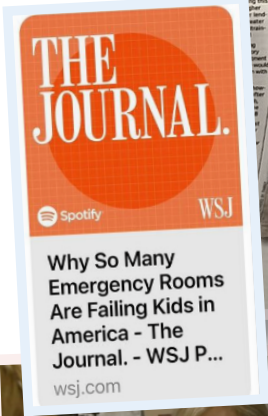


Emergency Rooms Are Failing Kids. This Hospital Stepped Up.

Melanie Street



Children Are Dying in Unprepared Emergency Rooms Across America

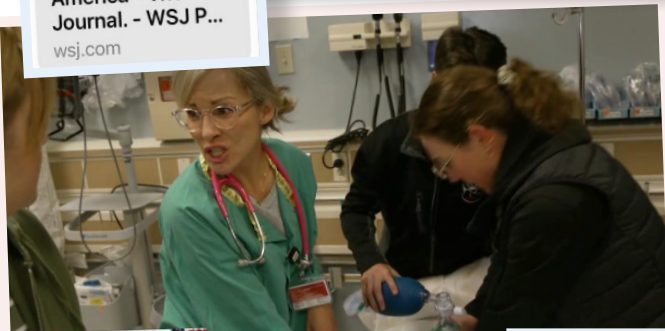


RECENT RESEARCH HAS PROVEN PEDIATRIC PREPAREDNESS IN EMERGENCY ROOMS CAN MEAN LIFE OR DEATH FOR YOUR CHILD.

WE MUST DEMAND CHANGE SO EVERY CHILD GETS THE BEST POSSIBLE CHANCE OF SURVIVAL AND OUTCOME.

This year, R Baby has raised significant awareness around this national crisis.

For 17 years, R Baby Foundation has provided life-saving training, education, and resources to improve pediatric emergency care for more than 1 million children each year.



EYE ON AMERICA
CBS EVENING NEWS
EMERGENCY ROOMS TRAIN TO REDUCE

The Rebecca Rabinowitz Tragedy: A Wake-Up Call for Pediatric Readiness in US Emergency Rooms

By BNN Correspondents Published: January 16, 2024 at 7:16 am EST



Social Impact Heroes: Why & How Phyllis Rabinowitz of R Baby Foundation Is Helping To Change Our World

Yitzi Weiner · Follow
 Published in Authority Magazine · 7 min read · May 2



THE IMPORTANCE OF PEDIATRIC EMERGENCY PREPAREDNESS IS FINALLY GETTING ATTENTION

Since R Baby was founded 17 years ago, we have worked to help Emergency Rooms become more prepared for pediatric emergencies and educate parents on the importance of pediatric readiness in every Emergency Room across the United States. The entire Emergency Medical System (EMS) was not set up with children in mind, and the medical community has been aware and has documented these shortcomings for over 30 years.

Our grants have provided life-saving training, education, and equipment that has helped over 1,200 hospitals, 6,500 physicians, and over 1,200 support staff increase their pediatric readiness and has impacted the care of more than 1 million children every year.

One in five children will go to the ER each year. Yet many ERs are not fully prepared for children and not all children have access to specialized pediatric care. In fact, 80% of children receive emergency care in general ERs that primarily treat adults and may not be well-prepared for children because of lower pediatric patient volume and lack of pediatric training and equipment. Enough is enough. Not enough progress has been made and **recent research has proven pediatric preparedness in Emergency Rooms can mean life or death for your child and pediatric readiness does save lives.**

RESEARCH SHOWS THAT A HIGH PEDIATRIC READINESS SCORE (>87 POINTS) IS ASSOCIATED WITH:

76% LOWER MORTALITY RATE IN ILL CHILDREN

60% LOWER MORTALITY RATE IN INJURED CHILDREN

1,400 AT LEAST CHILDREN'S LIVES SAVED ACROSS THE US EACH YEAR

CHILDREN HAVE A

30%

LOWER MORTALITY RISK AFTER RECEIVING INITIAL CARE AT EDS WITH A HIGH PEDIATRIC READINESS SCORE.



VIEW PEDIATRIC READINESS SCORES BY STATE

[Access to Optimal Emergency Care for Children](#)

[Access to High Pediatric-Readiness Emergency Care in the United States](#)

[Association of Emergency Department Pediatric Readiness With Mortality to 1 Year Among Injured Children Treated at Trauma Centers](#)

[Emergency Department Pediatric Readiness and Short-term and Long-term Mortality Among Children Receiving Emergency Care](#)

Helping ERs be prepared to treat children is critical. Children are not mini-adults. They need specialized pediatric-trained doctors, supplies, and equipment, especially in emergencies when every minute matters.

The United States rates a D- in access to emergency medical care for children and the median score for ERs was 69 out of 100.

IN 2023, THE ISSUE WE HAVE ALL WORKED SO HARD FOR RECEIVED NATIONAL ATTENTION

First, The Wall Street Journal wrote a powerful story focused on the critical need for improved pediatric emergency care and spoke with R Baby's Co-President, Phyllis Rabinowitz.

“Children Are Dying in Ill-Prepared Emergency Rooms Across America,” explores the root of why hundreds of children die or are left severely injured around the country each year after they are rushed to hospital emergency rooms that are poorly prepared to treat them.

They note that only about **14% of emergency departments nationwide have been certified as ready to treat kids**, or are children's hospitals specializing in treating young patients.

And, as R Baby has highlighted, parents in many places can't make an informed decision about where to take a child in a medical emergency.

And, while more than 70% of emergency departments have completed a federally funded assessment gauging whether they are ready for kids, results for individual hospitals are confidential.

Further, 25 states don't check ERs' pediatric preparedness at all!

focusing on key issues, such as naming child-emergency coordinators, color-coding equipment in the ER for children of different sizes and training staff to perform procedures on kids.

The Wall Street Journal's podcast covered the issue for a third time with the episode, **“Why So Many Emergency Rooms Are Failing Kids in America,”** which also highlighted the lack of pediatric readiness in ERs across the US.

CBS News featured a segment focused on the life-or-death consequences of pediatric emergency readiness.

BNN Breaking and **The New York Sun** published articles around the national crisis surrounding pediatric emergency readiness.

For more information on pediatric readiness, visit The National Pediatric Readiness Project. 🧡



The Wall Street Journal published a second story that shared an example of one of the nation's smallest hospitals taking steps to become one of the most prepared to see children in an emergency, **“Emergency Rooms Are Failing Kids. This Hospital Stepped Up.”**

The article shares how this hospital went from a pediatric readiness score of 51 to 97.5 by

“Many emergency doctors don't treat enough children to be able to spot life-threatening illnesses obscured by run-of-the-mill symptoms, or conditions more common in kids. Some ER staff default to drug doses and protocols meant for adults and either don't have or don't know where to find child-size gear in a crisis.”

~Wall Street Journal - Oct 2, 2023

Social Impact Heroes: Why & How Phyllis Rabinowitz of R Baby Foundation Is Helping To Change Our World



Yitzi Weiner · Follow

Published in Authority Magazine · 7 min read · May 2

AUTHORITY MAGAZINE INTERVIEWED R BABY CO-FOUNDER PHYLLIS RABINOWITZ SHARING HOW R BABY FOUNDATION IS HELPING TO CHANGE OUR WORLD.

Article quote: “The R Baby Foundation is currently advancing this movement now, and this cause can always use more support from fellow parents, caregivers, and changemakers. The perfect scenario would be the R Baby Foundation ceasing to exist because we know that will mean we built an effective EMS system for all children everywhere.”

[Read the full article.](#) 🕒

story and applaud her strength in turning the most difficult situation a parent can experience into a message of hope and positive change.”

[Watch the interview on YouTube at Celebrations Chatter.](#) 🕒

BBN CALLS FOR A WAKE UP IN US ERS

“Today, a pressing narrative unravels in the United States, underscoring a critical issue of pediatric readiness in emergency rooms. This issue is brought to the forefront by the heartbreaking story of Rebecca Rabinowitz, a young girl who tragically lost her life due to a misdiagnosed enteroviral infection.

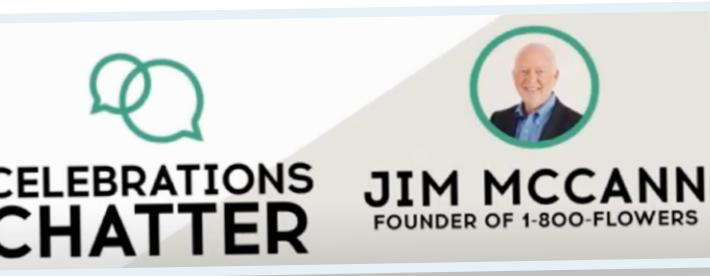
A Glaring Gap in Pediatric Readiness

Despite the fact that children account for one-fourth of emergency visits nationwide, the preparedness to handle these young patients remains tragically low. A study by the Journal of the American Medical Association Network Open paints a grim picture, awarding American hospitals a mediocre score of 69.5 out of 100 in pediatric readiness.”

[Read the full article.](#) 🕒

The Rebecca Rabinowitz Tragedy: A Wake-Up Call for Pediatric Readiness in US Emergency Rooms

By: BNN Correspondents · Published: January 16, 2024 at 7:16 am EST



JIM MCCANN AT 1-800 FLOWERS INTERVIEWED PHYLLIS AS PART OF THEIR #AMAZINGMOMS FOR MOTHER’S DAY AT CELEBRATION CHATTER.

They shared, “Jim connected with Phyllis Rabinowitz, an [#AmazingMom](#) who battled through a tragic loss to make a difference for other families through her incredible work advocating for children’s healthcare. Phyllis is the Co-President of the R Baby Foundation, an organization she founded with her husband, Andrew, after a misdiagnosed infection led to the loss of their young daughter nine days after her birth. It’s alarming to know that not all emergency rooms, doctors, and healthcare facilities are equipped or knowledgeable in handling emergency infant care. We’re honored by Phyllis’ willingness to share her

THE NEW YORK SUN HIGHLIGHTS THE CRISIS IN AMERICAN EMERGENCY ROOMS

“When Phyllis Rabinowitz and her husband brought their lethargic newborn baby to an emergency room, they were told not to worry about it and that they were being overprotective. “Let me get to the real emergency down the hall,” she says doctors told them.

The next morning, their daughter, Rebecca, passed away from a misdiagnosed enteroviral infection. She would have recently celebrated her 16th birthday.”

[Read the full article.](#) 🕒



What Parents Can Do to Improve Pediatric Readiness In Their Local Community ER

As children don't vote, we adults, who know the truth about our current EMS systems' failures for children, hereby call on every state legislature to pass and fully implement EMS Systems for children's laws. And we call on the federal government to use its powers to promote the adaptation of EMS systems to serve our children.

Only EMS systems adapted for children can save our kids.



1. [Sign the R Baby petition.](#) 



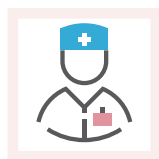
2. Ask your local ER if they have taken the 100-point National Pediatric Readiness Project Assessment and ask what is their score. Pediatric ready hospitals scored 88 or higher.



3. Contact your state's EMSC and ask about getting involved as a family liaison to help improve care.



4. Ask your local ERs if they have a pediatric emergency care coordinator/pediatric champion (PECC). If not, encourage them to get one/get involved.



5. Talk with your pediatrician about local ERs pediatric readiness.



6. [Download the findERnow app](#) today to find the closest ER most likely to be prepared for your child.

Pediatric Readiness Saves Lives

Research has shown high pediatric readiness in emergency departments (EDs)—or scoring > 87 points on the National Pediatric Readiness Project Assessment—improves outcomes for children. While prehospital research is ongoing, a similar impact is anticipated in EMS settings.

High pediatric readiness in EDs is associated with:

- 76%** lower mortality rate in ill children¹²
- 60%** lower mortality rate in injured children⁸
- AT LEAST 1,400** children's lives saved across the US each year⁸

1. "Emergency Department Pediatric Readiness and Mortality in Critically Ill Children" Pediatrics, 2019, Ames et al.

2. "Emergency Department Pediatric Readiness and Short-term and Long-term Mortality Among Children Receiving Emergency Care" JAMA Network Open, 2023, Newgard et al.

The Power of PECCs: Designating an individual to serve as a pediatric champion at an ED or EMS agency (also known as a pediatric emergency care coordinator or PECC) is one of the best ways to increase readiness for children.

Research on the impact of prehospital pediatric readiness will be supported by the launch of the Prehospital Pediatric Readiness Project Assessment in 2024.

You can help save children's lives. www.pediatricreadiness.org

The EMSC Innovation and Improvement Center is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award (U01CE001747) totaling \$21M with 6 percent financed with nongovernmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by HRSA, HHS or the U.S. government. For more information, visit HRSA.gov. 2/2021

BREAKING THE SILENCE: U.S. EMS SYSTEM IS FAILING OUR KIDS AND IT'S COSTING THEIR LIVES

MORTALITY IS LINKED TO THE LACK OF PEDIATRIC EMERGENCY PREPAREDNESS IN U.S. HOSPITALS

On January 16, 2024, R Baby Foundation hosted a groundbreaking virtual roundtable pediatric emergency readiness roundtable addressing the critical national crisis in pediatric emergency readiness – an issue that directly affects **all U.S. citizens and future generations**.

The event included medical experts and health policy reporters to share where the issue stands and how people can help.

THE CRITICAL ISSUES IN OUR HEALTHCARE SYSTEM

Did you know that **children are four times as likely to die** in less-prepared emergency rooms? Or that the **United States rates a D-** in access to emergency medical care for children? From the initial 9-1-1 to hospital discharge, our critical Emergency Medical

Services (EMS) systems fail to account for the unique needs of children. Shocking as this may be, many of our nation's first responders and emergency departments (EDs) are unprepared to care for children. **Nearly 30 million ED visits are made by children** in the U.S. annually, but our EMS systems are designed for adults whose bodies and needs are very different.

As the guardians of our nation's future, **our children deserve better**, and **our current healthcare system is failing to adapt to change**.

The event included six experts in pediatric healthcare, that shed light on the alarming state of pediatric emergency readiness in the U.S., discussed proven solutions, and created change through meaningful conversation.

[Highlights from the event.](#) 



Virtual Roundtable Discussion
Tuesday, January 16th 2024
12:00pm - 1:30pm EST

Breaking The Silence: U.S. EMS System is Failing Our Kids & It's Costing Their Lives

Mortality is Linked to the
Lack of Pediatric Emergency
Preparedness in U.S. Hospitals

Moderated By:



Phyllis Rabinowitz
Co-Founder & Co-President,
R Baby Foundation

Featuring Expert Panelists:



Dr. Katherine Remick, M.D., FAAP, FACEP, FAEMS

Co-director, National Emergency Medical Services for Children Innovation and Improvement Center & the National Pediatric Readiness Project



Dr. Richard Fiyer M.D., FAAP

Retired Community-based General Pediatrician and Active Child Advocate



Dr. Vinay Nadkarni, MD

Founding Director of the Center for Simulation, Advanced Education and Innovation at The Children's Hospital of Philadelphia



Dr. Marc Auerbach, MD, MSc

Associate professor of Pediatrics and Emergency Medicine at Yale; Director of Pediatric Simulation at the Yale Center for Medical Simulation; Founding Co-Chair of INSPIRE.



Dr. Carlos A. Camargo, MD, DrPH

Professor of Emergency Medicine, Massachusetts / Harvard Medical School



Dr. William T. Lynders, MD

Emergency medicine physician, Middlesex Health Medicine, CT

"Over 90% of children have access to emergency departments, which is great. However, over 90% of those children live closer to a non pediatric emergency department than one that is in deep pediatric ready."

- Dr. Katherine Remick

WE WERE FORTUNATE TO RECEIVE INSIGHTS FROM AN ESTEEMED LIST OF PEDIATRIC MEDICAL EXPERTS

Dr. Katherine Remick, M.D., FAAP, FACEP, FAEMS
- Co-director, National Emergency Medical Services for Children Innovation and Improvement Center & the National Pediatric Readiness Project

Dr. Richard H. Flyer, MD, FAAP - Retired Community-Based General Pediatrician and Active Child Advocate

Dr. Vinay A. Nadkarni, MD - Founding Director of the Center for Simulation, Advanced Education and Innovation at the Children's Hospital of Philadelphia

Dr. Marc Auerbach, MD, MSc - Associate professor of Pediatrics and Emergency Medicine at Yale; Director of Pediatric Simulation at the Yale Center for Medical Simulation; Founding Co-chair of INSPIRE

Dr. Carlos A. Camargo, MD, DrPH - Professor of Emergency Medicine Massachusetts / Harvard Medical School

Dr. William T. Lynders, MD - Emergency medicine physician, Middlesex Health Emergency Medicine, CT

"70% of emergency departments see fewer than ten children per day, meaning that the exposure that every ED has to the most critical or injured child is relatively infrequent."

~ Dr. Katherine Remick

"Every community wants the best care for the children that live there.

I see a real important role for parents speaking for their children, just like we do on many other things and saying, are you pediatric ready? Are you aware of pediatric readiness? If not, get engaged. And I really think that that is an approach that a parent can leverage their knowledge of their own community."

~ Dr. Marc Auerbach



Thank you for your attention to the critical issue of improving pediatric emergency readiness in the U.S.

Important takeaways:

- **80% of children** receive emergency care in general EDs. General EDs primarily treat adults and may not be well-prepared for children because of low pediatric patient volume.
- **Fewer than 20% of emergency departments in the U.S.** reported high levels of pediatric readiness in 2021.
- Children are **four times as likely to die** in less-prepared emergency rooms.
- Nationwide, emergency departments **scored a median 69.5** (or a D- rating) on a 100-point test measuring pediatric readiness, according to a study published in JAMA Network Open in July 2023.
- Emergency departments with high pediatric readiness can significantly reduce risk of death in ill children by **76%** and in injured children by **60%**. This survival benefit extends **out to one-year post-injury**.
- The cost of becoming pediatric ready is estimated to fall between **\$4 and \$48 per patient**, equating to approximately **\$150,000 per hospital**.
- Our ER Systems were never designed with children in mind. Science has shown that emergency medical services (EMS) systems designed for adults cannot save the lives of children.
- If all emergency departments were pediatric ready, **we could save at least 1500 children's lives per year**.
- There are currently **no universal hospital licensing or accreditation requirements** that integrate the specific needs of children into systems designed to ensure the best possible outcomes. At a minimum this should include: **administrative oversight of pediatric care, continuous quality improvement, pediatric competencies for staff, pediatric patient safety measures, pediatric-specific policies and protocols, and pediatric equipment and supplies**.

To replay R Baby Foundation's virtual roundtable event: **"Breaking The Silence: U.S. EMS System is Failing Our Kids & It's Costing Their Lives,"** click the link below:

Watch replay

With your support for 17 years, R Baby's commitment and years of innovative granting has helped front-line responders and hospitals be better prepared to care for pediatric emergencies. Because of your support, R Baby is saving lives.

Since R Baby Foundation's inception in 2006, our vision has been to save as many babies' and children's lives as possible.

Chop Pem Podcast: A Novel Approach to Medical Education in Pediatric Emergency Medicine

"The CHOP PEM" Podcast, a Pediatric Emergency Medicine (PEM) biweekly podcast features conversations with local, regional, national and international leaders in the fields of Pediatric Emergency

Medicine and many pediatric sub-specialists who will offer insight into the latest clinical innovations on a variety of topics in Pediatric Emergency Medicine.

The podcast provides topics that are important for parents and caregivers including concussion information, vaccine updates and more.

Yale School of Medicine- ImpACTS: Pediatric Training in ERs to Raise Preparedness For Children Simulation Training

Led by the Yale School of Medicine, R Baby continues to support ImpACTS year over year because of their proven results in improving pediatric emergency care. ImpACTS provides cycles of pediatric simulation-based assessment and training to Community ERs where most children are seen. The ImpACTS team initially assesses an ER's pediatric equipment and supplies and then provides critical pediatric emergency training where it's most needed. The ERs then receive post-training assessment to identify improvements and provide additional areas of support.

ImpACTS Train the Trainer

Components for intervention after simulations include:

- increased frequency of interactions between children's hospitals and community ERs
- increased opportunity for interactions between community ERs
- more specific latest guidance on resources for pediatric care including supplies, equipment and best practices
- more ongoing simulation-based training enhanced leadership support at community hospitals

Mass General: findERnow App Helps Parents Find Closest ER More Likely to be Prepared for Their Child

R Baby continues to share the pediatric version of the app, findERnow developed by the experts at EMNet at Massachusetts General Hospital. The app includes pediatric information to help parents and caregivers find the closest ER more likely to be prepared for their child.

Reviews shared on both the Apple Store and Android Store prove it has helped families and saved lives. Download today and share with parents and caregivers.

Results from the most recent research has resulted in multiple manuscripts and presentations.



PEM
PODCAST

Children's Hospital
of Philadelphia

To date, ImpACTS has helped train 1200 hospitals.

Absolutely Must Have

★★★★★

ZZS12?

This app saves lives. We were on vacation in an unknown city far from home. A family member was having a serious allergic reaction to sunscreen. Breathing became difficult. This app showed us several ER's in the area and we got to one and after being treated aggressively tragedy was avoided.

This has saved lives. All of our family members have it on their phones. You'll be glad you have it when you need it.

Easy to Navigate!

★★★★★

robert23445

When I discovered this app, I knew that it would be a must have. Not only is it useful for those in healthcare, it is equally as useful to families and individuals alike. This app is handy, and it provides helpful information that may be life saving at a times notice. I recommended this to one of the families that I care for, and she was extremely glad that an app like this exists. I love the pediatric feature - it helps you become aware of the most appropriate hospitals near you to treat children - which is different than adult care! Easily will stay in my emergency folder, to use at any moment's notice!



R BABY GRANTS (CONTINUED)

Columbia Presbyterian-INSPIRE: The Latest Pediatric Educational Training Shared Globally

Sponsored by R Baby since its inception as POISE, this collaborative medical education research network develops and shares novel educational training modules, webinars and other resources that result in measurable improvements in the health outcomes of acutely ill infants and children.

While the advent of COVID-19 has resulted in uncertainty for many organizations, INSPIRE has continued to grow and thrive even under

these adverse conditions. INSPIRE has **992 community members** and **215 sites** in **40 countries**.



2023 INSPIRE Highlights: Ongoing and Completed Projects and Initiatives

- **SQUIRE-SIM:** INSPIRE has assembled a group of diverse international experts in quality improvement and simulation research to create simulation-specific scenarios and conduct a consensus process with the goal of creating simulation-specific extensions for the SQUIRE 2.0 reporting guidelines.
- **2023 Society for Simulation in Healthcare Research Summit:** INSPIRE members were leads for 8 of the 12 key simulation themes with many additional members serving as experts on the committees. Each group was tasked with establishing evidence-based practice guidelines in simulation and identifying gaps in research for their topic.

INSPIRE-related research initiatives

- **PEAK II and PEAK II trach:** The Prevention of Errors in Acute conditions in Kids (PEAK II) investigator group aims to utilize in situ-simulation for systems testing and proactively improve the safety of healthcare systems, leading to better patient outcomes.

R Baby is also excited to announce a new award beginning in 2024 — **The R Baby-INSPIRE Award for Advancing Pediatric Emergency Medical Care.**

This award provides a funding opportunity to support groundbreaking investigators in simulation-based research for pediatric emergencies.

Johns Hopkins: Pediatric Simulation Training for Community ERs

Simulation training has been proven effective as a medical teaching tool in multiple studies. In this grant, Johns Hopkins delivered a simulation to over 100 clinical staff in community ERs in Maryland to improve staff preparedness for pediatric patients and to uncover potential systems issues before they threaten a child. Additionally, in Montana, tele-simulation sessions utilized a virtual platform.

Through this training, staff are now performing far better at both routine and complex tasks—such as drawing up pediatric medications, providing airway support, recognizing pediatric arrhythmias and using the defibrillator—then they were at the start of the project.

Additional improvements include:

- Ongoing defibrillator training has taken place at all sites.
- An ongoing abnormal heart rhythm recognition program has been adopted at all sites.
- All sites now have expanded their pediatric, weight based, dosing manuals.
- One site has purchased additional Broselow tapes for their emergency department.
- One site is doing regular airway training between our simulation sessions.
- A pediatric mass transfusion protocol has been created at one of the sites and is in the process of receiving hospital approval.
- Respiratory therapy has been participating in the simulation sessions at the sites where they are available.
- EMS has participated in the scenarios at one of the sites.
- One site has begun using a safer antiepileptic medication.

Overall, many improvements are happening in many ERs due to this grant support.

Conducting research within the INSPIRE community has been one of the most positive experiences of my career. The connections made through INSPIRE have provided a wealth of expertise and knowledge that have contributed immensely to the success of our research team. Thank you
-- Anonymous

Inspiring to be part of Inspire, an always energized, always supportive group with expertise, ideas and work that has inspired impactful advances across all of pediatric medicine and has made our work as individuals and teams meaningful and rewarding. Thank you.
-- Debra Weiner MD PhD, Assistant Professor of Pediatrics, Harvard Medical School

INSPIRE has helped to incubate ideas, support me through meta/peer mentorship, create structure for collaboration/authorship, find new collaborators, engage with other professions/disciplines, create lifelong friends
-- Marc Auerbach MD MSc, Professor of Pediatrics, Yale School of Medicine, Co-founder of INSPIRE, Founder of ImPACTS

R BABY GRANTS (CONTINUED)

University of Mississippi Medical Center Training Through the Pediatric Advance Resuscitation Training and Emergency (PARTNER) Program: Resuscitation Education and Training in Rural Hospitals in Mississippi

In 2023, R Baby continues to support The Pediatric Advanced Resuscitation Training and Emergency Readiness (PARTNER) program providing resuscitation education and training to providers in rural hospitals across Mississippi.

Many small community-based emergency providers do not have the resources necessary to provide optimum clinical stabilization for young patients who present with life-threatening medical emergencies. This gap can be a result of an infrequency of pediatric encounters, the lack of specialized equipment, the funding available to pay for training or even inadequate staffing levels.

The University of Mississippi Medical Center's Pediatric and Neonatal Transport Teams created the PARTNER program and are implementing it across the state. This 8-hour course includes information, hands-on simulation training and a leave-behind 'kit' with neonatal and pediatric resuscitation supplies that might be needed while managing a pediatric emergency. The training is designed to help reduce the high mortality rate of our youngest and most vulnerable citizens by improving the management of pediatric emergencies. The vision is to provide children in Mississippi's most rural communities the greatest chance of survival when a serious illness or injury occurs.

This year, PARTNER has expanded to reach a broader scope of providers including pre-hospital professionals and has added to the scope of the training by enhancing and expanding the simulation/ scenario experiences.

In addition, PARTNER supply bags will be distributed to each hospital that participates and will include critical supplies many of these hospitals may not currently have.

The enhanced training modules include:

- Respiratory emergencies and management
- S.T.A.B.L.E. (Sugar, Temperature, Airway, Blood pressure, Lab work and Emotional support) certification
- Diabetic ketoacidosis and cardiac defects (Mississippi's pediatric population has a high incidence of these disease processes.)
- Neonatal and pediatric sepsis
- Emergency skills (airway management, vascular access, neonatal anomalies and needle thoracentesis)
- Recognizing serious illnesses in pediatric patients

Goryeb Children's Hospital: Pediatric Sepsis Research and Training

Thanks to the continued support from R Baby, Goryeb Children's Hospital continues to make significant progress in developing and implementing a dedicated pediatric sepsis program.

Goryeb Children's Hospital has been collecting and submitting data to a national collaborative called Improving Pediatric Sepsis Outcomes (IPSO) since 2017. IPSO is focused on 5 key processes proven to decrease mortality and improve outcomes in pediatric sepsis:

- sepsis trigger activation
- sepsis huddle activation
- sepsis order set utilization
- time to first fluid bolus
- time to first antibiotic

In 2023, in honor of R Baby's continued support of Goryeb's simulation lab over the years, a plaque was placed outside the lab in Rebecca's honor at Morristown Medical Center.



SOME OF R BABY'S COMMUNITY EVENTS

SUPPORT FOR CHILDREN CAUGHT IN WAR

R Baby contributed 28 pediatric resuscitation kits to support hospitals providing emergency care for Israeli and Palestinian children impacted by the terrorist attacks in Israel.



MILLBURN HIGH SCHOOL R BABY CLUB BAKE SALE

In March 2023, the Millburn High School R Baby Club ran a bake sale raising awareness and funds in their community. Thank you to Peyton Rosenbaum, Ryder Rabinowitz and Jack Nesser for leading the initiative!



PICKLEBALL

Peyton Rosenbaum and Ryder Rabinowitz, along with the rest of the Millburn High R Baby School Club organized R Baby's first Pickleball Tournament raising approximately \$1200. Congrats to our finalists Evan Cahn and Jacob Warner and our CHAMPIONS Luke Greenseed and Chase Plotkin!!!

The funds raised will go directly to helping pediatric emergency healthcare for those children most in need.



MITZVAH PROJECT

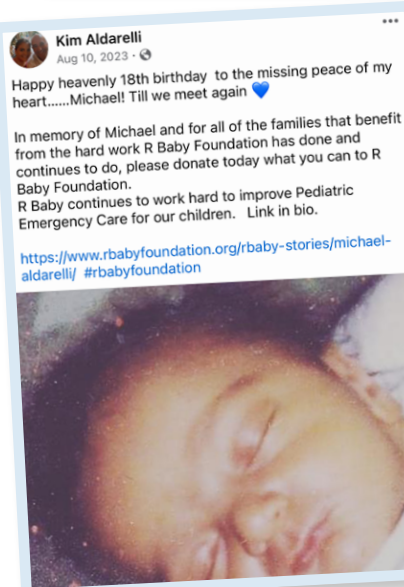
In March 2023, Hunter Rabinowitz's Mitzvah Project focused on giving gratitude, appreciation and thanks to the pediatric emergency medical professionals who take care of children in ERs by organizing thank you cards and posters to give to Goryeb Children's Hospital in Morristown, NJ.

Hunter shared, "I am doing this project in memory of my sister Rebecca Ava, who is the inspiration for my family's charity, R Baby Foundation. I want to show appreciation to the amazing people, like our partners at Goryeb Children's Hospital in Morristown, NJ, who do so much to care for children of all ages."



BIRTHDAY FUNDRAISER

Each year, R Baby's friend Kim Aldarelli, R Baby's 2016 Hero, shares a fundraiser for R Baby for her birthday to honor her son Michael. This year, Kim shared Michael's story on Facebook raising awareness and donations.



If you would like to support R Baby with an event or online fundraiser, please email Katie@rbabyfoundation.org

A study of 983 hospitals found an estimated 1,442 pediatric deaths may have been prevented had these EDs had higher pediatric readiness.

WANT TO IMPACT YOUR COMMUNITY? SPONSOR YOUR ER!

Would you like to Sponsor Your ER? This program is a unique partnership between parents, local ERs and top Children's Hospitals that helps communities bring R Baby's mobile simulator training to their local community hospital. Led by top pediatric experts, your support of raising \$5,000 to \$20,000, can bring specific levels of training to your local community ER — one to four times a year. This simulation training helps educate, improve patient outcomes and raise the standard of care, benefiting all the neonates, infants, and children facing emergency situations. [Read more here.](#) 🌐

SPONSOR your ER+

Help Your Community Prepare for Pediatric Emergencies

R BABY 2023 HERO

DR. RICHARD FLYER

Community-based General Pediatrician and Child Advocate

R Baby is proud to honor Dr. Richard Flyer with our R Baby Hero Award. Dr. Flyer, a passionate champion of children's medicine, created and led a coalition of medical professionals (pediatricians, emergency physicians and nurses), child advocates and parent groups that resulted in the passage of the nation's first Emergency Medical Services for Children Law. That landmark legislation was passed in New Jersey in 1992. Dr. Flyer stated, "Our goal must be: create systems to care for kids that are seamless and highly regulated, so as to assure our children get the best care possible. Our children deserve the right help at the right time in the right place, by the right people with the right training and the right equipment. Anything short of that will not save them."

Upon receiving the R Baby Hero Award Dr. Flyer said, "R Baby represents real hope that our country will finally treat its sickest kids expertly, and I am

so grateful to R Baby for this honor. Working with R Baby has given me renewed energy to fight on behalf of our critically ill and injured children.

In this era of medical miracles, the unthinkable occurs: children are routinely neglected and inappropriately cared for when they need emergency care. For over four decades, this tragedy has been known to the country's pediatricians, emergency physicians, emergency nurses, and first responders; and likewise, our country's hospitals, and our state and federal public health officials, have all been aware of this failure. The public has been led to believe otherwise.

We cannot expect this crisis to end by wishful thinking. All who care for and about children must learn the truth. Once educated about the crisis and its solutions, informed adults must pressure governments to pass and fund the laws required to rescue our children."

[Read more here.](#) 🌐



"Dr. Flyer's passion is an inspiration to R Baby, and we are grateful for his tireless work to make sure all children receive the best possible care in an emergency. He has spent countless hours collaborating with R Baby in pursuit of the adaptations to our emergency medical services systems that are needed to save the lives of our sickest kids."

~ Phyllis Rabinowitz

LETTER FROM OUR FOUNDERS



Rebecca Ava Rabinowitz
7/13/06—7/21/06

Dear R Baby Family,

For 17 years since Rebecca's passing, R Baby has worked tirelessly to correct the lack of pediatric preparedness in our ERs and pre-hospital settings across the country, only to find out from recent research that approximately **1,400 children die each year from this lack of readiness**. As advocates for change and on behalf of all children and their families who continue to be impacted by the lack of pediatric emergency readiness - **enough is enough**. We are very proud of R Baby's proven, life-saving programs so far, but it is clear there is still much more work to be done among over **5,000 ERs in the U.S.** because children are still dying, and somehow, many parents and care providers are still unaware of these issues. We've experienced many emotions from hearing so many of the questions our organization has been asking for nearly two decades:

- **How is it possible** there are 1,400 other bereaved parents like us each year due to this issue?
- **How** could these deaths have been prevented for better outcomes?
- **How is it possible** the medical community has been documenting the lack of emergency preparedness for children over the last 30 years and why can't we make more changes more quickly to give our kids the life saving care they deserve?
- **How** can U.S. hospitals rank a D- in pediatric emergency readiness for decades and why haven't we improved?
- **Why** are our EMS systems designed for adults and not for our kids, even when science has proven we need to adapt?
- **Why** don't more parents and caregivers know or care about this national crisis?

While these questions keep us up at night, our search for answers and real change keeps us motivated to continue fighting for every child in every emergency setting to receive the best healthcare and treatment possible. These issues we are currently facing truly mean "life or death" for the future of our kids, and it is simply unacceptable. Our EMS systems need to ensure that each child receives the right care at the right time. Investing in pediatric training, equipment and supplies, telemedicine, and transport are all vital solutions proven to save lives and they are **cost effective**. It costs a **maximum initial investment of \$150,000 per ER or \$750 million total for the first year** to implement the proper solutions needed to ensure our EMS systems are prepared for children. This equates to as little as **between \$4-\$48 per patient**. This is a minimal investment amount compared to our annual multi-trillion-dollar national healthcare expenditures. While finances are a reality, our children's health, well-being, and their futures are invaluable. Change is achievable, affordable, and attainable, and every day we get one step closer with your support. Our kids deserve the same life-saving emergency care that adults receive.

Nothing we do will ever bring our daughter Rebecca back, but 17 years later, we are still fighting for the best possible emergency healthcare for all R children.

Thank you for your continued support. 🧡

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Phyllis and Andrew Rabinowitz
Co-Presidents R Baby Foundation



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