



Resolution World Health Organization/I.I

World Health Organization Committee

Co-sponsors: Republic of Albania, People's Democratic Republic of Algeria, Republic of Cameroon, Canada, People's Republic of China A, People's Republic of China B, Republic of Côte d'Ivoire, Republic of France, Grenada, Federated States of Micronesia, Principality of Monaco, Republic of Namibia, Federal Democratic Republic of Nepal, Romania, Republic of Senegal, Slovak Republic, Republic of Korea, Republic of South Sudan, United Kingdom of Great Britain and Northern Ireland, Republic of Yemen, Republic of Zambia

Topic: Global Action on Patient Safety

Fully aware of the global COVID 19 crisis and taking into consideration the success of world patient safety day,

Taking note that the lack of medical education can affect the relationship between doctors and patients,

Convinced that universal education would increase literacy rate for patients and doctors;

Deeply concerned by the hospital accessibility levels around the world,

Approving the idea of proper healthcare facilities,

Fully aware of low medical standards and how they affect patient safety,

Keeping in mind that not everyone is treated equally in the medical system,

Exchanges and financial support between countries and larger understanding of the medical system

- I. Emphasizes the need for more global events like the global virtual event on September 17th, 2020 organized by the WHO Patient Safety Flagship;

2. Recommends training day where trained doctors get information to students each month about what they are doing, why they are doing it and how they are doing it and current healthcare policies;
3. Encourages countries to give money to hospitals to improve coordination for medical staff so they have extra support and training and are less stressed;
4. Supports the establishment of special programs to get a better understanding and encourages the population to stay healthy and to trust the medical system;
5. Recommends that patients will have an explanation so that they can trust the medical team;
6. Encourages healthy living practices;

Infrastructure

7. Calls on countries to monitor clinical trials with strict laws;
8. Endorses hospital access to reliable energy;
9. Encourages construction of medical infrastructures so that proper healthcare can be built;
10. Designates medic exchanges;
11. Requests taxes on wealth;
12. Requests increasing better hospital infrastructures in developing countries;

Higher Medical Standards

13. Calls upon member states to create programs to help educate people so that child mortality is reduced, have more certified doctors for childbirth and a better place for childbirth, and increase awareness of mental health and learning disabilities;
14. Further invites member states to add more diversity and equality in medical care;
15. Encourages member states to have specialists who have experience to help diagnose diseases, develop a plan for nursing practices, and have simulations of surgeries for better practice;
16. Draws attention to providing ambulance services for people who can't access the hospital and helping find ways to get people better access to vaccines;

17. Requests that member states make an agency to go to local hospitals or physician's offices to see if universal standards are being met;
18. Encourages member states to find ways of funding medical colleges so that doctors don't have to be so much in debt and research other organizations and collaborate to create a more balanced team;
19. Recommends hiring more physicians, making sure healthcare workers have a stress-free environment so they can work better, and having shorter shifts for work to reduce tiredness and stress;
20. Endorses creating bigger hospitals for more patients, adding better equipment, and isolating people when they are in recovery to stop the spread of germs, and finding ways to get cleaning products at a less expensive cost for hospitals and people so they can clean better.