

## Problem Gambling Service Audit (Sheffield) 2017-18: Findings

### Introduction

In October 2017, Sheffield City Council's Public Health, Financial Inclusion and Licensing teams met to consider responses to problem gambling in the city. Public Health agreed to undertake two tasks as part of this work:

- To pragmatically review the literature on problem gambling and provide an evidence summary;
- To undertake some mapping (Service Audit) to understand how equipped services in the city are to identify, treat and/or refer problem gamblers;

A service audit was designed to address the question: can Sheffield services identify, treat and/or refer problem gamblers?

### Methods

The audit was sent to community based organisations likely to have higher presentation of problem gambling due to co-morbidity (e.g. addiction, mental health), debt (e.g. advice services) or serving those who meet the profile of those vulnerable to problem gambling (e.g. young people). The audit was also sent to GPs, social prescribers, housing providers. In all cases the commissioner of the service was asked to distribute the survey. The Local Medical Committee and Clinical Commissioning Group helped raise awareness and distribute the audit to GPs, however unfortunately this coincided with higher than expected seasonal flu presentation which may have impacted on response rate.

There were 5 questions asked as part of the audit with Yes, No, Don't Know answer options.

- In the past 12 months has your service received any information or training (online, face to face, fact-sheets) about problem gambling? Not including this service audit information
- Does your service ask question(s) about gambling as part of routine assessment and care planning?
- Does your service use a recognised screening tool to identify and/or assess the severity of problem gambling e.g. Lie/Bet, GA-20, PGSI?
- (Clinical providers only) Does your service offer efficacious treatment for problem gambling e.g. Cognitive Behavioural Therapy?
- Does your service know where to refer problem gamblers for effective treatments, debt or peer support?

A free text box was provided for additional information arising from Question 5 regarding "Where do you currently refer problem gamblers for effective treatments, debt or peer support?" (please include internal referrals to your own organisation).

### Findings

31 organisations responded to the audit, including 10 housing organisations, 5 GPs, 4 mental health community providers and 2 addiction services. This is a small sample and findings are not generalizable to all community settings in Sheffield, but this provides a basis for further discussion of how to improve local responses to problem gambling.

**Question 1** - *In the past 12 months has your service received any information or training (online, face to face, fact-sheets) about problem gambling? Not including this service audit information*

Only 1 of the 31 organisations who responded had received any information or training in the past 12 months. One respondent said: "GPs do not need online training packages etc. What we do need is good local services that support gamblers".

The audit raised awareness in and of itself:

*“It is, of course, very likely that problem gambling will be present in at least some of our casework, quite probably more often hidden than acknowledged.”*

*“Your asking these questions will make me at any rate a little more aware of this”*

**Question 2** - Does your service ask question(s) about gambling as part of routine assessment and care planning?

6 of the 31 organisations responded “Yes” to this question – examples given were raising problem gambling as part of discussions about money.

**Question 3** - Does your service use a recognised screening tool to identify and/or assess the severity of problem gambling e.g. Lie/Bet, GA-20, PGSI?

Only 1 of 31 organisations responded “yes”. This suggests that validated screening tools are not used, for whatever reason.

**Question 4** - (Clinical providers only) Does your service offer efficacious treatment for problem gambling e.g. Cognitive Behavioural Therapy?

15 providers were non-clinical so this was not applicable. There were 3 positive (yes) responses from GP/Mental Health – GPs mostly delivered interventions via internal Improving Access to Psychological Therapies (IAPT) referral. However, one respondent stated “ IAPT will not provide treatment as far as I am aware”– so there is a need to clarify whether IAPT will provide treatment for problem gambling.

**Question 5** - Does your service know where to refer problem gamblers for effective treatments, debt or peer support?

15 out of 31 responders knew where to refer problem gamblers. This was the highest number of positive responses of the audit. The most frequently mentioned local points of referral were: Gamblers Anonymous (7 respondents), IAPT (5 respondents ), and Gamcare (5 respondents).

Only 1 respondent said they would refer to Krysallis which is the commissioned provider for Sheffield and only 1 provider said they would refer to the National Problem Gambling Clinic.

Some of the local organisations named by community organisations as their chosen referral destinations for problem gamblers did not have specialist skills, knowledge or training in problem gambling and would have to provide onward referral themselves. This could put unnecessary pressure on services to process inappropriate referrals and place barriers in the way of those seeking help.

### **Recommendations for follow up/next steps:**

*Training* – Is there value in providing specialist *technical* training e.g. Lie/Bet, London Problem Gambling Clinic, or Newport Citizens’ Advice Gambling Support Service?

*Identify* - explore reasons for not using validated screening tools. “Lie/Bet” 2 question tool is generally recommended due to its brevity.

*Treat* – confirm if IAPT are willing and able to accept referrals locally. Raise awareness of the local offer from Gamcare (Krysallis) and referral pathway

*Refer*– Is there a need to agree a local referral pathway including for debt, mutual aid, and counselling?

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