

OPG Strategic Plan 2016-2020

MISSION

The mission of the Office of Problem Gambling is to provide quality, research-driven leadership in prevention and treatment of gambling disorder.

VISION

The vision of the Office of Problem Gambling is to assist individuals suffering the personal, social, and financial difficulties related to gambling disorder in order to promote a healthy California.

OPG Strategic Plan 2016-2020

Introduction

The Department of Alcohol and Drug Programs (ADP) established the Office of Problem and Pathological Gambling, known as the Office of Problem Gambling (OPG), in 2003 as a result of Assembly Bill (AB) 673, Chapter 210, Statutes of 2003 (Section 4369 of the Welfare and Institutions Code). Effective with the passage of the 2013-2014 Budget Act and associated legislation, ADP was eliminated as of July 1, 2013. The 2013-14 Budget transferred OPG to the California Department of Public Health (CDPH). OPG is now operating within CDPH's Center for Chronic Disease Prevention and Health Promotion.

OPG is responsible for developing prevention and treatment programs to address gambling disorders. In designing and developing prevention and treatment programs OPG has accomplished the following:

- Developed a statewide plan to address gambling disorders
- Developed a prevention program
- Developed a treatment services program
- Developed priorities for funding criteria for distributing program funds
- Monitored the expenditures of State funds by organizations receiving funding
- Evaluated the effectiveness of services provided through programs

In 2005, OPG assembled members of state regulating agencies, gambling industry personnel, community organizations, researchers and advocates for problem gambling prevention and treatment to create a California Problem Gambling Advisory Group. After transitioning to CDPH new members were added such as, the California Conference of Local Health Officers, the California Rural Indian Health Board, and the California Tobacco Control Program. The Advisory Group continues to meet on a quarterly basis to develop priorities and strategies for problem gambling prevention and treatment programs.

Per Welfare and Institutions Code section 4369.3, OPG established and implemented a prevention program. OPG has developed a culture of solid partnerships with other state agencies, contractors, community organizations, mental health providers, gambling industry personnel, and the California Problem Gambling Advisory Group. These partnerships provide OPG with the unique opportunity to administer prevention programs throughout the state. OPG identified specific strategies to implement as part of the prevention program. These strategies include: toll-free telephone helplines, a statewide public awareness campaign, empirically-driven research, and training for health care professionals, educators, law enforcement personnel and members of nonprofit organizations in identifying problem gambling behavior and available resources.

To ensure that OPG is providing effective prevention and treatment programs, OPG has implemented research strategies to measure problem gambling prevalence, epidemiology, etiology and causation. Research mechanisms include: the 2006 California Problem Gambling Prevalence Survey, the 2005 Situational Assessment of Problem Gambling Services in California, and the 2006 California Friday Night Live Partnership (CFNLP) Youth Perceptions Survey. Beginning in 2015, gambling related questions were added to the Behavioral Risk Factor Survey administered by the CDPH Chronic Disease Surveillance and Research Branch.

In an effort to identify best practices and provide beneficial prevention and treatment mechanisms to Californians, OPG has integrated evaluation components into the prevention and treatment programs. Evaluation components include: Call to Change Program, an enhanced case management relapse prevention study of individuals that contact a problem gambling helpline for services; Brief Interventions, a complete feasibility and acceptability testing of the *Freedom from Problem Gambling* self-help workbook through consultation with problem gamblers, researchers, advocates and those in recovery; Cognitive Behavioral Therapy Manual, a test of the effectiveness of the manualized cognitive behavioral treatment for pathological gamblers. In addition, in 2015 OPG engaged a third-party evaluator to review and evaluate California Gambling Education and Treatment Services (CalGETS) http://problemgambling.securespsites.com/ccpgwebsite/PDF/OPG_CalGETS_EvalReport.pdf. Based on evaluation findings, CalGETS achieved its goals and successfully provides treatment services to people with gambling disorders and affected individuals throughout the four regions of California. Gamblers reported high satisfaction with services and positive perceptions of improvement across all modalities for which data were available. Survey and interview data from CalGETS Program Directors/Clinical Guidance Professionals, providers, and staff show the majority attributed the success of the program to the effective provision of a continuum of treatment services and the expansive reach of the program to serve populations in need.

CalGETS is the first state-funded treatment services program for individuals with a gambling disorder and those affected by problem gambling behavior in California's history. CalGETS is a multi-modal, stepped-cared treatment program. Treatment components include: training of licensed health care providers, Problem Gambling Telephone Intervention Program, Outpatient, Intensive Outpatient, and Residential Treatment Program. Providers are trained to utilize the Cognitive Behavioral Therapy manual, which is focused on changing behaviors that lead to gambling addiction. Problem Gambling Telephone Intervention and outpatient therapy consist of blocks of eight counseling sessions per individual. Intensive outpatient services offer clients more intensive therapy several times a week, integrating services with residential clients for group sessions. Inpatient treatment is provided at a residential care facility and includes daily care, recovery activities and 24-hour support. The residential treatment program is conducted within an existing, licensed substance abuse treatment program with experience in treating gambling disorder.

2011-2015 Strategic Plan Accomplishments

The 2011-2015 Strategic Plan was developed in consultation with the OPG Advisory Group. During the five year period OPG periodically reviews the plan to determine the status of each goal. OPG also provides periodic status updates to the OPG Advisory Group. Through discussion at the OPG Advisory Group, OPG directs resources to support the completion of each goal by the end of the five year period. The following goals relate to the 2011-2015 Strategic Plan; accomplishments have been added to track progress related to each goal and objectives.

Prevention Program

Goal 1: Promote the inclusion of problem and pathological gambling screening tools in other health care systems

Accomplishments

- Created business card size screening tool for outreach. The screening tool uses the three question brief biosocial gambling screen created by the Division on Addictions at Cambridge Health Alliance.
- Mailed screening tool and letter to 982 Pediatricians & Primary Care Physicians
- Mailed screening tool and letter to Driving Under the Influence Courts, Drug Courts, Employment Development Department and disability agencies, and Veteran's Administration
- Provided lie/bet questionnaire, a two question problem gambling screen, to Federally Qualified Health Centers and Kaiser substance use disorder drug treatment providers

Goal 2: Enhance and execute a variety of prevention services through training and technical assistance contractors

Accomplishments

- Split training and technical assistance contract to focus on two areas (1. health care providers, non-profit organizations, educators and 2. gambling industry, law enforcement) to better serve needs:
 - six presentations specific to health care providers
 - five presentations specific for non-profit organizations
 - four presentations specific for educators
 - nine presentations specific to gambling industry
 - nine presentations specific to law enforcement
 - several presentations general in nature for all venues
- Expanded technical assistance included college campus police, justice and judiciary, the military, paroles and probation agents, police departments, sheriff's offices
- Provided training and conducted outreach to special populations including, the Latino Behavioral Health Institute Annual Conference, Latino local business chambers, day laborers and promotoras, community fairs, farmer's markets, senior centers, veterans organizations, as well as to members of the African-American, Hispanic, Korean, Lesbian Gay Bisexual Transgender (LGBT) and Vietnamese communities

- Worked with the LGBT Constituents Committee to develop demographic questions for treatment intake
- Trained gambling industry employees from the California Lottery, cardrooms, horse racing and tribal casinos and provided additional outreach at employee health fairs from the same venues

Goal 3: Focus prevention services on vulnerable and high risk populations

Accomplishments

- Worked with community groups such as Asian Americans for Community Involvement, Asian Congregations Together, Asian Resources Inc., Council of Asian Pacific Islanders Together for Advocacy and Leadership, Latino Behavioral Health Institute, NICOS Chinese Health Coalition, National Asian Pacific American Families against Substance Abuse and several other Asian community service groups
- Provided training and/or consultation to the California Endowment, city or county mental health and substance use disorder agencies in various counties, and county or city Housing and Urban Development-Veterans Affairs Supportive Housing agencies
- Added problem gambling questions to Substance Use Disorder facility site visit questionnaires by working with ADP Substance Use Disorder program staff
- Added OPG Advisory Group representatives from the California Coalition of Youth, California Conference of Local Health Officers, California Rural Indian Health Board, California Tribal Business Alliance, CDPH Tobacco Control Program, Department of Aging, Department of Health Care Services Mental Health and Substance Use Disorder Programs, Tribal Alliance of Sovereign Indian Nations, and the Winners Foundation (horse racing)
- Piloted an interpreted treatment services program with Language World Services to allow clients to use interpreters during treatment sessions

Goal 4: Expand public awareness through media advertising campaign

Accomplishments

- Problem Gambling Awareness Month Campaign - added public service announcements (PSA) on two horse racing networks; Lottery provided “in kind” print advertisements in major English and ethnic publications and also included promoted Facebook posts; California Gaming Association included messaging in newsletter to cardroom members
- Increased the number of outdoor boards based on monthly assessments conducted of the call stats to view spikes in medium performance and market activity
- Used “requests for information” in several markets to see if viewers saw television public service announcements. OPG sent more than 5,400 information packets to viewers who saw the PSA and subsequently expanded television advertising due to positive response
- Enhanced digital efforts by adding Geo Fencing with our digital campaigns; if a person is inside a casino or card room for more than 4 hours they are sent a problem gambling message; in addition, a “tap to Call” digital banner was added

- Added a new media vendor, Skyview Networks, which incorporates radio stations that reach into rural communities where many Tribal Casinos are located
- Increased print campaign to check cashing stores
- Added a partnership with Comcast Sports Net in Northern California to cost effectively reach sports betters during March Madness, World Series Playoffs, and Football Playoffs
- Developed a PSA news adjacency campaign to educate the populations in Sacramento, San Francisco, and Los Angeles about Problem Gambling
- Combined efforts for paid media advertising budgets for the Asian communities providing a cost savings strategy
- Added elevator ad for Spanish speaking television and English and Spanish convenience store window and floor print media
- Included digital messaging in physician and dental offices that run on continuous loop
- Conducted outreach and supplied print media to Camp Pendleton and chambers of commerce

Goal 5: Conduct outreach at California's gaming association meetings and conferences

Accomplishments

- Attended California Gaming Association, California Nations Indian Gaming Association, National Indian Gaming Association, and Western Indian Gaming Coalition conferences
- Invited by Tribes to present CalGETS information and discuss self-exclusion at the Tribal State Association meeting
- Trained Lottery staff and sales staff at Lottery Sales Conference

Goal 6: Enhance materials serving multi-cultural and multi-generational populations

Accomplishments

- Used language survey conducted by ADP Culturally and Linguistically Appropriate Services contractor to provide materials for prevention and treatment programs in key languages
- Updated responsible gambling brochures to include NICOS Chinese Helpline number specifically, NICOS updated outreach brochure for Chinese community
- Translated Cognitive Behavioral Treatment Manual into Spanish and Chinese
- Updated senior brochures; developed CalGETS brochure

Goal 7: Expand Youth Prevention programs

Accomplishments

- OPG researched Tumblr, to determine if the application might serve as a method to reach youth. OPG found that an individual must be over 18 to use the site, therefore it was not youth oriented
- *Betting On Our Future* youth prevention tool kits distributed at: Friday Night Live coordinators conference, OPG Summit, OPG Advisory Group Meetings, National Council on Problem Gambling Annual Conference, and a variety of smaller

venues (NICOS outreach at the San Francisco library, Passport To Life event in San Diego)

- Betting on Our Future tool kits sent to: current and past Betting on Our Future sites to promote their work in their local communities, University of California Los Angeles, NICOS Chinese Health Coalition, National Asian Pacific American Families against Substance Abuse, California Council on Problem Gambling, Lottery, Department of Justice, Freedom Foundation, PricewaterhouseCoopers
- Betting on Our Future participants have expanded to include Big Brothers/Sisters and several non-profit agencies in various counties
- Provided training to campus police departments in multiple counties and future addiction treatment professionals at multiple colleges, lectured at San Diego State University gaming management class and attended campus events in multiple counties for outreach

Goal 8: Continue to enhance and update OPG multi-cultural website

Accomplishments

- Piloted the use of Facebook, Twitter, LinkedIn and MySpace; continuing to utilize Facebook, YouTube and Twitter
- Added research section to OPG website; added Hungarian and Polish *Freedom from Problem Gambling* workbooks and Chinese and Spanish Cognitive Behavioral Therapy Manuals
- Website has been viewed in 116 countries
- Developed the online Provider Education Resource Center (PERC) to house treatment tools for providers, allow providers to enroll in supervision and training and house the online training modules
- Developed the online Data Management System to house all treatment forms, outcomes and service as the provider invoicing system
- Introduced mobile website app

Goal 9: Measure the impact of individual services

Accomplishments

- OPG compared monthly helpline statistics and implemented minor changes to ensure we captured the most pertinent information. OPG expanded demographic information collected to include the caller's county in monthly statistics to determine if outreach in specific counties was increasing calls. In addition OPG added or deleted referral resources to mirror changes in media advertising, for instance we noticed a minimal amount of callers were indicating seeing the helpline number in convenience stores, so we discontinued advertising in convenience stores and deleted that referral resource choice from the helpline menu.
- Added helpline features: warm transfers, case management, motivational text messaging; text support. Annually, approximately three percent of callers complete a warm transfer to a therapist from the helpline; approximately seven percent of callers request case management services to assist in connecting the caller with a therapist; and approximately 42 percent of gamblers with a phone enroll in text support.

- Evaluated training and technical assistance by including pre & post surveys
- Evaluated CalGETS using provider surveys, training evaluations and follow-up calls with past clients
- Contracted with a third-party to evaluate the implementation and effectiveness of CalGETS

Treatment Programs

Goal 1: Provide training to counselors and therapists in treating problem and pathological gamblers and affected individuals

Accomplishments

- Provided 30-hour Phase I Training to 577 licensed health care providers during 16 training events
- Provided six-hour Phase II Training to 274 CalGETS providers during 13 training events
- Added online curriculum to the Phase I Training to enhance the training component by providing information prior to the in-person training
- Administered 719 hours of clinical guidance to CalGETS providers
- Facilitated annual prevention and training summits beginning March 2010 that featured nationally-recognized experts, convened key stakeholders and participants from multiple organizations across the state, covered a wide-range of topics related to the prevention and treatment of gambling disorders, and provided continuing education units for CalGETS providers
- Maintained a network of over 200 licensed, authorized CalGETS providers; on average, providers had been licensed for 12-13 years; over three-quarters (78%) reported providing services in English, 10% in Spanish, 9% in Asian languages, and 4% in other languages; services were offered in a total of 23 different languages and dialects

Goal 2: Execute the delivery of the stepped-care approach for a continuum of treatment services for problem and pathological gamblers and affected individuals

Accomplishments

- Developed CalGETS infrastructure and all treatment program components became fully functional by June 30, 2012, including Problem Gambling Telephone Intervention in English, Spanish and Asian languages, outpatient treatment, Intensive Outpatient, Residential Treatment Program, and Clinical Innovations
- Designed funding allocation methodology based on need for services and dedicated at least 90% of overall treatment funding to the provision of services
- Provided treatment services to a total of 5,842 gamblers, including 4,416 outpatient treatment clients, 1,077 Problem Gambling Telephone Intervention clients, 238 Residential Treatment Program clients, and 111 Intensive Outpatient clients. Some clients received services from more than one treatment modality; therefore, the total number of gamblers served includes some duplicated clients.
- Provided treatment services to a total of 1,766 Affected Individuals, including 1,665 outpatient treatment clients and 112 Problem Gambling Telephone Intervention clients. The majority of Affected Individual clients were significant

others of gamblers, while others were children, parents or had other relationships with gamblers.

- Enhanced the OPG website to allow helpline providers to access current state-funded treatment provider contact information, thus allowing for proper referrals to services

Goal 3: Establish and evaluate CalGETS client recruitment and retention tools

Accomplishments

- Updated and enhanced standard clinical and operational forms utilizing provider feedback; to ensure standardization all agencies including Problem Gambling Telephone Intervention, Intensive Outpatient and Residential Treatment Program were added to the Data Management System for quality assurance
- Updated the CalGETS Policies and Procedures Manual to specify all program requirements, including client treatment structure and documentation to assess and improve client recruitment, engagement, treatment, and retention
- Provided workshops at the annual summit to assist providers in enhancing recruitment and retention skills
- Developed and disseminated criteria to providers related to the extension of treatment services and transitioning clients to alternate payment methods
- Established and added a group sessions protocol to the Policies and Procedures Manual; established and implemented a group sessions reimbursement schedule

Goal 4: Convert CalGETS “pilot” into “permanent” program

Accomplishments

- OPG succeeded in achieving permanent funding for CalGETS through the 2015 Budget Act. In addition, OPG amended the Welfare and Institutions Code during the budget process to codify the treatment services provided in the pilot program, which included, the definition of a treatment program, specificity that affected individuals needed to have psychiatric and physical impacts related to gambling, fee-for-service reimbursement of treatment services, training of health care providers, deletion of repetitive or outdated language and a technical change moving OPG from ADP to CDPH.

Goal 5: Identify treatment services best practices

Accomplishments

- Enhanced training modules and created online training utilizing CalGETS provider training evaluation feedback
- Conducted studies to determine the effectiveness of treatment using manuals to assist providers in treating gamblers and Affected Individuals; research revealed that both the treatment with a manual and typical treatment approaches used by providers were effective to improve gamblers’ outcomes, including increasing gamblers’ overall life satisfaction and decreasing the intensity of gambling urges
- Conducted a study to determine how certified counselors could be integrated into CalGETS; client enrollment into the study was low, so it was determined to utilize certified counselors within agencies who provided services (such as Intensive

Outpatient or Residential Treatment Centers) and retain the requirement for outpatient providers to be licensed health care providers

- Established criteria and a checklist for provider compliance monitoring reviews to ensure compliance with CalGETS policies and procedures; conducted a total of 222 compliance monitoring reviews; each provider received a compliance monitoring review within the first two-years of billing for services; and OPG developed risk factor criteria to indicate the need for subsequent compliance monitoring review visits
- Reviewed and analyzed client data from CalGETS forms in order to measure and report outcomes in annual treatment services reports; used data and reports to evaluate the effectiveness of the treatment modalities and to inform updates to CalGETS practices, materials and training for ongoing quality assurance and program improvement
- Compared CalGETS outcomes with those seen in other states, and convened annual stakeholder meetings to continually assess and identify best practices for treatment of problem gambling and to modify and provide ongoing guidance to ensure best practices are used in CalGETS standards of treatment
- In 2015, OPG and the CalGETS program were recognized with a Bright Ideas Award for Innovation in American Government by the Harvard Kennedy School

2016-2020 Goals

Goals for OPG's 2016-2020 Strategic plan were developed in consultation with the OPG Advisory Group. Quarterly meetings with the OPG Advisory Group were held during 2015 to determine status of previous strategic plan and outline specific goals for 2016-2020.

Prevention Program

Goal 1: Deliver prevention and education services to high-risk and affected populations

Objectives

- Collaborate with community-based organizations focused on behavioral health to continually determine high-risk populations; provide education to populations identified
- Utilize information from the Diagnostic Statistics Manual (DSM-5) which aligns gambling disorder under the addictions category; message education and outreach to highlight similarities and differences between gambling disorder and other addictions
- Conduct LGBT research regarding problem gambling and conduct outreach and education according to research results
- Create and distribute culturally competent community level materials for American Indians and Alaska Natives
- Establish a speakers bureau to provide personal stories during training and outreach events
- Utilize success stories; gather testimonials from CalGETS clients
- Collaborate with Tribal Health Programs; California Primary Care Association; Federally Qualified Health Centers; family resource centers

- Infuse *Let's Get Healthy California* goals for healthy beginnings, living well and creating healthy communities into prevention and education efforts

Goal 2: Compile accurate, consistent, updated, efficient data related to gambling disorder and prevalence

Objectives

- Analyze data from the Behavioral Risk Factor Surveillance System (BRFSS) to help inform prevalence research efforts
- Investigate a partnership with the California Rural Indian Health Board to participate in a survey specific to tribal communities
- Conduct smaller-scale prevalence studies within vulnerable populations
- Utilize CalGETS program data to provide treatment outcomes information

Goal 3: Develop matrix for general and population specific prevention and treatment related communication

Objectives

- Create messaging appropriate for different populations; including youth, multi-cultural and vulnerable populations
- Provide positive messaging related to life after addiction/life without addiction
- Create focused media, outreach and educational tools; include imagery showing the benefits of recovery targeted to individuals with gambling disorder who may seek assistance; use negative images targeted to those not in need of treatment for a more preventative message; use a spectrum of imagery both negative and positive

Goal 4: Track expansions of gambling and emerging trends (fantasy sports, internet)

Objectives

- Develop training for prevention and treatment for each emerging trend
- Assess OPG needs to address prevention and treatment for each new expansion of gambling

Treatment Program

Goal 1: Enhance CalGETS sustainability and service provision

Objectives

- Research and develop state of the art enhancements
- Develop app to track cravings, emotional state and triggers
- Educate medical school students about CalGETS and how to refer patients
- Explore the efficacy of alternative treatments (acupuncture, etc.) to determine if there might be viable additions to CalGETS
- Explore providing treatment to youth under the age of 18 years old

Goal 2: Study the effectiveness of the self-exclusion program

Objectives

- Develop a survey for self-excluded patrons

- Work with gambling establishments to provide survey to patrons who self-exclude
- Conduct follow-up study to determine if self-exclusion is working; are patrons continuing to gamble; are patrons changing gambling venues
- Continue to expand self-exclusion program to other gambling venues

Goal 3: Develop and provide Screening Brief Intervention and Referrals to Treatment Training

Objectives

- Develop Screening Brief Intervention and Referrals to Treatment training curriculum
- Research the possibility of providing reimbursement to providers who utilize the Screening Brief Intervention and Referrals to Treatment model and implement reimbursement if feasible
- Determine agencies who utilize Screening Brief Intervention and Referrals to Treatment and conduct outreach to determine if there is interest in adding it
- Target training and outreach efforts to social work students, nursing students, medical residencies; collaborate with Substance Abuse and Mental Health Services Administration (SAMHSA); behavioral health counselors

Goal 4: Explore parity for gambling disorder and other addictions with insurance companies

Objectives

- As insurance coverage changes, investigate whether treatment for gambling disorder will be allowable
- Work with insurance companies to include treatment for gambling disorder

Funding

In fiscal year 2015-16 OPG was allocated \$8.2M from the Indian Gaming Special Distribution Fund, of which \$3.2 million was allocated for prevention and \$5 million for treatment services. The California Lottery entered into an agreement with OPG to provide \$258,080 over fiscal years 2015-16 and 2016-17. Annual fees are collected from licensed cardrooms at a rate of \$100 per authorized table and deposited into the Gambling Addiction Program Fund to develop and implement prevention and treatment programs for gambling disorder. OPG is allocated \$150,000 annually from the Gambling Addiction Program Fund.

In the future, OPG will continue to develop strategies to obtain and secure funding from the gambling industry as the landscape of legalized gambling changes in California and will also assess the stability of current funding sources.