



Stepping Stone Evaluation Project

BRIEF REPORT



This Brief Report is intended for readers who want to learn about the high-level findings from the Stepping Stone Evaluation Project. Please refer to the complete report for the full scope of learnings.

What we did

The Stepping Stone Evaluation Project (the Project) occurred between August 2022 and August 2023. The Project aimed to:

1. **Capture** the impact of Stepping Stone on members’ physical and mental health and wellbeing, social participation, and civic participation.
2. **Communicate** the impact of Stepping Stone on members to funding bodies, current and prospective members and other people interested in understanding Stepping Stone.
3. **Use** the evidence generated in this evaluation to suggest improvements for Clubhouse.
4. **Build capacity** within Stepping Stone so that evaluation becomes part of Clubhouse thinking and practice.

The design of this evaluation used **cross-sectional and longitudinal data comparisons** with data collected in three waves (Figure 1). We recruited:

- **Existing members:** people who were Clubhouse members before August 2022
- **New members:** people who became a Clubhouse member after August 2022

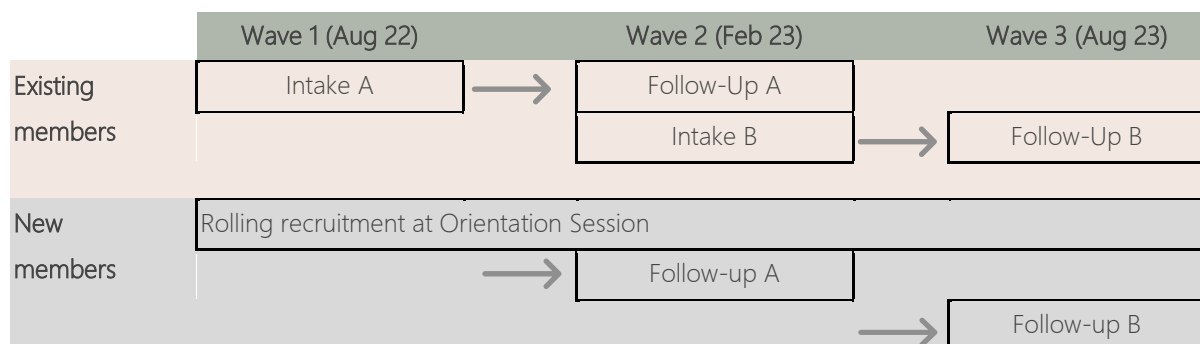


FIGURE 1. EVALUATION DESIGN OF THE STEPPING STONE EVALUATION PROJECT

- This project received ethical clearance from The University of Queensland’s Human Research Ethics Committee (2022/HE000887).
- There were multiple options for members to participate and members were able to opt-in or opt-out across the data collection waves to provide equitable opportunities for participation.

TABLE 1. SOURCES OF DATA IN THE STEPPING STONE EVALUATION PROJECT

| New Member Surveys | Existing Member Surveys |
|---|---|
| <ul style="list-style-type: none"> - Orientation surveys were supported by Stepping Stone staff - Follow-up surveys were self-completed, supported or interview-administered by ehc staff | <ul style="list-style-type: none"> - Both Intake and Follow-up surveys were self-completed, supported or interview-administered by ehc staff |
| Interviews and Focus Groups | Lumary™ Member Database |
| <ul style="list-style-type: none"> - Members were invited to one-to-one, semi-structured interviews in-person, over the phone or videoconferencing - Staff were invited to one-to-one, semi-structured interviews in-person <i>AND</i> in-person focus groups in Wave 3 | <ul style="list-style-type: none"> - Pre-existing data collected through Stepping Stone processes (e.g., attendance, demographics) - Linked to survey data where consent was provided by a member |

The outcomes captured in this Project were collaboratively defined with staff and members (Figure 2).

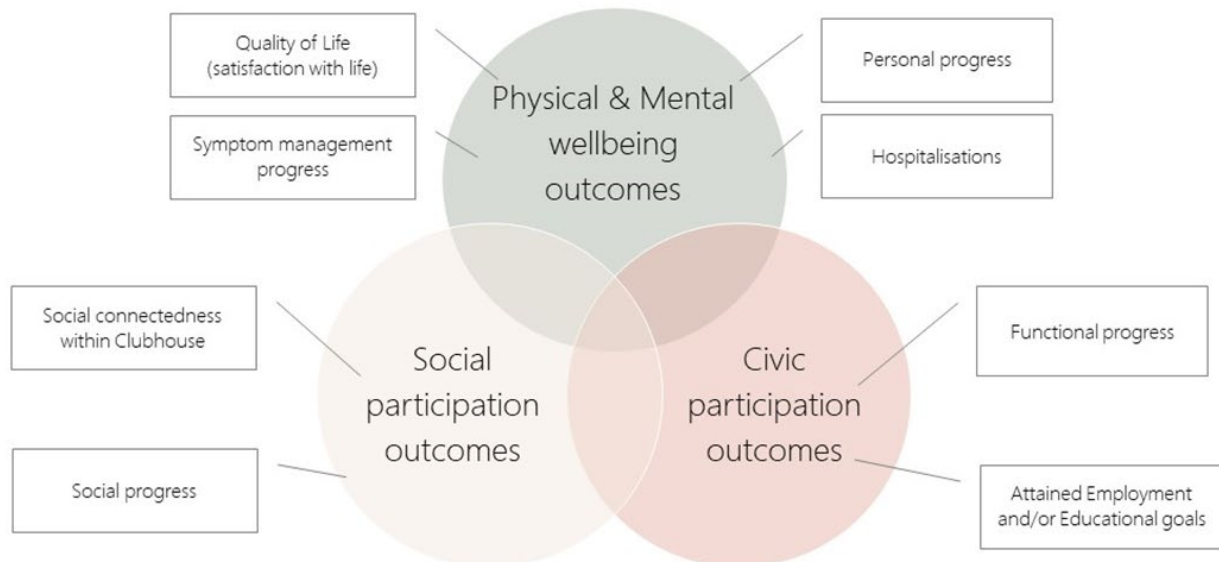


FIGURE 2: OUTCOMES MEASURED IN THIS PROJECT TO CAPTURE THE IMPACTS OF STEPPING STONE ON MEMBERS

What we found

Who are the Stepping Stone members?

Over the twelve months of this evaluation project:

- 187 people came to do a Tour of the Clubhouse
- 72% of those who did a Tour became a Stepping Stone member (11 people per month)
- Members waited on average 105 (± 43) days to return to the Clubhouse after joining.

People who became a member in the past year were younger and less likely to be diagnosed with Schizophrenia when compared with all current members.

When we look at all active Stepping Stone members, they are:

- more likely to be male (60%),
- aged 48 years on average, and
- most commonly diagnosed with Schizophrenia (36%); then Depression (32%), other affective problems (14%), and other mental or behavioural problems (8%).

In this evaluation, we engaged with 237 members and 39 staff. We collected a total of 341 member surveys (237 Intake surveys and 104 Follow-up surveys), and conducted 23 member interviews, 11 staff interviews and 2 staff focus groups (which had 28 staff in attendance). Our evaluation sample was representative of all active members at Stepping Stone.

How is Stepping Stone delivered and accessed by members?

- Only 20% of the overall income for Stepping Stone was recurrent, the majority of the remaining income came from service-based income (55%) or non-recurrent grants (21%).
- Members spoke about the Stepping Stone journey as not being linear or time-based. Rather they spoke about the different stages of the Stepping Stone Journey. These were 'finding my feet', 'in a routine of coming to the Clubhouse', 'out in the community and accessing the services as needed', 'becoming a mentor', and 'moving on'.
- Outreach was the most commonly experienced service for new (88%) and existing (97%) members. Other popular services that members engaged in were Work-Ordered Day (68% new members, 36% existing members) and Social Recreation (22% new members, 47% existing members).
- Members engaged with Stepping Stone services differently based on:
 - whether they are new or existing members,
 - their stage of the Stepping Stone Journey,
 - where they live (e.g., proximity to the Clubhouse).
- Members said Stepping Stone is somewhere they can progress at their own pace, a place where they are accepted and valued, and not known for their diagnosis.

What is the impact of Stepping Stone on its members? The highlights

Existing members scored higher than new members across **progress domains, social connectedness and quality of life**. Table 2 shows the differences in progress domains and whether they are statistically ($p < .05$) and meaningfully (shift from Transitional area of progress to Area of Success) different.

TABLE 2. RECOVERY ASSESSMENT SCALE PROGRESS DOMAINS

| Progress Domains | Existing (n=157) mean (\pm SD) | New (n=75) mean (\pm SD) | Statistical Difference | Meaningful Difference |
|---------------------|-----------------------------------|-----------------------------|----------------------------|-----------------------|
| Personal Progress | 73.3 (\pm 14.2)% | 71.6 (\pm 16.0)% | Not different ($p=0.11$) | No |
| Functional Progress | 78.0 (\pm 14.2)% | 74.0 (\pm 16.3)% | Different ($p<0.01$) | Yes |
| Symptom Management | 69.5 (\pm 17.0)% | 65.2 (\pm 19.5)% | Different ($p=0.03$) | No |
| Social Progress | 74.3 (\pm 17.0)% | 70.0 (\pm 17.6)% | Different ($p=0.01$) | No |

Transitional area of progress
 Area of success

Existing members have significantly **lower rates of hospitalisation** than new members, and new members experience a meaningful reduction in rate of hospitalisation in the first 3-6 months of Stepping Stone membership (Figure 3).

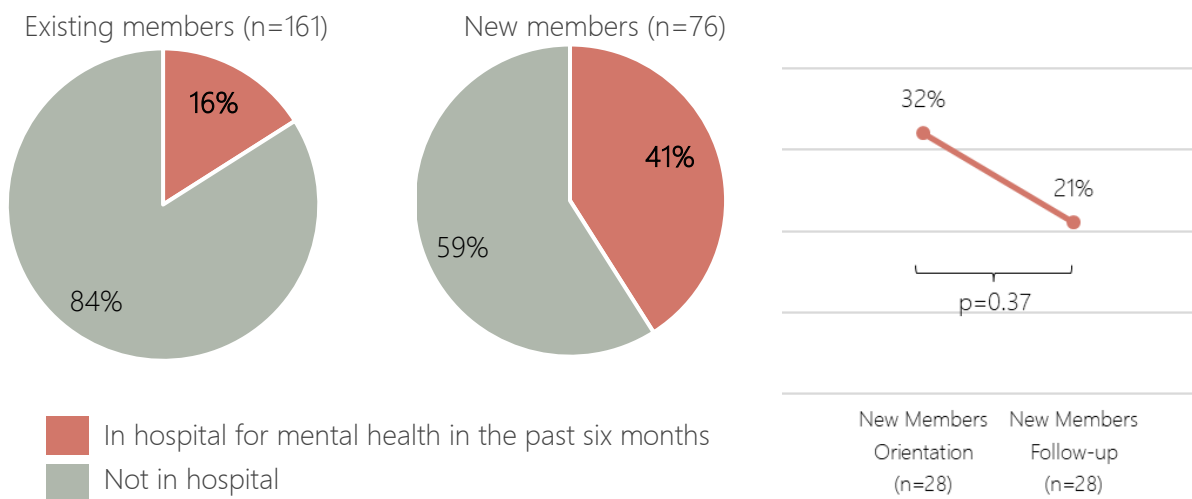


FIGURE 3: HOSPITALISATION FOR MENTAL HEALTH IN THE PAST SIX MONTHS FOR NEW AND EXISTING MEMBERS

Existing members experience **higher quality of life** than new members across five domains, including life as a whole, mental health, leisure activities, employment status and financial situation (Figure 4).

How satisfied are you with your...

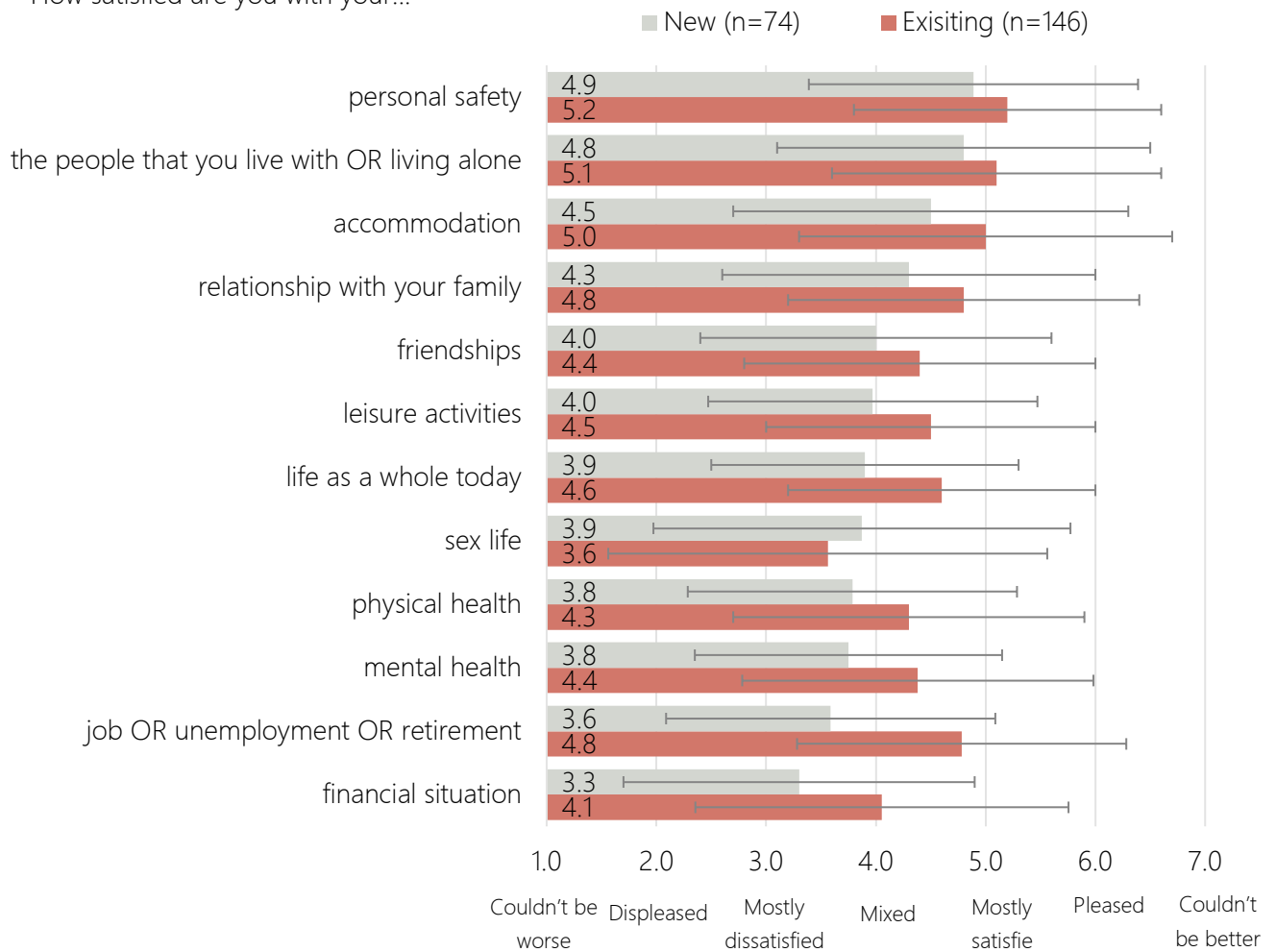


FIGURE 4: QUALITY OF LIFE SCORES FOR NEW AND EXISTING MEMBERS.

"I'm 20 years down the journey of my mental health journey since first getting unwell and it's not a case of you get miraculously healed. You get challenged, I've been challenged in my journey with the ebbs and flows...this is a place I can come to, so I trust that reassurance. Because of my condition it's imperative to feel like you've got some place, not just to get support, but to come to that gets it... you know when your symptoms are playing out, you still feel safe, you still feel secure, and I think that security, being a chronic condition, is reassuring."

– 50-year-old male, member for 15 years.

What we found: Case Study of a Member – Tracey

Steps improves quality of life and builds resilience to mental health struggles.

Tracey has been a member of Steps for 23 years and talked about Steps as a “safe haven”, somewhere to go that you were “treated with respect”, where you “weren’t known by your illness.” Her journey at Steps has “transformed” her life...

*“When I started coming I had been in hospital most of the time for nearly 15 years so I hadn’t been working or anything, within about a month of starting to come they helped me find a job, and it was independent employment but they helped give me the courage to actually I guess believe that I could work and they supported me right through 20 odd years of working... It has transitioned me from being in a position where I was never going to work, never have any sort of independence, to basically getting work, finding my feet basically, and knowing that they’re always there...it’s transformed me, and **even though I’ve come back I’m still nowhere near as sick as I was, and I still haven’t needed hospital.**”*

Tracey explained that all of this was possible because the people at Steps believed in her, and how capable she was to contribute to and be a part of her community again.

*“I do think one of their main things is that they do build a person up to believe in themselves and to I guess start to believe, whether it’s getting a job, whether it’s just functioning in the community, I think they, that’s been a really big thing for me, **so quality of life is pretty much what they gave back to me.. I was participating in life again.**”*

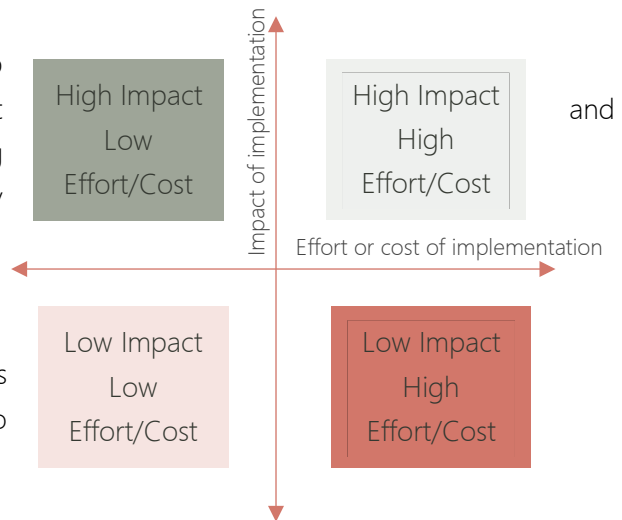


Something that is really special about Tracey’s story is the full circle moment when she was able to organise a transitional employment position for other members at Steps at the place she worked. She really appreciated the opportunity to give back to Steps and the other members at Steps. The journey from finding her feet, to building her confidence, to independence in work and community, to giving back, gave her more meaning in her life and has shown her that no matter what stage of her journey she is, she always has somewhere she can turn to...

“it has always been a safe place for me.”

Recommendations for Stepping Stone

This evaluation project has created a deep understanding of the experiences, engagement outcomes of members and staff at Stepping Stone. We appreciate that Stepping Stone already has great mechanisms for members to be involved in refining how the Clubhouse operates. However, there are some key learnings from both members and staff in this Evaluation Project that could be acted upon to further improve Stepping Stone.



| Recommendation | Details | Potential Impact | Effort/Cost |
|------------------------------------|---|------------------|-------------|
| 1.1 Advocate for funding that fits | Educate funders on how the Clubhouse Model operates and how funding mechanisms and required reporting is best suited to support this Model. Use the evidence from this Project to demonstrate the impacts of Stepping Stone on members to advocate for recurrent funding. | high | high |
| 1.2 Onboard new members | Acknowledge that new members need clear expectations and structure to engage early on. Explain at Orientation that some new members feel overwhelmed and that they can engage at the Clubhouse when they are ready, but in the meantime members and staff will prioritise Outreach. Consider organising the details of those first few engagements (e.g., which staff will greet them, which WOD unit will they engage with). | high | low |
| 1.3 Prioritise Outreach | Continue to prioritise Outreach for all members and systemically track which members are due for contact. This service helps new members to feel connected to Clubhouse when they are not attending and supports existing members when their circumstances shift. | high | low |
| 1.4 Create a dedicated quiet space | Discuss at a house meeting that a space in the Clubhouse becomes a dedicated quiet space. Stepping Stone should agree on the rules together, but we propose: it can be accessed by members | high | low |

| Recommendation | Details | Potential Impact | Effort/ Cost |
|--|---|------------------|--------------|
| | and staff at any time, the door can be closed, there is no music, and there is no talking. | | |
| 1.5 Continue to re-build employment and education | New and existing members both have a desire for more employment opportunities. Continue to re-build the employment and education unit within Stepping Stone. Broaden the types of Transitional Employment positions available (admin/office roles), systematically discuss employment goals with all members, use members as case studies to break down myths about Transitional Employment and celebrate members' employment milestones. | high | high |
| 1.6 Strengthen the focus on housing | Supporting access to safe housing is a core part of the Clubhouse Model. Members need better support for this, and staff need more training in how to offer accommodation support. Use relationships with partners to educate staff on options for members obtaining or retaining safe housing. Systematically discuss housing goals with all members. | high | high |
| 1.7 Refine staff schedules and communication | Create more space in staff's daily schedules to transition between roles, or create schedules where staff remain in one role across a whole day or half-day. Consolidate the number of channels that staff receive messages about coordination and establish a protocol about how last-minute schedule changes are communicated and expectations for checking channels frequently throughout the day. | high | high |
| 1.8 Build professional development practices for staff | Introduce an off-site professional development day at least once every six months when all staff can be together to debrief on their practices and plan for further skill development. Host trainers to deliver skill training in specific topics identified by staff. | high | high |

Recommendations for Monitoring, Evaluation and Learning

This Evaluation Project was the start of a new journey for Stepping Stone. The Stepping Stone community are starting to embrace the role of Monitoring, Evaluation and Learning (MEL) in their practice and starting to understand the role that MEL can play in strengthening the Clubhouse. We acknowledge that this change is at an early stage and that there is understandably some reluctance for staff to fully embrace MEL practice in their already-busy daily activities. We will work with Stepping Stone over the next phase of this project to build capacity for MEL, help embed MEL practices and support the implementation of the following recommendations.

| Recommendation | Details | Potential Impact | Effort/ Cost |
|--|--|------------------|--------------|
| 2.1 Embed Orientation Survey | Retain the Orientation Survey for all new members at Orientation (or within 2-weeks). Work with staff and members to understand the value this survey holds and that most members are comfortable completing the survey (particularly if it is interview-administered). The items in the Orientation Survey will be refined following this project. | high | low |
| 2.2 Add key outcomes from the evaluation survey to the annual member surveys | Discuss at a house meeting the idea of adding key outcome measures used within this evaluation to the existing Annual Member Survey. These additional questions would enable ongoing evaluation of the impacts of Stepping Stone. Host an annual House Meeting dedicated to reporting the findings of these surveys to celebrate progress and discuss implications. | high | high |
| 2.3 Refine the constructs being measured | Amend the tool used in this project to measure 'social connectedness' to a tool that captures 'belonging and inclusion', and consider adding a tool that captures 'social re-integration into community'. We heard from members that belonging and acceptance was a key part of their progress journey, more so than social networks and friendships. Analyses could then be added to confirm this as a mechanism for better progress. | high | low |

| Recommendation | Details | Potential Impact | Effort/ Cost |
|---------------------------------------|--|------------------|--------------|
| 2.4 Amend KPI on 'Returners' | Change the KPI in the Stepping Stone Operational Plan from % of members returning within 2-months to 5-months (based on the mean (SD) return time for new members). | low | low |
| 2.5 Track the reach of Stepping Stone | Regularly track and report on the relationship between number of Tours, Orientations, and Returners to understand which promotional efforts throughout the year are yielding Tours and potentially to ramp up Outreach at times when Returners are lower. Also explore the Non-members who do a Tour but do not return- these people chose to not engage in the current Evaluation Project. | high | low |
| 2.6 Refine data collection | Continue to refine the Salesforce forms and database to streamline data capture, not only at Orientation but throughout a member's Stepping Stone Journey. Implement a 'data validation sprint' every quarter to check on missing data for all members and backfill data where possible. Collect more specific descriptions of member's diagnoses at Orientation to enable members to be classified according to severity for funding eligibility. | low | low |