

Changing Futures Plymouth

Your Story Project

Wednesday 21st May 2025, 10-11am









Your Story project



Katy Krysiak (she/her)
Changing Futures Plymouth

Emma Stevens (she/her)
Changing Futures Plymouth

SP (she/her)
Expert by Experience









Your Story project



- 1. What is the Your Story project?
- 2. Background of the project
- 3. The tool now
- 4. Feedback from individuals
- 5. Culture change and data sharing
- 6. System conditions
- 7. How easy is the approach to embed?
- 8. What's next?
- 9. Expert by Experience
- 10. Q&A









Changing Futures

Principles

Changing Future Plymouth works in partnership with local organisations to improve the outcomes for people experiencing multiple disadvantage across the city.

Plymouth is one of 15 areas in England that was awarded funding from National Lottery and MHCLG



Co-produced

Trauma informed

Alliance ethos

Prevention





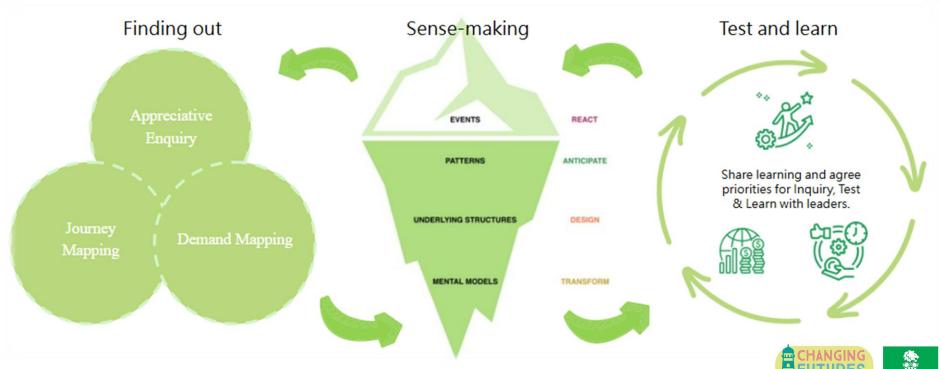




Changing Futures



We are trialling a new way of working, we are still learning and adapting as we go.









Changing Futures





Two Rules

Stay legal	+
Do no harm	+

Five Principles

Understand, not assess	+
Person sets the scope	+
Decisions made in the work	+
Pull for help (not refer and close)	+
No time limit - it takes as long as it takes	+

The **Liberated Method** is the approach we use when supporting people. The '**2R5P**' framework consists of **two rules** which we always adhere to and never change along with **five principles** which guide case workers and peer support specialists whilst allowing them the freedom the make decisions based on '**what matters**' to the individual being supported.











What

An approach to...

- Enable people to take control of their information when using services
- Empower people to share their story in a way that matters to them
- Reduce the need to repeat their story and risk re-traumatisation.

Why

- To shift power dynamic
- 'You said we did' to rebuild the trust
- Improve outcomes for people experiencing multiple disadvantage
- Create a better environment for practitioners, improving staff retention and satisfaction

How

- Developing a tool alongside people with lived experience of this issue
- Working with organizations to promote Your Story
- Team Around Me (TAM)Model

Promoting culture change within assessment practice. Where ways of working between individuals and services are more relational, human, power-balanced, and trauma-informed.

















The vision



EVERY MOMENT & SEED PLANTED SEED PLANTED ON THE RACTION CAN BE SEED TO THE PLANTED ON THE PLANTE



A SNAKE ADDER A TIDE

ENRICHING = CONSTRICTING





The vision

From this...



"And the trauma has just impacted on everything I do and it's too painful to explain it again to everybody. It's just too painful and if I don't explain it then they don't know where I'm coming from and then they call me irrational."









The vision

winder sing the and in the delication of the state of the

'Do you have anything you'd like to share with me before our assessment to help me get to know you? If so, my email is...'

'I didn't know I can do that! I will send you my story, as I tend to forget important details when I'm stressed.' I'm a victim of DV and a man's presence triggers me.



Using this...







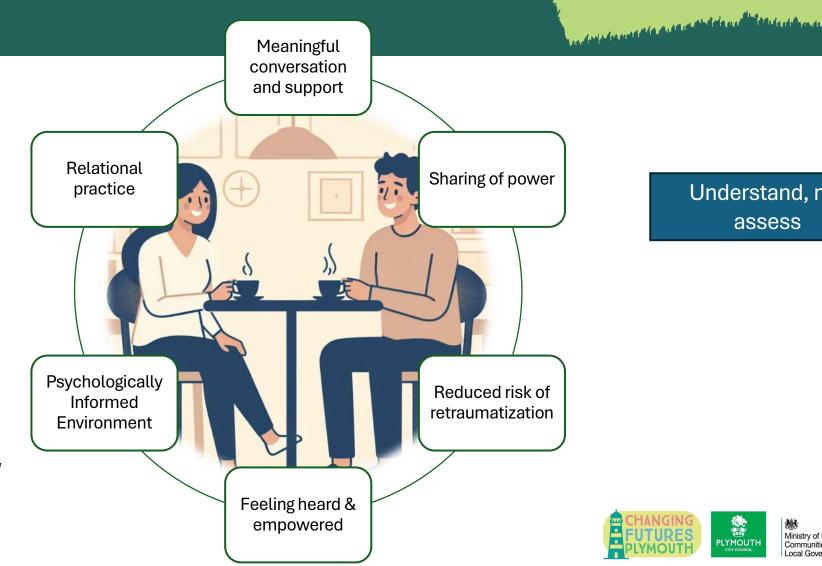




The vision

To this...

"Please give me as much control as possible so that I can feel powerful in this situation"



Understand, not assess











The Journey So Far

Community research in Plymouth

Pre-Changing Futures
Appreciative enquiry and
Big Buzz Events illustrated
issue of repeating stories

Pre 2020

Starting a "Passport Project"

Explore issue through consultation with orgs, research, & by hosting a workshop 2022-2023

Creating first draft version of tool

Using Microsoft Forms & Power Automate **2024**

Consolidating findings & adapting tool

Passport tool re-named to "Your Story" Established vision for culture change

Autumn 2024

Tool being tested by individuals and teams

Capturing feedback from individuals piloting sharing their story with services Adapting the tool as we learn

Feb- May 2025

Plymouth awarded funding in **2022**

Changing Futures



Action group set up

Co-producing a passport tool & to steer project Cross-referencing referral/assessment forms 2023-2024



Co-production groups

A mix of in-person & online focus groups took place with 15 people with lived experience.

Met with PCC housing teams

Spring 2024

The story so far















The story so far











Have you had to repeat your story to multiple services multiple times? Did you have to complete multiple forms that all asked the same thing?

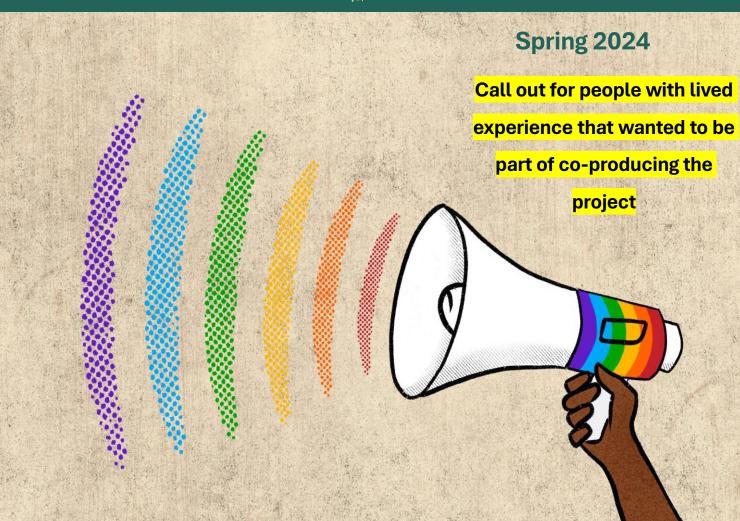
If you answered yes to any of these questions, keep on reading! We need people like you to help us create a passport style tool that will enable people to take control of their information and share with organizations as they see fit.

For more information about the project and focus group, please scan the QR code below or reach out using the contact details provided.









Passport Project Katy.Krysiak@plymouth.gov.uk 01752 305628

The story so far



franches with the selection of the design of the selection of the selectio

40 people responded to flyer...

'Well repeating a story shows you aren't being heard or taking seriously. This is how I feel, I feel irrelevant like I don't matter!!'

'Yes. It's exhausting and painful and unnecessary. It makes me feel invisible.'

'It was absolutely frustrating'

Spring 2024

'Yes, I also feel exhausted and it's depressing having to say the same thing over and over again especially a sad story'

'Yes! Re-traumatised. *Exhausted.*'







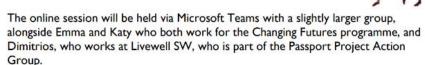


Co-production

What will happen in the focus groups?

If you are receiving this document, it means you will have received an invite over email to attend either a focus group that is in-person or online, or to meet on a 1-1 basis.

The in-person session will be with Katy and will be held at Ernest English House (Improving Lives Plymouth building)



Things that be may be covered in the focus groups:

Hearing your thoughts on the template for the digital "passport" form, so that we can finalise content. What more could we include? What changes should we make?

Hearing reflections about what the physical version could look and feel like.

Hearing your experiences generally of how assessments are conducted when using services in Plymouth, and how this may be improved.

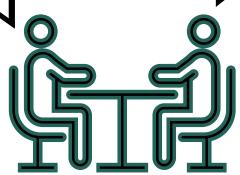
We may not need the full length of time that is scheduled in for these sessions to take place, and of course there will be breaks as and when is needed. Please let us know if there is anything we can do/be aware of that will make your experience in the focus groups easier or more comfortable for you.



Q5. What's your local connection?

"They're looking to exclude me because I haven't got a strong enough connection to the city"

OK, let's remove that question from the form.















My Name is Bea, and this is My Trauma Passport

'I want you to know that I am not a victim. I am a survivor. I am a casualty. I am Bea and I am f***** awesome.'

This story was collected during a conversation to support learning for the Passport Project delivered by Changing Futures Plymouth and partner organizations. On 29th May 2024 Bea has shared her trauma story and spoke about her experiences of having to go through the retraumatising process of having to repeat her story. These are direct snippets from an interview transcript.

"co-production is the meeting of minds coming together to find shared solutions"









Bea's Story

'When I get the same story - I will send you to social prescribing, I think yeah, I've been through that three times already. (...) They don't do befriending counselling. They do signposting, which means you get 6 half hour phone calls where they tell you to go somewhere else and then when you get to the somewhere else, they tell you to go somewhere else and then you get to the somewhere else they sign you right back (...) where you started in the 1st place and at the end of this you're absolutely exhausted. You've kept about 50 people in work, but nothing has happened that's helping you. It's really good because it stops people repeating efforts that other people have made because all the people I'm sign posted to you blissfully believe that there is somebody

else out there who is doing the work and there isn't.'













'Can you understand how difficult it would be for anybody to design a form that takes into account what's happened to me, but also takes into account who somebody who was in Iraq and saw all their friends getting blown up, or somebody who's gone through a really horrible divorce or somebody who was beaten up by their husband? So to me, there are only two important questions on the form. What happened to you? And you could hear a story of homelessness, you know. 'I'm a man. My wife divorced me. She ran off with someone else and now I can't afford a home because my other money payments are crippling me and I'm living in a dumpster. I also don't get to see my children, who I love because I'm now homeless and the wife has custody, so I've done nothing wrong, but I've lost my job, my family, my home.' How do you design A form? What happened to you? And if you can condense that into five or maybe even 10 bullet points? Or even fewer. Because remember the person reading this has got all of 60 seconds. You know, 10 minute GP appointment, a 20 minute cancer appointment. They do not have time.'



Bea's Voice











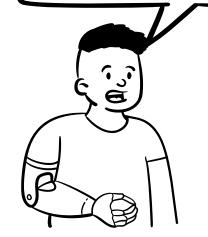


Please email Katy.Krysiak@plymouth.gov.uk to get a copy of focus group findings document.

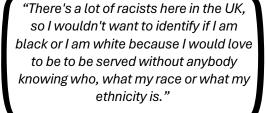
"I'm stunned that every time I go for assessment and I've now been assessed by nearly everyone that exists, none of which has ever led to any therapy or any help. By the way, it's been an exercise in frustration. Rage. Not once has anybody asked me do you sleep?"

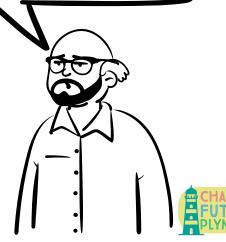


"They assess you, tell you 'here are all the charities, go speak to them'. Generic letters, instead of real support."



"Last time I went to the job centre, they gave me this horrifying long booklet (...). I'm visually impaired, my husband is dyslexic and has ADHD so trying to complete forms or any supporting documents is really hard"



















Do you often have to share your story when accessing support?

Feeling exhausted from endless assessments?



Your Story: short

We're piloting **Your Story** – a simple yet powerful tool to help you share your information effortlessly and make your voice heard. This innovative approach aims to improve our support and avoid re-traumatization.

To trial the tool and to find out more, please scan either of the QR codes.



Your Story: long version of tool

Why use Your Story?



Simplify Assessments

Streamline the process and save time



Reduce Repetition

Share your story once and let it work for you



Empower yourself

Take control of your information and share your story in your own words

Be part of the learning process

You'll have the opportunity to help us improve the tool and be part of the learning process if you'd like to.

To find out more about the Your Story project, please scan the QR code below.

SCAN ME!

For any queries, please contact: katy.krysiak@plymouth.gov.uk emma.stevens@plymouth.gov.uk

How can it help you?



Share with Support Workers

Provide your story before or alongside assessments.



Recall Information

Easily recall your information during assessments or support sessions.



Ensure comfortable meetings

Help professionals understand your needs and provide a trauma-informed approach.

Early Feedback

'Exciting experience, that I can give out information about who I am without having to repeat myself. I feel it made a difference in the support I received from GP and I feel it will be very helpful in the future. There were lots of details in the form that the GP saw that I never told anyone.'









Your Story – 4 questions

Short Version

Maria Addin Abdrian Maria de Cara de C

- 1. What happened to you?
- 2. How did it affect you?
- 3. What support do you need now?
- 4. What would you like people to know before they meet you?
- This might include things like:
- I don't like physical contact
- I would prefer to have a male/female support worker
- Things that trigger me
- I prefer to meet in a neutral place
- It can be helpful to explain reasons for your preferences and organizations will do their best to accommodate this request.









Your Story – Multiple Disadvantage focus

Long Version

Maintelle autom at delegant the delegant and

What matters

- What coping strategies do you have?
- What is your sleep like? Do you eat nutritious meals?

Health

- If you consider yourself to be a person with current or previous problematic drug or alcohol
 dependency, you can use this space to share details about your experiences. Remember to be kind
 to yourself and share as much or as little as you feel comfortable sharing.
 - Please be assured that there will be no judgment, regardless of how you answer it. This information can help organizations to offer the most appropriate available accommodation if that is what you need, and/or support, signpost to relevant organizations if you want, and most importantly, to keep you safe.
- If you're feeling ready for change, please use the space below to explain what it might look like for you and what support you might need with this.
 - If you're not feeling ready for change, that's OK you can leave this space blank.









Your Story – Multiple Disadvantage focus

Long Version

reale and it shelden with the state of the

Money

- Do you owe any money to anyone and do you need support with this?
 - This could be rent arrears, council tax, electricity, phone bills.

 Organizations sometimes ask this as there are many charities that have flexible grants to support people through financial difficulties.

 Remember, if you don't want to, you don't need to put anything down.

Justice System

• If you did spend time in prison, you can use this space to share any new skills or qualifications you gained or any work experience.









The tool now



8

If you would like to send a copy of Your Story to someone you trust, please include their email address below and they will receive it via email.

If you decide to send them a copy of Your Story, please make sure you have informed them to expect an email. Please do not include any extra spaces, characters or text.



Katy's story: 5/8/2025 1:04:58 PM



<u>PLEASE NOTE THIS IS AN AUTOMATED EMAIL - DO NOT RESPOND</u> Your Story is completed!

You can now keep this email safe in your inbox or print a copy of it, to help you in the future, in whatever way works for you. You can share it before or during appointments (for example: housing, GP, mental health) to reduce the amount of times you repeat your story. You are 100% in control of how you use this version of Your Story to help you.

What happened to me







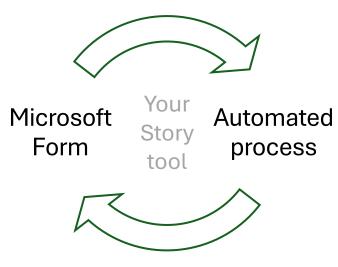


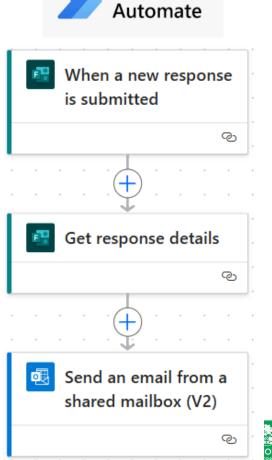
The tool now



and was desired to a state of the delication of the state of the







Power







The Power of Language

Co-production

desired the authoritation of the delication.



The "what matters to me" style questions had good feedback:

"Knowing what matters to people helps in understanding them even better."

"it's giving some kind of connectivity."

Including phrase "please feel free to elaborate" because:

"that way you cut through for that individual, they've been able to ignore the issues that aren't theirs and only focus on the issues that are theirs"











Co-production



"So long version love it, very therapeutic and suitable for completion on a computer, wouldn't want to complete it myself on a phone/ipad, think it feels more suitable for someone to complete in a referral situation especially as the Dob field is a pain, it won't let me easily go back to 1978, to me it needs a type in manually option for me. Do think certain fields need an open character limit (both do to be honest on complex issues especially medical fields)."

'Really good form in that it captures essential data but needs more work for more complex stories or the capability to upload extra supporting evidence for those that need to add extra information.'

to the sing the action ability and the desire of the









Co-production

white since the author abidida was the desired and a

'Exciting experience, that I can give out information about who I am without having to repeat myself. I feel it made a difference in the support I received from GP and I feel it will be very helpful in the future. There were lots of details in the form that the GP saw that I never told anyone.'

'Really appropriate for a quick update or introduction to the service, would really help to be able to upload attachments plus it would help to know the character limit on the boxes as my story is very complicated but a work around could be to be able to add attachments.'







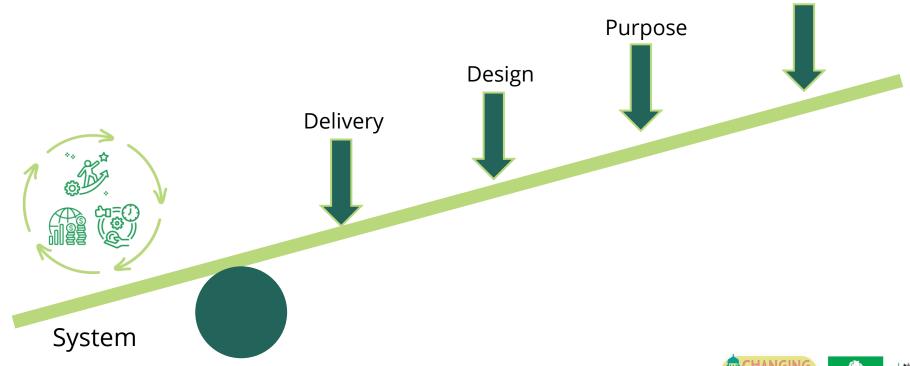


The tool now



Culture

Focus on culture change rather than the tool itself













Culture Change



And the side of the state of th

Criteria Referral Batch Threshold Forms DO Sort TO Allocate Wait Pass on

Service-centred – 'push' model
We push what we do and then
push you on to somewhere
else

Close

To that



Person-centred – 'pull' model You pull the support & opportunities that matter.









Sharing Power



9

In this section, you can indicate your information sharing preference if you decide to share Your Story with an individual or an organization in the future.

- I do not wish for My Story to be shared any further.
- I wish for My Story to be shared with relevant agencies if it will benefit me. You do not need to ask me prior to sharing.
- You may be able to share My Story with relevant agencies, but please tell me first who you would like to share it with and gain my consent.

Your Story, You Own It!



The End

Well done! You have completed your story. You will receive an automated email shortly containing Your Story.

We hope you liked completing it and will keep it safe in your inbox to use at a later date if you need it.

You can also save your answers as a PDF document. We also hope that it will make your life easier for the future and that you won't have to repeat your story. You can now offer to share it before assessments, alongside referral forms, offer to your support worker, friends, family - this is YOUR story, YOU own it, and YOU choose what to do with it.









Data sharing





Trusted professional or organisation can hold the link to Your Story form & all responses. They are responsible for keeping it safe or sharing if requested.



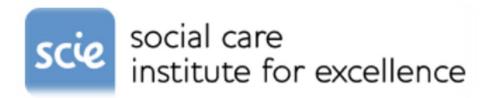






Data sharing







- •The law does not prevent the sharing of sensitive, personal information within organisations. If the information is confidential, but there is a safeguarding concern, sharing it may be justified.
- •The law does not prevent the sharing of sensitive, personal information between organisations where the public interest served outweighs the public interest served by protecting confidentiality for example, where a serious crime may be prevented.
- •It is good practice to try to gain the person's consent to share information.
- •As long as it does not increase risk, practitioners should inform the person if they need to share their information without consent.







Information sharing



Do you have anything you'd like to share with me?

Shifting power dynamic

Understanding not assessing

Would you like a copy of this document for your records?

Acknowledging value of one's story

Not extracting information

Inform about confidentiality & safeguarding law

Stay legal

Do no harm











What are we asking?

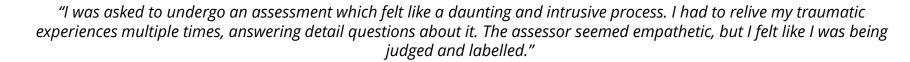
Instead of

- Questions that don't help you understand a person in their own context
- Insensitive questions that might trigger them
- Irrelevant or deficit based questions



Shift to

- Questions that help you understand someone
- "Do you have anything you'd like to share with me before?"
- "Would you like a copy of what you've shared today?"
- Relevant, strengths based, person centred questions













How are we asking?

Instead of

- Closed questions
- Assessor always completing the form
- Unaware of own body language (looking at form instead of at the person) or environment
- Rushing through the questions to fit in allocated appt. time



Shift to

- People to have choice over how they communicate their story/information. Give option to fill out the form together with a trusted professional?
- Start assessment process with kindness and genuine interest in the person first- "ask how are you?" And mean it.
- Understanding, not assessing
- Shame sensitive language
- Mindful of body language & trauma sensitive communication

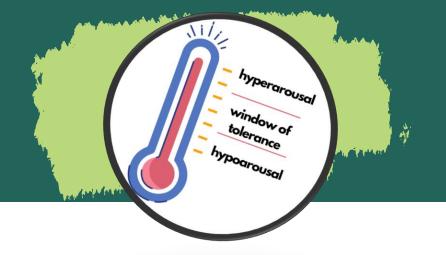
"Because all the way through the NHS there is this massive power imbalance that's very obvious to the client and blissfully, the people, the people who aren't the clients, are actually very, very unaware of it...Small things like your chair being the same height, saying hello how are you and introducing self. "How to act like a human being towards another human being?"











When are we asking?

Instead of

- Asking difficult questions as soon as someone walks into a service
- Asking questions when someone is distressed/not ready to answer them



Shift to

- Asking the hard questions once trust/relationship is built
- Asking people at a time and place they feel comfortable.

"I think when you meet someone, you'll definitely know if you can continue on open-ended question with that person or not (...) sometimes you just know if you click with a person if you if you feel like you can trust them and it's really difficult (...) when you're feeling vulnerable when you're going for a tough time and you have to open up to somebody like how do you know that you can trust them?"











Why are we asking?

Instead of

- Collecting sometimes irrelevant information because it's on the form
- Little/no explanation in assessment forms why information is requested



Shift to

- Asking questions that help us understand people in their own context
- Clear verbal explanation of why we're asking questions, where the information will go and how it will help them

Question about specifying the local connection has been discussed at length during the focus group. Participants feel that the purpose of this question is to 'catch them out'; if they do not have the right connection to the city, or they haven't lived here for long enough, they will not be offered support. There is also no explanation on existing forms why this question is asked and participants felt suspicious about it.

















Do you have to conduct numerous assessments or repeatedly ask your clients the same things?

Introducing: Your Story

A simple yet powerful tool to help people share their information effortlessly to services. This pilot aims to improve the support given to people and avoid re-traumatization by services.

To find out about the Your Story project, scan below:



How Your Story works

A person completes their story

A person can document their story in their own words via following a link to a Microsoft Form or by scanning either of the QR codes to the right. Tell people you are working with that they can share their information this way.







Long version

Why use Your Story?

Better understand someone

Gain a holistic understanding of someone's past, present, and future from their perspective. Better identify the root causes of issues.



A person shares their story

Ask before assessments or appointments: "Do you have anything you'd like to share with me first?"



People can share their story before or alongside assessments to avoid having to retell it.

If it is shared with you

Get consent to attach someone's story to their case notes or if sharing with another person/team



More comfortable meetings

Avoid having to repeat difficult questions that might be uncomfortable for a person to verbally respond to. Understand what someone might need to enable a better experience with a service, e.g. communication needs.



Improve experience of assessments

Foster a trauma informed assessment process that is person-centred Save time during appointments



Be part of the learning process

You'll have the opportunity to help us improve the tool and be part of the learning process if you'd like to. To find out more about the pilot project and to ask questions, please contact:

katy.krysiak@plymouth.gov.uk or emma.stevens@plymouth.gov.uk











System Conditions



Fragmented System

Policy & Legislation

What else? ... feel free to pop your suggestions in the chat

Digital Exclusion (staff & people using services)

Lack of shared database

Low capacity & high demand

No perfect solution

Co-production budget









Appreciation for staff





"I know the staff out there that are doing really hard, working jobs, hard working hard. Do their best. I'm accessing them because of the barriers of the referral process. Assessment process is nigh on impossible at times because the system is so stretched and I think it's because it doesn't have the frameworks and the forms and the paperwork to support everybody. No, I could go on and talk for hours and hours on this, I'm afraid. Because I've seen both sides of the system and I desperately think it's horrific at the moment, I feel for staff working in it because. I know they want to help people who really do and they're genuine, but they're backing their heads off their wall at the other end because the form they've got or the paperwork they've got doesn't match what they need to give the client or the legislation."











Partial implementation



I only want to find out what our service users think of our assessment form

- We can provide you with guidance for our focus groups, posters we made and email templates.
- We can provide you with coproduction guidelines and maybe even support with facilitating some sessions.

I want to give people the option to share their stories with me before we meet.

- Great! We can offer regular sessions to support you through this process.
- We can offer trauma informed training.

I'm thinking about it but I don't think I'm ready.

- That's OK! We can provide you with some useful resources about Trauma Informed practice.
- We can send relevant training opportunities & other ways to get involved.









Full implementation



I want to use the approach & tool exactly as it is

• We can make the necessary changes for you and share the templates with you and share tutorial video.

I want to do focus groups and create my own tool - will you help me?

• Of course. We can offer regular meetings to assist you in setting this up.

We want to replace our assessment forms with the long version of Your Story - what now?

• Wonderful! We can offer some Changing Futures Project Officer time to help you implement this.









Practitioner Feedback



"I was so pleased when I came across the 'my story' framework from Plymouth as am often dissatisfied with the systematic approach of MDT. As professionals we cannot continually 'do to' or make decisions on peoples lives and then get frustrated and label them as not engaging or willing, I want to empower the women I work with to feel they have some control and choices regarding their own care and support.

We have only trialled this with 3 women so far, and it feels different ..they can choose to just answer some of the 'my story' questions to give to professionals instead of attending in person or fill in the questions and attend. I love the question 'what I would like you to know before we meet'. What I have noticed is, it is easy to make difficult/harsh decisions about someone's life when all the information is on paper ..it is just data. These questions and women attending meetings brings out the human quality and I feel it is creating a little more compassion and understanding of an individual circumstances or behaviour. It is reinforcing that one size does not fit all and we have to have a better understanding of why someone behaves or presents as they do to enable us to make informed decisions about individualised support packages to put in place. I have been collating the information given to me, kind of like a spidergram so that I can share with other professions parts of their story, things that may not be in their files for example how many brother and sisters they may have, I don't 'need' to know these things but if its important to the person I'm working with then its important to me, it helps to build report and a trusting relationship. Very often I cannot do much to assist or change someone's circumstances, but I can ensure that they feel valued, seen and heard while they are with me. After a female attended an MDT last week, when she got home she messaged me to say 'no one has ever asked me if I needed any help or support to attend court before' that made my day, she felt acknowledged, and it mattered. I used to be embarrassed to take individuals to these meetings, I am hoping that this will be a thing of the past."

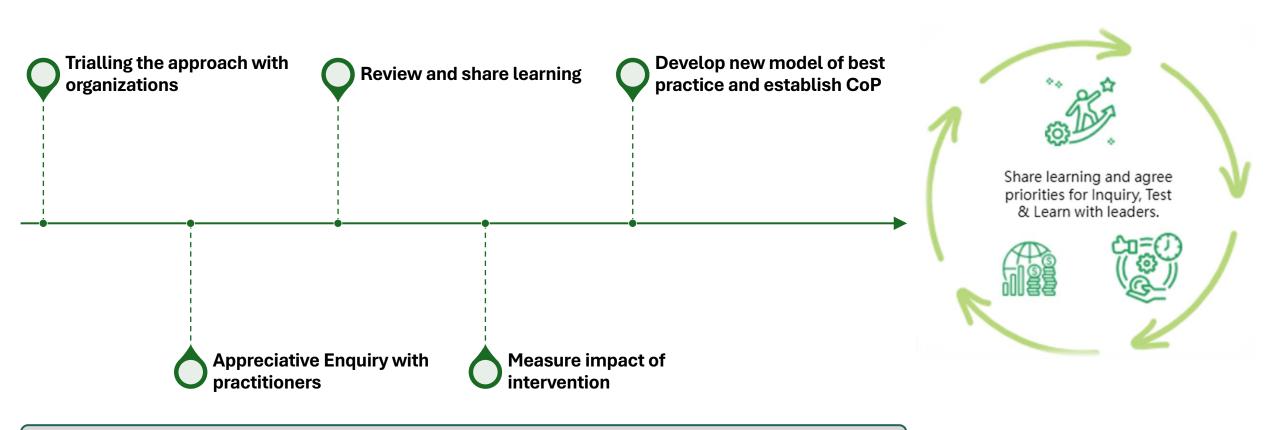






What's next









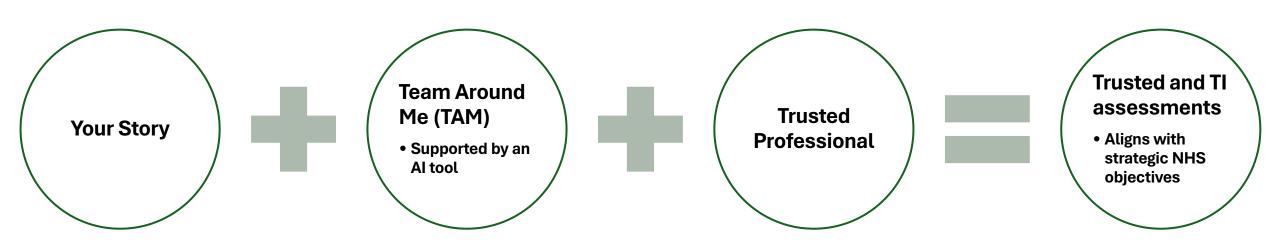






New model of Best Practice













Key Reflections & Emerging Practice





- Growing interest in flexible, person-centred ways of working.
- MD programme has long collaborated across areas—different journeys, same destination.
- Rise of passport models and TAM (Team Around Me) being embedded nationally.
- Others are now trialling TAM alongside us—momentum is building.
- Great collaborative learning from:
 - Bex (Camden, SHP) passport project.
 - **Lucy** (Camden, SHP) now training others in TAM; instrumental in spreading the model.
- Encouraging to see shared learning and innovation across regions.











Hear from Expert by Experience: SP









Expert By Experience



- •About me SP 17 year career in public services customer facing and at times support staff to senior management and indirectly to Cllr's and their teams, also was a trainer I learnt anyone can suffer a form of trauma.
- •Anger can change us listening can diffuse things through validation.
- •Put yourself in a client's shoes if you struggle as an experienced professional how can someone at disadvantage in life be it health, education, or financial crisis manage to navigate your systems? How can they cope and advocate especially if not experienced in online systems even advocates now use online channels and work from home (PCC and Livewell SW use this route or did when I needed them a year or so ago).
- •We all have weaknesses and can become vulnerable when we least expect it even with the best family/friends network going.
- •Challenge your views: go to a front-line service at peak time sit observe and see who doesn't want to leave, try two random shifts what are the common themes?

Any Questions?

If you would like to trial this approach — we want to hear from you!



If you are already doing something similar – we want to hear from you!

Email Katy.Krysiak@plymouth.gov.uk or Emma.Stevens@plymouth.gov.uk







