

BARNSELY METROPOLITAN BOROUGH COUNCIL

REPORT OF: EXECUTIVE DIRECTOR CORE SERVICES

TITLE: SCRUTINY TASK AND FINISH GROUP (TFG) REPORT ON GAMBLING AND GAMBLING RELATED HARM IN BARNSELY

REPORT TO:	CABINET
Date of Meeting	6 TH April 2022
Cabinet Member Portfolio	N/A
Key Decision	No
Public or Private	Public

Purpose of report

To report to Cabinet the findings of the Overview & Scrutiny Committee (OSC) from the investigation undertaken on its behalf by the Gambling Task & Finish Group (TFG).

Council Plan priority

- Healthy Barnsley
- Enabling Barnsley

Recommendations

1. Investigate the placement of Category D Machines located in the boroughs gambling premises so that they are not placed in pairs
2. Develop partnership working with health professionals and provide adequate resources to raise awareness of gambling related harm
3. Develop a communications plan to encourage greater knowledge of gambling-related harms across the borough
4. Review the Statement of Gambling Policy so that Public Health is consulted when new gambling premises submit licensing applications
5. Continue to ensure council owned advertising space does not allow gambling advertising and encourage wider partners to not allow gambling advertising
6. An All-Member Information Briefing on Gambling and Gambling Related Harm is held to raise awareness
7. Work with wider partners to create resources and training on gambling related harm and young people

- 8. Create a training module for employees on gambling related harm, available on POD**
- 9. Implement a “trigger question” and promote the use of this with wider partners such as in healthcare settings**
- 10. Ensure gambling support material placed in gambling premises is printed in other languages**
- 11. Evaluate how the council can better capture local data on gambling related harm in Barnsley**
- 12. Support the recent announcement by NHS England that as from April 1st they will not take any more money from the gambling industry to fund NHS gambling addiction programs**

1. INTRODUCTION

- 1.1 In September 2021, Public Health England published the Gambling Related Harms review and estimated that 0.5% of the population reached the threshold to be considered problem gamblers, and this proportion has remained relatively consistent since 2012. PHE also estimated that 3.8% of the population are classified as at-risk gamblers. The review also found harmful gambling associated with people who are unemployed and among people living in more deprived areas which suggests harmful gambling is related to health inequalities.
- 1.2 Following on from last year’s TFG focusing on Child Poverty, it was recommended that a Gambling TFG be introduced given the impact of the pandemic, as several agencies mentioned concerns regarding gambling in communities and the harm this causes to young people.
- 1.3 The Gambling Task and Finish Group (TFG) was set up to investigate gambling related harm in Barnsley. This included considering what the key challenges are around gambling and gambling related harm; what support services are available in the borough and beyond; and what are the future plans in terms of this agenda.
- 1.4 The TFG met with several representatives from local agencies and organisations, the NHS, national charities, and officers from BMBC.
- 1.5 Due to most of the current work on gambling and gambling related harm taking place regionally and nationally, the TFG met with various national charities and regional providers of services. Local data on gambling is not widely available therefore speaking with both national and regional organisations helped build a picture of what the situation in Barnsley could look like.
- 1.6 As a result of their investigations, the group have highlighted several recommendations in support of further improvement.
- 1.7 The members of the TFG who undertook this investigation included the following: Councillors Jo Newing (TFG Lead Member), John Clarke, Jeff Ennis, John Wilson, Chris Wray, Robert Frost and Kath Mitchell.

2 SCOPE OF THE INVESTIGATION & SUBSEQUENT FINDINGS

What the Task & Finish Group Looked At

- 2.1 Initially, the TFG met to consider the scope of the investigation. This involved discussing their key concerns around gambling and gambling related harm in their local communities including the availability of support services specifically for those at risk of gambling related harm and the extent to which local residents are aware of the services available.
- 2.2 From the outset, the group was keen to find out what services were available locally for those experiencing gambling related harm. Members also had a keen focus on young people and gambling related harm, especially due to recent developments of easy access to online gambling through websites and apps and increasing concerns about the link between gambling and gaming.
- 2.3 The TFG undertook a number of virtual 'check and challenge' sessions with officers, national charities and the NHS regarding the work being carried out and future plans. The TFG also undertook training offered by national charities whose work focuses on minimising gambling related harm. This involved asking questions of them regarding their work, their involvement and partnership working with other agencies including the impact of this on Barnsley residents. This included:
 - Meeting with BMBC's Public Health Registrar and Senior Public Health Officer, who are currently undertaking work on assessing the impact of gambling related harm in Barnsley;
 - Undertaking a session with national charity GamCare who provided training on Women and gambling related harm;
 - Meeting with the Operational Manager of the NHS Northern Gambling Service, who provide specialist addiction therapy and recovery to people affected by gambling addiction covering the whole of the North of England;
 - Undertaking training with the national charity YGAM whose work focuses on informing, educating and safeguarding young people against gaming and gambling harms;
 - Meeting with BMBC'S Senior Licensing Officer to discuss the Council's Statement of Gambling Policy, which is due for renewal in 2022;
 - Meeting again with BMBC'S Public Health Registrar and Senior Public Health Officer to discuss their findings and recommendations;
 - Meeting with the Managing Director of the local counselling service Krysallis, who are commissioned by GamCare to provide treatment services and support for local people in Barnsley;
 - Finally, meeting with Leeds City Council to discuss gambling harm reduction work that has taken place in Leeds

What the Task and Finish Group Found

- 2.4 During the first session on the Council's gambling approach with the Public Health Registrar and Senior Public Health Officer from BMBC Public Health, the group were given an overview of the detrimental impact gambling related harm can have upon both the gambler and their wider network, including children. Also, evidence was presented that when focusing on risk for gambling certain behaviours become risk factors. These risk factors include impulsivity, substance use (alcohol, tobacco, cannabis, and other illegal drugs), being male, suffering from depression, family history, adverse life events and trauma. A focus was placed on the Public Health England new Gambling Related Harms evidence review that was published in September 2021 that suggested 54% of the adult population gambled in 2018, 0.5% of adults have a problem with gambling, 3.8% are "at risk" and 7% are negatively affected by other

people's gambling. There was discussion surrounding gambling sponsorship in sports, particularly football, and how some gambling support and research is funded directly by the industry. The group were informed of the gambling survey being conducted by Public Health, asking Barnsley residents about their experiences of gambling and gambling related harm, which should be able to give the Public Health team an evidence base on gambling related harm in Barnsley. The group were informed that the results of the gambling survey along with investigations by Public Health will be used to create a gambling plan for Barnsley, and the group and Public Health agreed another meeting should take place later to discuss the findings of the survey, which was scheduled for late January.

- 2.5 The group met with the national charity GamCare, who provided training on gambling related harm, and women and gambling related harm in particular. The group were given training on the definition of "problematic gambling" which is gambling that compromises, disrupts or damages family, employment, personal or recreational pursuits. The support provided by those suffering with gambling was also explained as being a tiered system in which Tier 1 is brief advice, Tier 2 is brief intervention, Tier 3 is structured treatment and Tier 4 is residential treatment. Members were interested to hear how women's experience of gambling can be different, and the main reasons cited by women that had gambling problems were to escape, distract or forget, and using gambling as stress release. It was explained that women may start to gamble later in life, and it is harder to find services that speak to women's experiences, therefore Members were pleased to hear about GamCare's Women's Programme. The programme aims to engage with diverse communities to amplify the voices of women with lived experience, strengthen referral pathways into support services and develop tailored support and treatment services for women identified as underserved by current services. GamCare also went into detail about gambling related harm and young people, with evidence suggesting that 60,000 young people are 'at risk' gamblers. GamCare developed a Young Peoples Support Service as there was no support specifically for young people as late as last year. Members were pleased to hear that the NHS have also launched a service to support young people experiencing gambling related problems.
- 2.6 At the next session, the group met with the Operational Manager of the NHS Northern Gambling Service. The NHS Northern Gambling Service (also known as the Northern Gambling Clinic) provides specialist addiction therapy and recovery to people affected by gambling addiction and is based in Leeds. The service has a clinical team made up of psychologists, therapists, psychiatrists, and mental health nurses, some of whom were redeployed during COVID-19 but should be returning to posts now. As part of the NHS Long Term Plan, NHS specialist clinics focusing on gambling will be opening across the country. It was explained that the service deals with the most complex cases, or people who prefer NHS treatment rather than a counselling service. It was explained that the core programme of treatment consists of eight to ten sessions of cognitive-behavioral therapy (CBT) for gambling addiction, usually in a group setting. The service also takes a holistic approach to recovery, as other issues such as mental health problems exacerbate issues with gambling, so the service is keen to address this along with the gambling addiction. Members were pleased to hear the service offers peer support and support for families affected by others gambling addictions. Discussion took place regarding evidential research which shows that people have a gambling problem for 8 years on average before they seek help, and that it is thought that only 2-3% of problem gamblers do come forward for help, therefore it was suggested that earlier intervention is needed.
- 2.7 The group was then invited to undertake YGAM's online training which focuses on gambling related harm and young people. YGAM is a national charity which states that their social purpose is to inform, educate and safeguard young people against gaming and gambling harms. YGAM provide online training that anyone can sign up to. The training focused on how gambling harm can affect young people and the signs to look out for in young people

including tiredness, low mood, and irritability. The training also focused on the link between gambling related harm in young people and gaming. It was explained that although gaming can be a fun activity and is a constantly evolving industry it is not without its risks. The main way people gamble in gaming is through “loot boxes” which are sealed mystery “boxes” paid for with real money and contain a random assortment of in-game items. Research by GambleAware found that of the 93% of children who play video games, up to 40% opened loot boxes and about 5% of gamers generate half the entire revenue from the boxes. Also, there was discussion around certain games which use a psychological nudge to encourage people to buy loot boxes, such as the fear of missing out on limited edition items.

2.8 The group then met with BMBC’s Senior Licensing Officer. It was explained that most of the legislative framework that licensing is bound by is national policy set by the government and that machines and the National Lottery are licensed by the Gambling Commission. Information was presented on the Council’s Statement of Gambling Policy, which is reviewed every 3 years and will begin a consultation process at the end of this year. Members were particularly pleased to see that Licensing and Public Health will be working closely together on the policy. The group were informed of the responsibilities of gambling premises staff to provide information and support to customers around gambling related harm. There was also discussion around the national legislation, in particular the maximum stake on Category B2 gaming machines (Fixed Odds Betting Terminals) being reduced from £100 to £2 which Members see this as a positive step towards minimising gambling related harm. Members questioned whether posters in gambling premises that show information regarding support for problem gambling were available in other languages as new migrants have been flagged as an at-risk group. The Senior Licensing Officer agreed to investigate and feed this information back to the group. Members were pleased to see the work that Licensing had done around this issue and look forward to seeing the refreshed Statement of Gambling policy later in the year.

2.9 The group met again with BMBC’s Public Health Registrar and Senior Public Health Officer to discuss their findings from their recent surveys. They found that gambling in the borough is linked to health inequalities and is more prevalent in the most deprived boroughs. From their Health Needs Assessment, Public Health spoke to 10 residents about their personal experiences with gambling and gained valuable insight into how gambling related harm can affect individuals. The group was also informed that three gambling related questions have been included on the young people’s borough wide survey. Recommendations from the research undertaken by Public Health were shared with the group, which focus on awareness, education and training. Public Health’s recommendation surrounding awareness will focus on the creation of a communications campaign and two residents from the survey have agreed to share their story anonymously. Focusing on education and training, Public Health have recommended training for council workers especially on how to ask the right questions. Public Health also intend to work with wider partners to create training for example a ‘young people’ platform for schools and colleges. It was also suggested that the good practice the council has developed regarding alcohol and stop smoking services can be followed for gambling. Officers stressed that this needs to be a borough wide approach rather than just the local authority and Public Health would seek to work closely with external partners such as the Healthy Lives Team at Barnsley Hospital, and with corporate partners such as Barnsley Football Club. There was discussion with Members regarding gambling advertising in retail settings. There has been a national pushback on such advertising, and although it is mostly controlled by the Gambling Commission it is something that could be investigated locally and challenged. There was also discussion around ensuring that the Council’s advertising space policy doesn’t allow gambling advertising and Members felt that this should be seen as a priority. Members were pleased to see the outcomes from the gambling survey and looked forward to supporting Public Health’s recommendations.

- 2.10 The next session was with the Practice Manager from Krysallis. Krysallis is a counselling service that is commissioned by GamCare to provide free support services to anyone over the age of 16 adversely affected by gambling in the Yorkshire and Humber area, including Barnsley. The group were given an overview of how many residents in Barnsley are using Krysallis services, which currently stands at 16. Due to COVID-19, Krysallis no longer have premises in Barnsley but are currently looking at new venues, although most clients do prefer telephone or video call therapy rather than face-to-face. The group also heard about Krysallis's evidence-based model of care, provided by Krysallis practitioners who are all trained therapists, which includes Tier 2 and Tier 3 interventions and an individualist approach to therapies. Krysallis have a quick turnaround with referrals, aiming to contact within one working day of the referral. Members heard that at least six people that don't gamble are affected by problem gamblers, and so were pleased that Krysallis also works with affected others as well as problem gamblers. Increasingly, Krysallis are seeing their work rise with problem gamers. Along with GamCare, Krysallis recommend the single screening question ("has your gambling or the gambling of someone close to you, had a negative effect on your life?") be rolled out in Tier 1 Healthcare settings for example in GP surveys. Members also heard how Krysallis and GamCare are working hard to make sure there is no geographical lottery on gambling treatment.
- 2.11 Finally, the group met with the Health Improvement Specialist and Financial Inclusion Manager from Leeds City Council to discuss the gambling harm reduction work they have been focusing on. Leeds's work was triggered by the granting of a license for a large casino complex in the centre of the city. The Council commissioned research by Leeds Beckett University which estimated that there were 10,000 problem gamblers in Leeds and 30,000 at risk. The university research also found that provision of support in the city was underdeveloped and fragmented and awareness of the issue amongst organisations was low. From the findings the authority set up the Leeds Gambling Harms Group and had four key areas of activity: increasing awareness (marketing), increasing awareness (staff development), support in the city, and supporting the Licensing and Public Health team. The group were informed of the successful 'Beat the Odds' multi-channel communications campaign raising awareness of gambling related harm that had been rolled out in Leeds which is timed around major sporting events for example the football and cricket world cups. The campaign consisted of advertising around the city centre for example at bus stops near bingo halls, advertising on screens in the city's pubs and having local students hand out 'Beat the Odds' branded beer mats. To increase awareness Public Health and Financial Inclusion officers visited Council and external organisations team meetings and away days to impart key findings of the research and raise awareness of support for gambling harm. The group also heard about the work that has been done with young people including communications regarding gambling as part of gaming and a webinar with ParentZone as part of Leeds Digital Festival. Members were interested to hear that the Council is developing HR guidance regarding harmful gambling affecting employees and a training offer with Unison and other unions is being developed.

3. IMPLICATIONS

3.1 Financial & Risk

There are no specific financial implications or risks associated with the report, although in responding to the recommendations in the report, the financial and risk implications of these would need to be fully assessed by the appropriate services responding.

3.2 Legal

There are no specific legal implications, although in responding to the recommendations in

the report, the legal implications of these would need to be fully assessed by the appropriate services responding.

3.3 Equality

The TFG is keen to ensure that all Council services and activities impact equally on all its communities. Throughout the TFG's involvement in this work it has become apparent that the work around gambling and gambling related harm can reduce health inequalities, especially as the TFG found that gambling addiction disproportionately affects those from low-income backgrounds.

3.4 Sustainability

As this report does not require a decision, the sustainability decision-making wheel has not been included.

3.5 Employee

There are no specific employee implications, although in responding to the recommendations in the report, the employee implications of these would need to be fully assessed by the appropriate services responding.

3.6 Communications

It is evident from the investigation that, to drive the agenda forward, stronger communication needs to be developed to raise awareness around this issue. Information should be shared in a variety of ways in clear and accessible formats, so partners are receiving accurate and up to date information, and so residents are aware of the risks and harms caused by gambling.

4. CONSULTATION

4.1 Consultations have taken place with: the Gambling TFG Members; OSC Members; the Council's Cabinet Members; Council Officers from the Public Health and Core Directorates; and the Council's Senior Management Team.

5. ALTERNATIVE OPTIONS CONSIDERED

5.1 No alternative options have been considered in the writing of this report.

6. REASONS FOR RECOMMENDATIONS

6.1 The TFG were reassured by the amount of work that has begun to reduce gambling related harm in the borough.

6.2 The investigation undertaken by the TFG as well as the recommendations made are in support of improving health outcomes for people in Barnsley and the TFG recognises the importance of minimising gambling related harm and the negative impacts gambling can have not just on those who are problem gambling but also their family, friends and wider network. The TFG is keen that local communities are aware of relevant services they could access support from.

6.3 Whilst recognising that there is evidence of good practice, the TFG have made the recommendations in order to support continual service improvement.

- 6.4 **Recommendation 1- Investigate the placement of Category D Machines located in the boroughs gambling premises so that they are not placed in pairs.** Members were concerned to hear that in some gambling premises in the borough Category D machines are placed together in pairs, meaning that some customers are playing both machines simultaneously which is a serious indicator of problem gambling. Members would like licensing to investigate which gambling premises in Barnsley currently have Category D machines placed together and ask that a new layout be considered to avoid this.
- 6.5 **Recommendation 2- Develop partnership working with health professionals and provide adequate resources to raise awareness of gambling related harm.** Members would like to see stronger links with health professionals in the borough on this topic and were pleased to see in Public Health's new gambling plan the intention to work with such partners as the Healthy Lives Team at Barnsley Hospital. Members would like to see this partnership working across the borough and would also like up to date and accurate resources available for partners.
- 6.6 **Recommendation 3- Develop a communications plan to encourage greater knowledge of gambling-related harms across the borough.** Members were impressed to see large multi-media campaigns surrounding gambling related harm successfully rolled out in other local authorities and would like to see this emulated in Barnsley, both utilising the councils physical advertising space and a social media campaign.
- 6.7 **Recommendation 4- Review the Statement of Gambling Policy so that Public Health is consulted when new gambling premises submit licensing applications.** Members are keen that Public Health be more involved in the granting of new gambling licenses in Barnsley and would recommend when the Statement of Gambling Policy is due for review in September 2022 that Public Health be notified when new gambling premises submit applications. This has worked well in other local authorities therefore Members are keen that Barnsley emulate this area of good practice.
- 6.8 **Recommendation 5- Continue to ensure council owned advertising space does not allow gambling advertising and encourage wider partners to not allow gambling advertising.** Members would like to see that the policy concerning council owned advertising space not allowing gambling advertising is upheld. Members are also keen that the council works with its wider partners, services, and organisations such as Barnsley Football Club to discourage the use of gambling advertising and discourage the advertising of games that allow in-game purchases of loot boxes.
- 6.9 **Recommendation 6- An All-Member Information Briefing on Gambling and Gambling Related Harm is held to raise awareness.** Members would like to see Public Health present to all Members on gambling to increase awareness of gambling related harm and inform Members what services are available in Barnsley to signpost residents to.
- 6.10 **Recommendation 7- Work with wider partners to create resources and training on gambling related harm and young people.** Members are keen to stress the huge negative impact gambling is having on young people and would like to see local campaigns introduced to raise awareness of gambling and the links between gaming and gambling for both young people and parents. Members are aware that gambling education is now part of the national curriculum however they would like to see the council work with wider partners to create further resources and training for young people, parents and teachers as the increase in young people gambling is a huge cause for concern.

- 6.11 **Recommendation 8- Create a training module for employees on gambling related harm, available on POD.** As a large employer in Barnsley, employees could be suffering with gambling harm either directly or indirectly through family and friends, and therefore a training module should be developed between Public Health and Workforce Development to raise awareness alongside the smoking awareness and alcohol and drug misuse modules that are already available.
- 6.12 **Recommendation 9- Implement a “trigger question” and promote the use of this with wider partners such as in healthcare settings.** National charities such as GamCare recommend that organisations use a “trigger question” when people use front door services such as welfare services or primary care, in the same way starter questions are used in reference to drugs and alcohol. GamCare’s standard question is “Has your gambling or the gambling of someone close to you had a negative effect on your life?” and Members would recommend implementing this into council surveys and front-line services and encouraging the council’s healthcare partners to introduce it in primary care settings.
- 6.13 **Recommendation 10- Ensure gambling support material placed in gambling premises is printed in other languages.** Members were concerned to hear that new migrants are at risk of gambling problems, so would like to ensure that all gambling support material available in Barnsley’s gambling premises is printed in other languages so that all residents are able to access support equally.
- 6.14 **Recommendation 11- Evaluate how the council can better capture local data on gambling related harm in Barnsley.** Members were pleased with the progress Public Health has made on collecting data on gambling related harm in Barnsley through their recent health needs assessment. However, Members agreed that more local data is needed to tailor services and support to where the greatest need is in Barnsley, therefore Members would like to see an evaluation into how the council can capture more local data in this area.
- 6.15 **Recommendation 12- Support the recent announcement by NHS England that as from April 1st they will not take any more money from the gambling industry to fund NHS gambling addiction programs.** Members would like the council to support this recent announcement from NHS England and investigate how they can support partners to implement this change.

7. GLOSSARY

BMBC	Barnsley Metropolitan Borough Council
CBT	Cognitive Behavioral Therapy
NHS	National Health Service
OSC	Overview & Scrutiny
PHE	Public Health England
TFG	Task & Finish Group
YGAM	The Young Gamers & Gamblers Education Trust

8. LIST OF APPENDICES

There are no appendices for this report.

9. BACKGROUND PAPERS

PHE Gambling Related Harm Review:

<https://www.gov.uk/government/publications/gambling-related-harms-evidence-review/gambling-related-harms-evidence-review-summary>

GamCare:

<https://www.gamcare.org.uk/>

YGAM:

<https://www.ygam.org/>

NHS Northern Gambling Service:

<https://www.leedsandyorkpft.nhs.uk/our-services/northern-gambling-service/>

Krysallis:

<https://www.krysallis.org.uk/gamcare-support/>

GamCare starter question flowchart:

<https://d1ygf46rsya1tb.cloudfront.net/prod/uploads/2020/01/GamCare-Process-Flowchart-updated-April-2021.pdf>

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