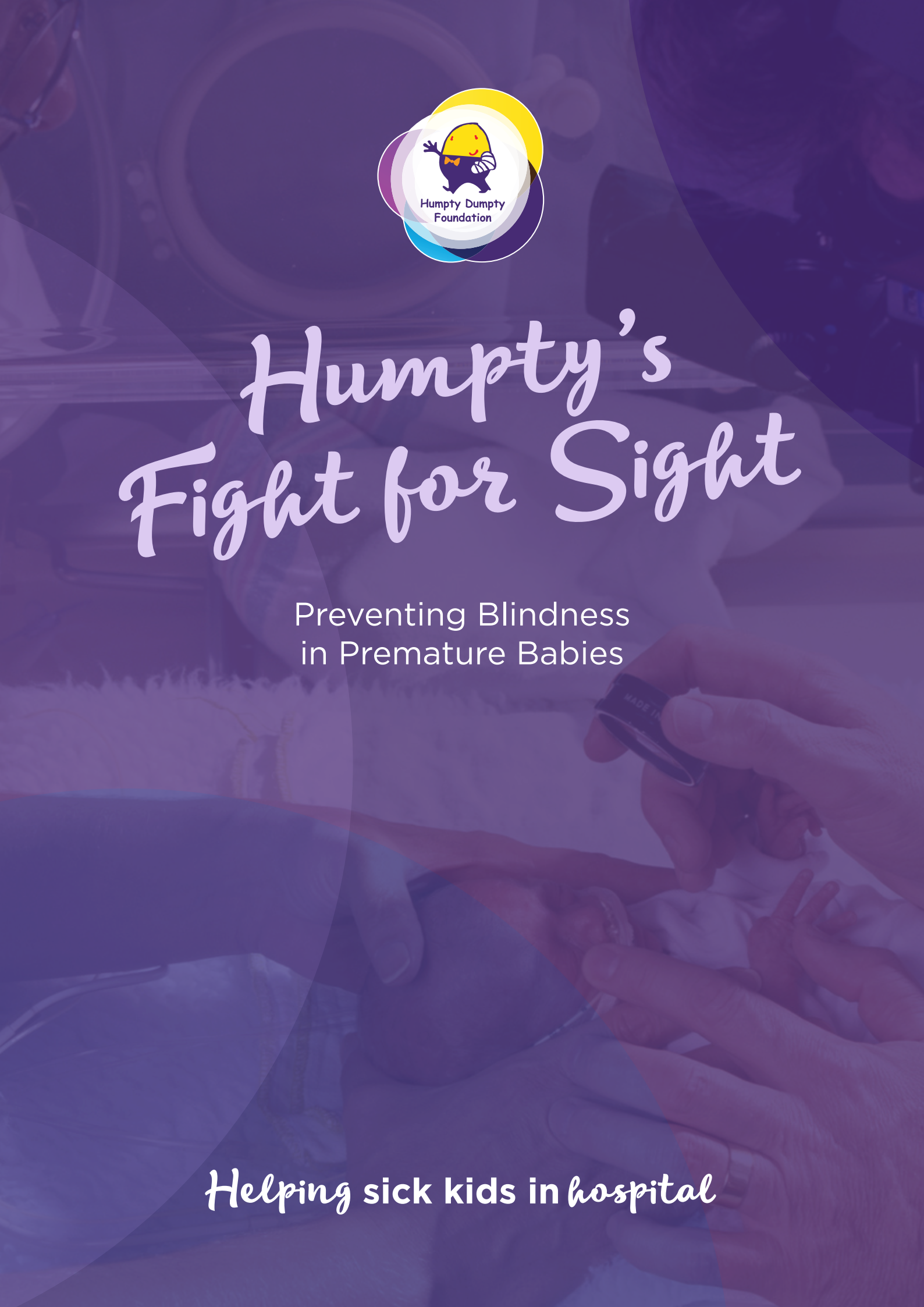


Humpty's Fight for Sight

Preventing Blindness in Premature Babies

Helping sick kids in hospital

Humpty's Fight for Sight

Preventing blindness in premature babies by funding lifesaving digital retinal cameras for NSW's busiest Neonatal Intensive Care Units.

Premature babies in NSW are at risk of losing their sight as a result of Retinopathy of Prematurity (ROP). This is the leading cause of childhood blindness, yet with timely screening and treatment, it is preventable. The tiniest, most vulnerable infants are at the highest risk. As more premature babies survive, demand for eye screening is rising sharply, placing extra pressure on a system with too few paediatric ophthalmologists to meet the need.

NSW's leading ophthalmologists, neonatologists and paediatricians agree the state must urgently adopt a digital retinal imaging model of care.

Digital retinal imaging offers a better way. By introducing this modern model of care into NSW's busiest NICUs, outdated and invasive eye examinations can be replaced with a system that is faster, gentler and more reliable. Using fixed retinal cameras, nurse-led screening, and remote specialist review, every baby can receive timely, accurate assessment, no matter where they are born.

This case for support seeks urgent funding to equip five of NSW's largest neonatal intensive care units with the tools and model of care needed to protect babies' sight, giving every child the best possible start in life.

What is ROP

Retinopathy of Prematurity (ROP) is an eye disease that can cause blindness in premature babies. It happens when the blood vessels in a baby's eyes don't develop properly.

The risk of developing ROP is highest in the tiniest and most vulnerable infants.

With more premature babies surviving thanks to advancements in medical care, the demand for eye checks and treatment is increasing.

- **Retinopathy of Prematurity (ROP) is the leading cause of childhood blindness, but with early intervention, we can prevent blindness.**
- **80% of babies born at 25 weeks survive — one in three develops serious ROP.***

*Report Of The Australian And New Zealand Neonatal Network

Why Humpty, why now?

This project was sparked by an urgent call from Dr Jeremy Smith, FRANZCO, FRACS a paediatric ophthalmologist for Westmead Hospital and Children's Hospital at Westmead.

As a leading expert in the field, he reached out to Humpty knowing we could move quickly to fund and deliver the required equipment.

With the support of the Humpty Dumpty Foundation, we're not just improving care, we're transforming the future for thousands of premature babies. By protecting their sight today, we're giving them the chance to see all the possibilities of tomorrow.

Dr Jeremy Smith,
FRANZCO, FRACS

Funding Opportunity: Equipping Hospitals. Protecting Sight. Advancing Care in NSW.

Humpty is committed to ensuring that premature babies receive the lifesaving eye care they need to prevent avoidable blindness.

We are seeking support to fund five nurse-operated digital retinal cameras for major NICUs across NSW. These cameras are not currently supplied as essential capital equipment, leaving a critical gap in care.

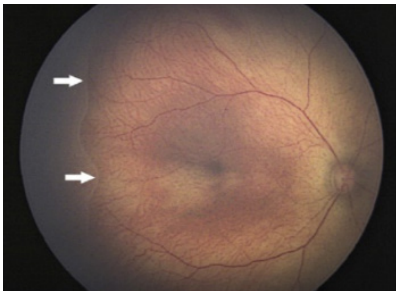
With your support, we aim to deliver all five units within the next 12 months. This is one of Humpty's most significant and ambitious projects, but one we are determined to achieve. **This is Humpty's Fight for Sight.**

Our Goal

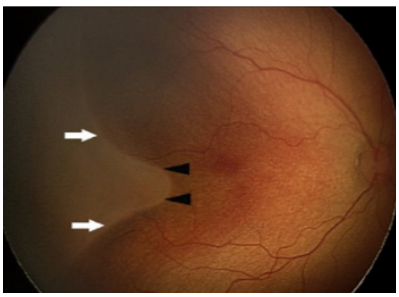
We're excited to share that two units have already been donated. Our goal is to fund three more at $219,000 each, making this a $1 million project. Join us in delivering this critical project; contact us at **claire.reaney@humpty.com.au** or call 1300 486 789 to join Humpty's Fight for Sight.

How do we *treat* ROP

ROP can cause blindness — but when caught early, it can be treated and save a baby's sight. Timing is everything, which is why regular eye checks are critical for premature babies.



Stage 1



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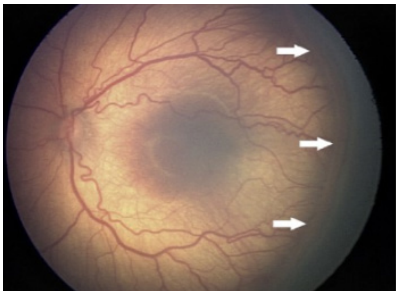
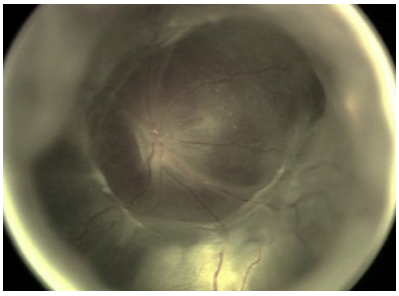


Stage 3 - Vision Accutely Threatened



Stage 4 - Legally Blind

Currently

- NICUs conduct weekly ROP screenings of at-risk newborns to detect the condition before it becomes untreatable.
- This is carried out by a paediatric ophthalmologist using binocular indirect ophthalmoscopy at the bedside.
- The procedure involves inserting a speculum, applying local anaesthetic, and indenting the eye.
- These exams can be stressful for an infant and sometimes cause complications.

The impact on babies

- Most premature babies will need around five eye examinations during their hospital stay.
- Some, with more severe conditions, may need ten or more.
- For such fragile newborns, each exam is challenging.

Dr Jeremy Smith, FRANZCO, FRACS, conducting a ROP screening at Westmead Hospital, 2025

The problem NSW hospitals are facing

Thanks to advances in neonatal care, more premature babies are surviving than ever before. But with this progress comes increasing pressure on our healthcare system. In NSW, only paediatric ophthalmologists are qualified to screen for ROP, yet there is a severe shortage of these specialists and very few new doctors are entering the field.

Each year, around 4,000** ROP examinations are needed across the state, with high-risk babies often requiring ten or more screenings during and after their hospital stay. This demand is growing and the current model is no longer sustainable.

For families in rural and regional areas, the challenge is even greater. Many babies must be transferred long distances for screening because ROP requires repeated and timely checks.

On top of this, current bedside testing relies on hand-drawn notes that are subjective and not easily shared or stored in the baby's medical record.

The current landscape is a system under strain, where preventable blindness remains a very real risk. Without urgent action, more babies in NSW will lose their sight unnecessarily.

**RANZCO Guidelines for Retinopathy of Prematurity 2023*

Dr Jeremy Smith, FRANZCO, FRACS, with his hand drawn diagrams of ROP screenings

This is where Humpty comes in — Fight for Sight

There is a better way to protect premature babies from blindness. By introducing digital retinal imaging into NSW's busiest NICUs, we can replace outdated, invasive methods with a modern model of care that is faster, gentler, and more reliable.

This approach uses fixed retinal cameras, nurse-led screening, and remote specialist review to ensure every baby gets timely, accurate assessment, no matter where they are born.

The Solution

- Fixed retinal cameras installed in major hospitals.
- Trained neonatal nurses or clinicians capture high-quality images of a baby's eyes.
- Images are securely uploaded to the infant's electronic medical record.
- A paediatric ophthalmologist reviews the images remotely and determines whether follow-up or urgent in-person treatment is needed.

Benefits

- Frees up NICU beds from being used solely for ROP assessments.
- Gentler on premature babies, with fewer invasive exams and less handling.
- Creates a permanent, objective record enhancing continuity of care, enabling second opinions, and supporting medico-legal and training needs.
- Nurse-led digital screening fosters a collaborative model of care, empowering neonatal nurses with new skills and increasing workforce capacity.

Targeting the busiest NICU's in NSW

There are nine neonatal intensive care units across NSW, with the busiest units performing up to 400–500 ROP examinations every year. Humpty has chosen to focus on five of these hospitals, which see the highest number of patients and are best placed to deliver an immediate and measurable impact.

Equipping these NICUs with digital retinal cameras will not only safeguard the sight of hundreds of at-risk newborns each year but could also lay the groundwork for a future statewide rollout—ensuring timely intervention and treatment for ROP across all of NSW.

The ICON Digital Retinal Camera

This camera captures detailed images of a babies eyes which are then shared instantly with specialists, and added to the baby's digital medical record.

Humpty's target hospitals

Hospital

Westmead Hospital Neonatal Intensive Care Unit

The largest tertiary hospital, providing complex care to Western Sydney patients and a major trauma centre in NSW.

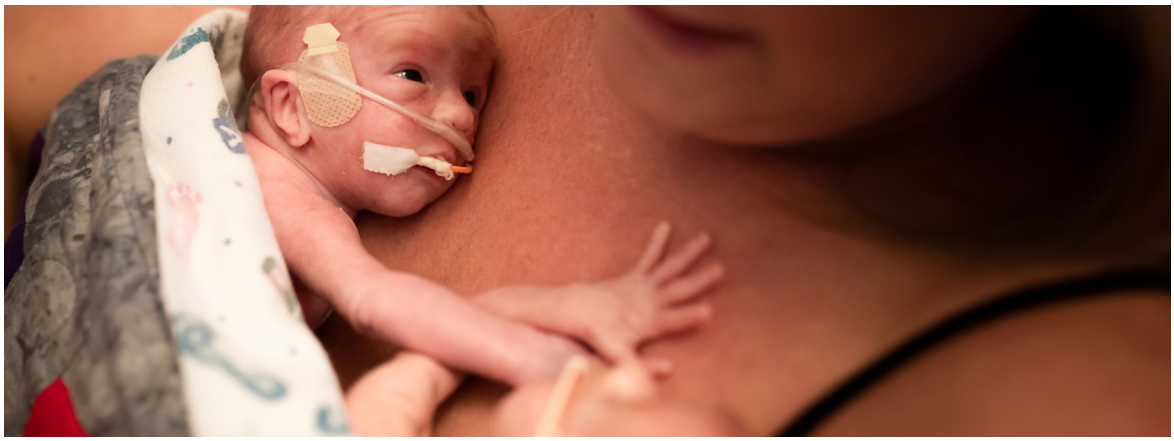
Average Babies Admitted Annually	1178
Average Number of Babies Requiring Screening (annually)	473
Average Number of Babies Treated as a Result of Screening	32

Hospital

Royal Hospital for Women

NSW's only dedicated women's hospital, specialising in health services for women, babies, and families.

Average Babies Admitted Annually	1040
Average Number of Babies Requiring Screening (annually)	353
Average Number of Babies Treated as a Result of Screening	4



Hospital

The Children's Hospital at Westmead Newborn Intensive Care (Grace Centre)

Equipment Donated

A leading paediatric hospital providing comprehensive care for children and specialised treatment for the state's sickest infants.

Average Babies Admitted Annually	532
Average Number of Babies Requiring Screening (annually)	100
Average Number of Babies Treated as a Result of Screening	14

Hospital

Royal North Shore Hospital

The largest public hospital in Northern Sydney, offering general and specialist services supported by education and research facilities.

Average Babies Admitted Annually	620
Average Number of Babies Requiring Screening (annually)	87
Average Number of Babies Treated as a Result of Screening	6

Hospital

Royal Prince Alfred Hospital

Equipment Donated

A principal referral hospital in Sydney, known for its wide range of specialist and tertiary services.

Average Babies Admitted Annually	800
Average Number of Babies Requiring Screening (annually)	80
Average Number of Babies Treated as a Result of Screening	3

How Humpty works

At Humpty, we work collaboratively with frontline healthcare teams to meet critical needs with timely action. For 35 years, Humpty has been helping place essential and often lifesaving equipment in public hospitals across Australia, now supporting over 510 hospitals and health services.

We aim to ensure every child has:

- Timely access to the equipment they need.
- The best possible care, close to home.
- Fewer transfers to distant hospitals.
- Better, more confident health outcomes.

We support hospitals, health professionals, and families by:

- Funding and delivering fit-for-purpose paediatric medical equipment.
- Strengthening the ability of local hospitals to care for children.
- Reducing pressure on clinicians and systems.
- Supporting family-centred care during vulnerable moments.

This enables:

- Faster diagnosis and more effective treatment.
- Greater equity across healthcare systems.
- Increased confidence for healthcare staff.
- Reduced trauma for children and families.

So that:

- Children receive the care they need, when and where they need it most.
- Families can stay together through illness and recovery.
- Hospitals are better equipped to support their communities.
- More children get the chance to grow up strong, safe, and well.

Humpty Dumpty Foundation

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ABN: 59 137 784 724
Charitable Status: DGR 1
CFN: #11046

Thank you for considering this opportunity to stand with doctors, nurses, and families to protect the sight of our most vulnerable newborns.

Helping **sick kids in** *hospital*