

COMMITTEE: World Health Organization

QUESTION OF: Ensuring the Safety of Blood Transfusion Services Globally

SUBMITTED BY: Croatia, Botswana, Sierra Leone

CO-SUBMITTERS: Germany, Spain, Malta, Indonesia, Ghana, France

SIGNATORIES: India, Japan, Switzerland, Philippines, The United Kingdom, Finland, South Africa, Ecuador

The General Assembly,

Understanding the complications and consequences that unsafe blood transfusion can cause such as transmission of infectious diseases, poor storage, and transfusion reactions,

Alarmed by the inaccessibility of blood and blood transfusions in developing nations,

Supporting the goal of increased access to blood supplies across the world, with educated professionals to ensure the safety of blood transfusions,

Acknowledging that the availability of safe blood is essential to meeting the medical needs of patients, including those undergoing surgery, trauma care, and treatment for various diseases,

Seeking to foster international collaboration to improve blood transfusion safety, including knowledge exchange, resource sharing, and joint research initiatives,

Pointing out the importance of healthcare professionals receiving proper training and certification in transfusion medicine to ensure optimal patient care,

1. Promotes collaboration between nations globally and non-governmental organizations such as partnering with the International Society of Blood Transfusion (ISBT);
2. Provides education through congresses, webinars, live journal clubs, workshops, publications, and online learning:
 - a. With representatives from over 100 different countries to share research on blood transfusions from different perspectives,
 - b. Works with the Global Blood Fund to:
 - i. Promote the implementation of more rural blood banks and bloodmobiles in developing nations to improve the accessibility to blood,

- ii. Fund recruitment training, machines, and equipment for developing countries all over the world;
- 3. Implements disaster response plans to ensure the accessibility and safety of blood transfusions to:
 - a. Confirm blood availability during times of crisis such as natural disasters, disease outbreaks, and regions in conflict, which provide adequate blood supply from national blood banks,
 - b. Implements the WHO “Guidance on ensuring a sufficient supply of safe blood and blood components during emergencies” to generate a plan that aligns with WHO’s view;
- 4. Establishes a redesigned World Health Organization (WHO) Framework inspired by previous guidelines that affirms the safety of blood transfusions and the accessibility of blood by:
 - a. Initiating a national blood system which
 - i. Ensures that there is an adequate amount of blood available to all civilians in a region and that there are the same health standards in that country
 - ii. Implements the WHO Guidelines on Costing of Blood Services to promote the fair pricing of blood (for people receiving it) depending on the region
 - b. Outlines the procedures for blood transfusions
 - i. Secures the policy that blood must undergo multiple rounds of screening and testing to eliminate any transfusion-transmissible infections (TTIs) from infecting a patient
 - ii. Creates a government-regulated national blood bank to ensure that there is blood available to all civilians in the country
 - iii. Includes tracking/tracking all blood to ensure any issues are discovered with the blood after screening and testing, following which the blood will be destroyed to prevent the spread of infection/disease;
- 5. Reminds Member States of the WHO stating that “Screening for HIV, Hepatitis B, Hepatitis C, and Syphilis should be mandatory suggesting that for countries applicable testing for Malaria should also be carried out;
- 6. Constructs plans to build and advance blood bank facilities and medical infrastructure
 - a. Partners with Build Health International to develop blood bank facilities and medical infrastructure on a global scale

- i. Developing infrastructure will encourage safe practices for transfusions which will be more sanitary and handled by professionals
 - ii. Promotes the accessibility of safe blood transfusions and healthcare for developing nations;
 - b. Collaborates with the World Health Organization (WHO) and the International Medical Corps (IMC) to provide mobile healthcare clinics and virtual medical consultations
 - i. Establishes WHO mobile healthcare clinics in developing nations to promote accessibility to transfusions
 - ii. Implements IMC virtual medical consultations to ensure safe practice and testing of blood transfusions;
- 7. Encourages educational opportunities and training for healthcare workers in terms of blood transfusions
 - a. Works with the Association for the Advancement of Blood and Biotherapies to provide education and training for healthcare workers
 - i. Provides courses, webinars, e-learning, certificate programs, and forums to encourage the knowledge of safe blood transfusions and medicine;
- 8. Requests creation of a WHO led task force that reports back to the WHO to ensure all countries are following guidelines and recommendations to best ensure safe blood transfusion across the world.
 - a. Increases international collaboration including the sharing of data between countries to improve safety and the sharing of knowledge to ensure all countries can benefit from enhanced safety measures and efficiency of donation and transfusion processes.
 - b. Demands regulation on a bi-yearly basis;
- 9. Recommends the creation and implementation of comprehensive disaster preparedness plans, including the organization of regular drills and training exercises for healthcare providers and emergency responders to ensure effective blood transfusion procedures during natural disasters and other crises; including increasing blood supply during this time, as due to injury, this is often when demand increases;
- 10. Calls for the establishment of international funding mechanisms to support the acquisition and distribution of essential medical equipment for blood transfusion, particularly in LEDCs, ensuring accessibility to life-saving technology such as but not limited to,

- a. Blood collection equipment including but not limited to: needles, blood bags, anticoagulant solutions
 - b. Blood storage equipment including but not limited to refrigerators and freezers to store blood components at the proper temperature
 - c. Blood testing equipment including but not limited to: centrifuges, microscopes, analyzers to test blood for compatibility and other factors
 - d. Blood transfusion equipment including but not limited to infusion pumps and tubing to deliver blood to patients.
11. Proposes the creation of the International Blood Accreditation Board (IBAB) to help ensure that the necessary standards are being met by all Member States
- a. Classifying countries as in 1 of 3 categories – those achieving the minimum standards (category 1), intermediate standards (category 2) and complete standards (category 3)
 - b. Defining the 3 standards as measures of safe practice that when complete will ensure completely safe blood practice, however, still have the base level be such that the practices do not endanger the lives involved
 - c. Creating a framework with actionable steps to assist countries in categories 1 and 2 to improve their services to reach Category 3
 - d. Ensure biennial inspections of member states' facilities that handle blood to ensure that standards remain at a constant level
 - e. Encourage Member States classed in Category 3 to engage in communication and assist Members in Categories 1 and 2 with their development

Initiative	Estimated Cost (USD)	Proposed Funding Source(s)
Establishing national blood safety frameworks	\$25 million	WHO budget, Member States contributions
Developing regional blood-sharing networks	\$10 million	Regional organizations, private sector partnerships
WHO technical assistance and training	\$15 million	WHO technical fund, voluntary donations from Member States
Upgrading infrastructure and technology	\$30 million	International health funds, private companies
Public awareness campaigns	\$5 million	NGOs, Member States' health ministries
Implementing digital tools	\$8 million	Tech companies, international grants, private sector partnerships

1. **Total Estimated Cost:** \$93 million

- High-income countries: 60% of the funding.
- Middle-income countries: 30% of the funding.
- Low-income countries: 10% of the funding (often through subsidies or grants).

2. **Partnerships with Private Sector and NGOs (non-governmental organization (NGO) is an independent, typically nonprofit organization that operates outside government control):**

Collaborate with tech companies, pharmaceutical companies, and health-focused NGOs to cover costs for technology, training, and awareness campaigns.

3. **Global Health Funds:**

Apply for support from organizations like:

- The Global Fund to Fight AIDS, Tuberculosis, and Malaria.
- Gavi, the Vaccine Alliance.
- The Bill & Melinda Gates Foundation.

4. **Regional Collaboration:**

Encourage wealthier countries within each region to assist neighboring low-income nations in building infrastructure and sharing resources.