loved ones feeling dismissed during a time of great suffering. We believe there are opportunities to improve communication in the hospital setting, promote family voices, and improve health while maintaining safety protocols. This cannot be achieved through HB 73. We respectfully ask that you do not support this legislation. Thank you for your time.

The SPS Journey Toward Zero Harm

