

**Public Services International: Health and Social Care Services Task Force meeting
International Labour Organization, Room IV, Geneva, 18-19 April 2012**

18 April 2012 (Wednesday)		
<i>Time</i>	<i>Session</i>	<i>Podium</i>
10:00 – 10:20	<p>Opening session</p> <ul style="list-style-type: none"> • Welcome • Introduction of participants • Overview of meeting and arrangements 	Odile Frank Peter Waldorff Nobuko Mitsui
10:20 – 10:40	<p><u>Report on the situation of Czech Health Care Workers.</u> In the post-soviet era, many countries had to adapt rapidly to new economic systems. The Czech Republic not only had to deal with the economic shift, but also with the results of the dissolution of Czechoslovakia. Health care is one area that has changed dramatically. Political reforms focused on the expansion of the market economy, privatization of government services, democratization and decentralization. This led to a turbulent and uncertain environment for the development and management of health services. Issues arose in matters of efficiency, cost-containment, consumer choice and accountability. Despite recent reforms focused on improving the system, issues remain regarding equity and integrated delivery of health care. Health care workers bear the brunt, which led to the <i>One Hundred does not always mean One Hundred</i> campaign. The presentation looks into problems faced by the health care workers and the current situation on the ground.</p> <p><i>The Task Force to consider implications and supportive actions.</i></p> <p>Key person: Jillian Jean Neckar, PSI, at jillian.neckar@world-psi.org</p>	Jillian Jean Neckar
10:40 – 11:00	<p><u>Report on Public Sector Unions Fighting against AIDS.</u> Workplaces are the gateway to universal access to HIV prevention and AIDS support, care and treatment. It is in the common interest of unions and employers to take action against AIDS and trade unions have a unique influence on the workforce to generate opportunities to address HIV and AIDS that are not available to employers. Public Services International carried out a project with the support of UNISON between March 2008 and March 2011 to address HIV and AIDS in the public sector in southern Africa (Angola, Botswana, Lesotho, Malawi, Mauritius, Mozambique, Namibia, South Africa, Swaziland, Zambia and Zimbabwe) to strengthen the trade union response to the challenges of HIV and AIDS. The project provided information, tools and links on HIV and AIDS to public sector unions to assist them in their response to HIV and AIDS, and provided an opportunity for sharing good practices, experiences and lessons learned. An external evaluation conducted in late 2010 and early 2011 concluded that the project had been highly successful.</p> <p><i>The Task Force to consider possible follow-up HIV/AIDS projects in Africa and elsewhere.</i></p> <p>Key person: Susan Leather, at sueleather@gmail.com</p>	Susan Leather
11:00 – 11:30	<i>Break</i>	
11:30 – 12:00	<p><u>West Africa Health Sector Union Network (WAHSUN) on inter-union solidarity and cooperation on Occupational Health and Safety.</u> WAHSUN is a network of 6 PSI health sector affiliates in four countries: Ghana and Nigeria, Liberia and Sierra Leone. A successful and active network, it follows on from the FNV venture on Trade Union Development and Organising in West Africa. At its meeting in Lagos, Nigeria, on 30 November-2 December 2010, WAHSUN issued a communiqué "on the need to balance opportunities and challenges to achieve strong international workforce solidarity towards optimum health promotion within the sub-region". Issues discussed include patient safety, respect of ILO Conventions, Millennium Development Goals, young workers and occupational health and safety. The WAHSUN network issued a communiqué in July 2011 stressing the responsibilities in occupational health and safety of the individual unions and those of management and governments. To date, the efforts of the affiliates of this network have led to the establishment of policies on occupational health and safety in 50 health workplaces in their four countries.</p> <p><i>The Task Force to consider implications and similar partnerships.</i></p> <p>Key person: Sani Baba, Sub-regional Secretary, PSI, at sani.baba@world-psi.org</p>	Sani Baba
12:00 – 12:30	<p><u>Nurses and the Financial Transactions Tax.</u> Report on demonstrations in favour of the Financial Transactions Tax (FTT) at the 6th annual G20 held in Cannes in November 2011 and follow-on activities (short report; long report will be discussed in the Add-on Meeting on Nurses' Issues on Friday, 20 April).</p> <p><i>The Task Force to consider next steps.</i></p> <p>Key person: Ken Zinn, NNU, at kzinn@nationalnursesunited.org</p>	Ken Zinn
12:30 – 14:00	<i>Lunch</i>	
14:00 – 16:00	<p>Two concurrent workshops to be held in break-out sessions:</p> <ol style="list-style-type: none"> 1. Privatization, Working with the Private Sector, and Organizing Private Sector Health Workers. 2. Occupational Health and Safety, Preserving Safety and Health Entitlements, and Transfer of Technology and Know-How from North to South. 	Régine Laurent Sani Baba and Candice Owley
16:00 – 17:00	Report-back of break-out sessions	
17:00 – 18:00	<p>Screening of DVD "Sharp Sense" in English, French, Brazilian Portuguese and Spanish (in four rooms).</p> <p><i>The Task Force to determine 1) how to use it; 2) other DVD tools in health that PSI can develop.</i></p>	
19:00 - 22:00	HSTF Meeting dinner at <i>Restaurant des Nations</i>	

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19 April 2012 (Thursday)		
9:00 – 9:20	<p><u>Conceptualization and creation of a user-friendly data base on ILO Conventions and Recommendations on Occupational Health and Safety.</u> Since 1919, ILO has adopted 189 Conventions, 201 Recommendations of which at least 23 Conventions and 16 Recommendations concern occupational health and safety issues, as well about 19 Codes of Practices, and a Protocol. These standards have been established to maintain a minimum level of protection. PSI is promoting the standards by building a database to be made available to the PSI affiliates through the Health Pages of the new PSI website. The work was started by a former intern, Dominador Tuvera of the Philippines, in 2011. Affiliates will easily find the instruments that their countries have ratified as well as the specific provisions contained in each Convention and Recommendation in plain language, and can connect to the ILO site. Erosion of access to occupational health and safety protections in more developed countries may mean that one day affiliates in the North may look to ILO Conventions and Recommendations on Occupational Safety and Health for levels protection no longer secured through national instruments. How can the database be used to energize ratification campaigns?</p> <p><i>Task Force Participants to make suggestions and proposals.</i></p> <p>Key person: Linn Holmström at linn.holmstrom@world-psi.org</p>	Linn Holmström
9:20 – 9:45	<p><u>Bahrain.</u> In 2011, 48 physicians and nurses were arrested for providing medical services to anti-government demonstrators and accused of felonies, 20 of whom were convicted and sentenced by Bahraini military court to between 5 and 15 years after a trial lasting a few minutes. Many were reportedly tortured and forced to sign confessions. Following international pressure, Bahrain's Attorney General overturned the sentences and ordered retrials. Hearings took place in January-March - most recently 15 March 2012 - before the civilian High Criminal Court of Appeal. Defence lawyers repeatedly request inclusion of the reports of torture and the forensic examinations that are in the Bahrain Independent Commission of Inquiry (BICI) report in the case file.</p> <p><i>The Task Force is concerned over this appalling apparent violation of the labour rights, human rights, and fundamental freedoms of health service workers.</i></p> <p>Key person: Abdulkarim Radhi, The General Federation of Bahraini Trade Unions (GFBTU), at karimradhi@gmail.com</p>	Abdulkarim Radhi (Abdulkarim Yusuf Radhi Mohamed Ali)
9:45 - 10:05	<p><u>Declaration on Bahrain</u></p>	Odile Frank
10:05 - 10:30	<p><u>The democratic transition in Tunisia.</u> There are reasons for optimism : - Tunisia will overcome the obstacles and assure a brilliant future for its children despite circumstantial difficulties, the serious socioeconomic problems and the policies that the country is currently facing; The establishment of a state with the rule of law and the protection of human rights constitutes the basis of any action, despite the occasionally heightened tension between the provisional government and the opposition; Communication and dialogue with all sectors of civil society, in particular the UGTT (<i>Union Générale Tunisienne du Travail</i>) should calm tensions among the Tunisian people; and Tunisians who are educated and progressive (despite the conservatism of certain mentalities) will watch over the establishment of principles of equality, liberty and democracy in the new constitution which will be based on a consensus and be for all citizens.</p> <p><i>The Task Force to take note and assess action if any to be taken</i></p> <p>Key person: Samia B Letaief, UGTT at l.b.samia@hotmail.com</p>	Samia Letaief, UGTT
10:30 - 11:00	<p><i>Break</i></p>	
11:00- 12:00	<p><u>ICRC Report: Health Care in Danger (A sixteen-country study).</u> Violence against health-care workers, facilities and beneficiaries in armed conflicts and other situations of violence is one of the most serious humanitarian challenges in the world today. And yet it frequently goes unrecognized. An ICRC study based on data collected in 16 countries from mid-2008 to the end of 2010 shows patterns of violence that hinder the delivery of health care, ranging from direct attacks on patients and on health-care personnel and facilities – including looting and kidnapping – to arrests and denial of access to health care. The Health Care in Danger project is an ICRC initiative involving a number of measures to address the many different forms of violence against health care.</p> <p><i>The Task Force to consider implications for PSI and PSI's affiliates.</i></p> <p>Key person: Robin Coupland, ICRC, at rcoupland@icrc.org</p>	Robin Coupland
12:00 – 12:30	<p><u>Public Services International Programme of Work 2013- 2017 in Health and Social Care Services.</u> Worldwide, health service workers and their trade union affiliates face challenges to their employment conditions, experience poor working environments, and suffer risks to their health. The current global economic context has benefited privatization in the health sector, constrained public health budgets and public sector wages, created worker shortages, increased the casualization of health sector work, and made health worker migration attractive, but more difficult. Health sector workers cope daily with health risks from hazards particular to the health workplace, including exposure to HIV/AIDS and to violence. The Programme addresses these issues.</p> <p><i>Task Force Participants to review and comment on the programme.</i></p> <p>Key person: Odile Frank at odile.frank@world-psi.org</p>	Odile Frank
12:30 – 14:00	<p><i>Lunch</i></p>	
14:00 – 17:00	<p><u>Healthwise.</u> A trial of the "HEALTHWISE" tool developed by ILO and WHO to assist health care organizations in improving working conditions and workplace safety will be presented with a view to exploring how it may be adapted for use by health and social care service affiliates themselves.</p> <p><i>Task Force Participants to participate in the workshop, review the tool and to make proposals on its usefulness and adaptability. It is hoped that proposals to pilot the project will emerge.</i></p> <p>Key persons: Christiane Wiskow, ILO, at wiskow@ilo.org Susan Wilburn, WHO, at wilburns@who.int Lee-Nah Hsu, ILO, at hsul@ilo.org http://www.who.int/occupational_health/publications/newsletter/newsletter_18_global_issues/en/index3.html</p>	WHO and ILO
17:00 - 19:00	<p>Organizing meeting to prepare agenda for Nurse issues meeting on Friday, 20 April, 2012.</p>	Judith Kiejda