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3

HQC is situated on Treaty 6 Territory and the Traditional Land of the Dakota, Lakota and Nakota, and is the Homeland of the Metis.

We pay respect to the treaties that were made on this land and acknowledge the harms and mistakes of the past. We are committed to move forward in partnership with Indigenous Nations in the spirit of reconciliation and collaboration.






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ACCESS PAST QI POWER HOUR SESSIONS!

Past QI Power Hour webinars (with download links)

<p>Health Networks in Saskatchewan (QI Power Hour)</p> <p>Nov 15, 2019 at 9:00 AM</p> 	<p>Citizen Science in Public Health Policy: Leveraging the Power of Ubiquitous Tools</p> <p>Oct 23, 2019 at 9:00 AM</p> 	<p>The Costs of Poverty in Saskatchewan: Why Do They Matter and How Do We Calculate Them? (QI Power Hour)</p> <p>Sep 6, 2019 at 9:00 AM</p> 
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SIGN UP FOR THE QI POWER HOUR EMAIL NEWSLETTER!



Receive notices about upcoming sessions and details on how to register in your inbox.



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SPREAD OF QI POWER HOUR ACROSS SK

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SPREAD OF QI POWER HOUR ACROSS CANADA

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SPREAD OF QI POWER HOUR WORLDWIDE

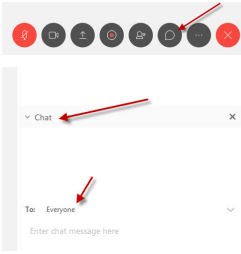
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WEBEX TOOL: CHAT FUNCTION

CHAT FUNCTIONS:

- Share **questions, comments, and ideas**
- Click on the message bubble icon to access the chat
- Send to **All Participants**




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JOIN THE CONVERSATION!

@QIPowerHour
@HQCSask
#QIPowerHour



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QIPower Hour

Promoting social inclusion through experience-based design in Christchurch, New Zealand

With Nicola Woodward

12

Enabling social inclusion through service design

Nicola Woodward
Director, Be Company
Poppy Grower

13

Forces driving social exclusion
Tackling social exclusion: John Pierson

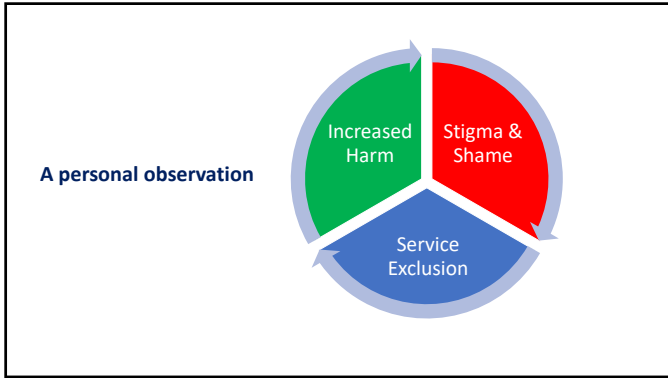
- Poverty and low income
- Access to jobs market
- Poor social support networks
- Local area/neighbourhood
- **Exclusion from services**
- Racism and colonisation



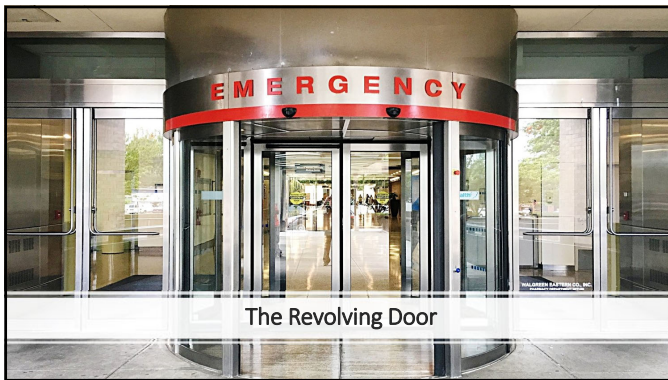
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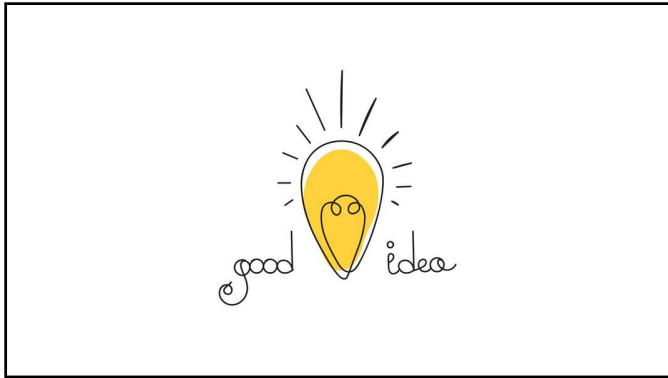
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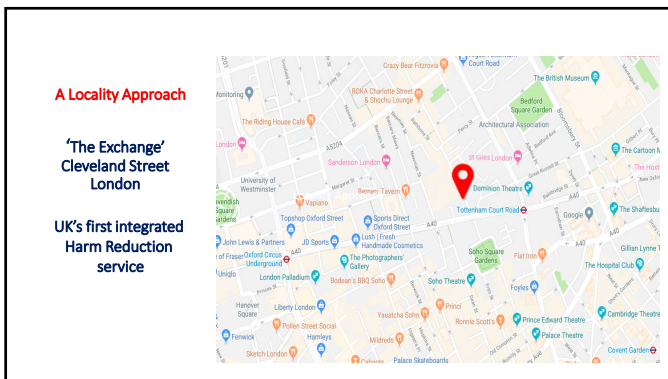
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ADDI CARE, VOL. 1, NO. 1, 199

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**Needle-Exchange in Central London:
operating philosophy and communication
strategies**

G. HART¹, N. WOODWARD² & A. CARVELL¹

¹Academic Department of Urban-Urinary Medicine, University College G- Middlesex School of Medicine, James Paget House, The Middlesex Hospital, London W1N 8AA and
²Mental Health Unit, Biometrics Health Authority, London, United Kingdom

Abstract Despite a large number of needle-exchange schemes in the UK, there are few accounts of how particular agencies assess injecting drug users. This paper describes a busy scheme in London, the take-up of services by clients, and the operating philosophy of the staff. From November 1987 to October 1988 The Exchange saw a mean of 157 clients per month, making an average three visits per client each month. An average of 8,950 needles and syringes were dispensed and 6,518 returned monthly, giving an average return rate of 77%. The Exchange also served as a regional agency to clients: 513 referrals were made, 81.9% of which were to drug and non-medical services, 16.8% to health services, and 1.2% to HIV services. To account for the take-up of services the paper describes The Exchange's open access policy, the staff's communication strategies and their adoption of the philosophy of harm-minimisation in relation to injecting drug use. It is argued that these need to be seen as integral to needle-exchange if it is to succeed as a comprehensive service.

22

A graphic featuring a stylized play button icon in blue and purple, followed by the year '2011' in a bold, purple, sans-serif font. The background is white with a faint, light-colored grid pattern.

23

**Substance misuse
and family
violence:
Common risk
factors**

- Sustained risk
- Escalating harm
- Co-morbidity
- Complex interlinked social problems
- Stigma and shame
- Social isolation
- Service exclusion
- Formative drivers
- Enduring effects

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A contemporary feminist analysis of the refuge model

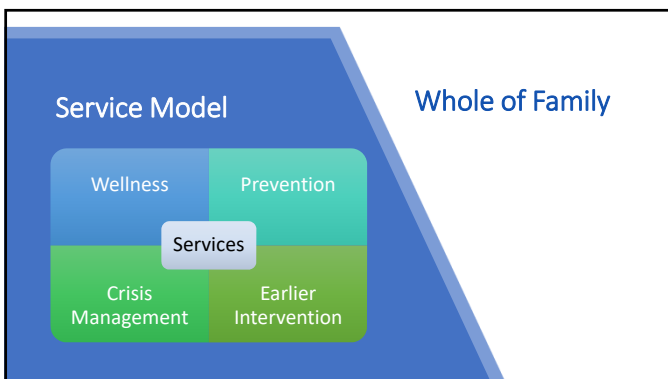
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From.....

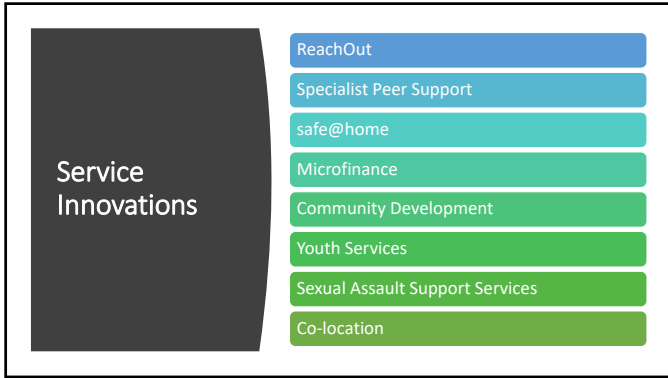
Christchurch Women's Refuge

to.....

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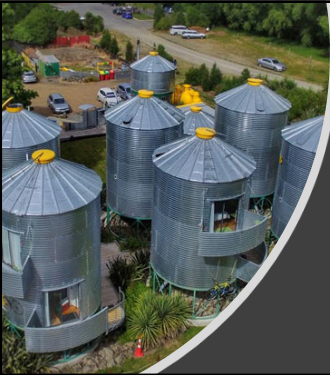
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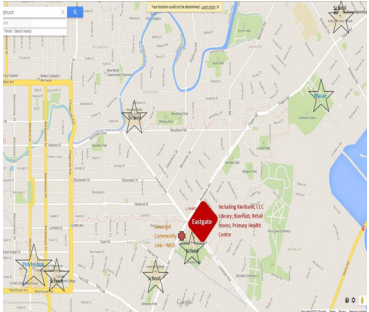
Ask 5 x How

Integration: Through the eyes of lived experience


How many places will I have to visit?
 How long will I have to wait?
 How many questions will I have to answer?
 How many people will I have to talk to?
 How many times will I have to repeat myself?

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A locality based approach





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'One-stop shop' opens for health and well-being services in east Christchurch

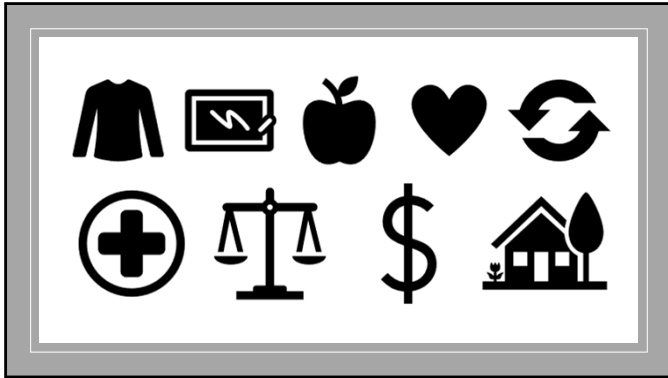
ESLEY SPINX
 Last updated 11:12, Aug 9, 2019



Health and well-being agencies are working together from a new space in Eastgale Mall.

CityLink and community health services have come together at a new 'one-stop shop' in east Christchurch. The Lift opened its doors to the public this week, between the United Library and McDonald's restaurant, on the first floor of Eastgale mall.

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Key Learnings

- Start with Why, Focus on How
- Partnership Pie
- Step back
- Build incrementally
- Point of difference
- Culture
- Co-governance

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Start with Why
Focus on **How**

WHY
HOW
WHAT

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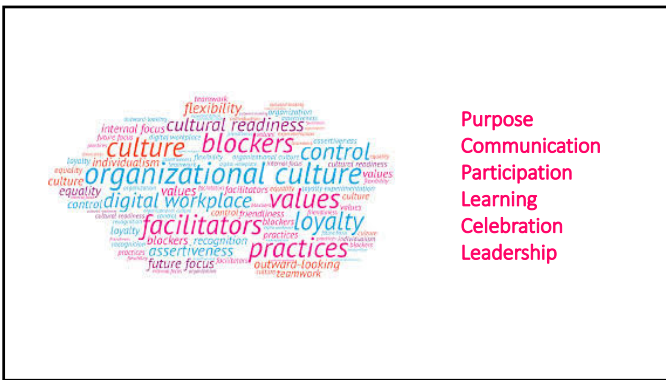
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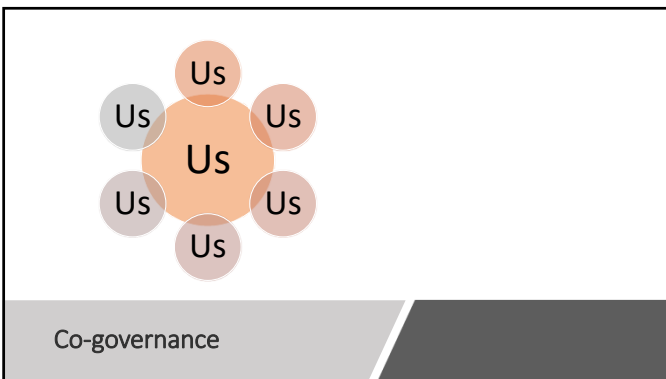
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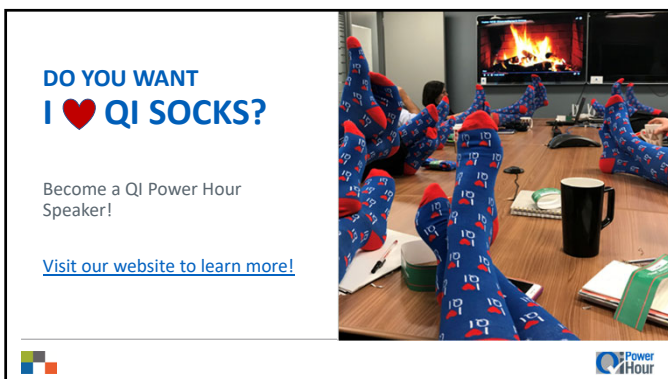
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POST-WEBINAR SURVEY

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NEXT UP...

Storytelling as a leadership skill

With [Michelle Schmalenberg](#)
 Friday, March 27, 2020
 9:30-10:30 AM CST

To register, [visit our events page](#)





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