

Discussion on a new national strategy to reduce gambling harms, and Consultation on proposed amendments to LCCP requirements on gambling businesses to contribute to research, prevention and treatment

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Overview

We are developing a new ***national strategy to reduce gambling harms*** working with all the bodies that will be part of delivering the strategy. We are seeking your views on the five proposed priority areas for action over the life of the strategy.

We are also conducting a formal consultation under Section 24 of the Gambling Act 2005 on proposed amendments to the LCCP requirement on gambling businesses to contribute to research, prevention and treatment, and associated arrangements needed to deliver the strategy.

Why we are consulting

The current National Responsible Gambling Strategy comes to an end in March 2019 and we are developing a new ***national strategy to reduce gambling harms***.

Successful delivery of the strategy will require collective effort and engagement from a wide range of stakeholders, and we want as many people and organisations as possible to have a voice in shaping the strategy and the arrangements needed to deliver it.

Introductory text

We want to hear your views on the new ***national strategy to reduce gambling harms***.

The strategy has five priority areas for action, and you can choose which parts of this consultation you think are more relevant to you from this contents page.

In order to submit a response, you will need to complete the form at the bottom of the introduction section. This will help us understand the perspective you provide as an individual, or the group you represent.

We are particularly interested in the views of consumers and those who have lived experience of gambling harms and we will shortly open a separate version of this discussion paper for this stakeholder group.

At the end of each section, click on '**Continue**' which will bring you back to this page.

When you have completed all the comments you wish to make, click on '**Almost done...**' to finalise and submit.

Introduction

We want your views on a new ***national strategy to reduce gambling harms*** and the arrangements to deliver that strategy.

We committed in our business plan to develop the new strategy, and continue to be committed to driving and encouraging progress within our remit. However, we are only one of the bodies with a role to play, and will work together with Government, public health, the charitable sector and gambling businesses in order to make real progress to reduce gambling harms.

Based on the emerging advice we have received from our independent advisers, the Responsible Gambling Strategy Board (RGSB), and engagement so far with key organisations who have been involved in delivering the current strategy, we have identified an approach, five priority areas, and actions for each area.

You can focus your response on specific themes or priority areas of the consultation if you have particular areas of interest, but we do ask that all respondents complete the fields at the end of this introduction page, including the Privacy and Consent questions.

If you are short of time, you can complete the fields on this 'Introduction' page and then skip to the section near the end for 'Summary of discussion on the new strategy'.

Don't forget to head to the very end 'Almost done' section to submit!

This consultation is not the only way we will engage on the strategy. We are actively seeking advice and input from a wide range of organisations and people with experience or expertise in this space – this will include (but is not limited to) individuals with lived experience of gambling harms, clinicians delivering treatment, academics, industry employees and those working in the public and charity sectors.

The new strategy will be in place from April 2019.

1 What is your name?

Name

2 What is your email address?

If you enter your email address then you will automatically receive an acknowledgement email when you submit your response.

Email

3 Are you responding as an individual or on behalf of an organisation?

Single choice radio buttons (Required)

Please select only one item

-

Individual

-

Central government body

-

Public Health organisation

-

Local Authority

-

Charity

-

Researcher or Academic

-

Gambling business

-

Trade Association

-

Other

-

4 What is the name of your organisation (if any)?

Organisation

5 The Privacy Notice (link below) sets out how we will use your personal data under the Data Protection Act 2018, and requests your consent to do so. Please confirm you have read this notice and give consent for your personal data to be processed in accordance with the Privacy Notice. You can withdraw your consent at any time by contacting safergambling@gamblingcommission.gov.uk

not checked

Please tick the box to confirm you have read the Privacy Notice (Required)

Multiple choice checkboxes (Required)

Please select all that apply

- not checked

YES - I give consent to the Gambling Commission publishing my name and organisation to indicate I have responded to this consultation.

- not checked

NO - I do not give consent to the Gambling Commission publishing my name and organisation to indicate I have responded to this consultation.

Privacy Notice

6 When publishing the results of our consultations, we include comments that have been made in the responses but do not attribute comments to any individual or organisation. This means that we may include your comments in an anonymised form if you give your consent. You can withdraw your consent at a later date if you choose. Are you happy for anonymised comments to be included in the results of this consultation/ discussion?

Single choice radio buttons (Required)

Please select only one item

-

Yes, I am happy for anonymised comments from my response to be published

-

No, I am not happy for anonymised comments from my response to be published

The current National Responsible Gambling Strategy

The current National Responsible Gambling Strategy (NRGS) was developed by our advisers, the Responsible Gambling Strategy Board (RGSB). Under the current arrangements, the strategy can be 'adopted' by the Gambling Commission in part or in full, although in practice this process has been informal.

Over the life of the current NRGS, there has been progress. We have seen gambling being increasingly recognised as a public health issue, and we have seen gambling businesses understand the need to take more responsibility in proactively identifying problematic gambling to reduce the risk of harm to consumers.

However, progress in some areas, such as evaluating initiatives designed to identify and reduce harm, and building an effective evidence base to inform policy, has been slow. Despite concerted efforts to position it as a 'national strategy', it has often been called 'the RGSB strategy' and there have been challenges to ensure commitment towards the strategy and progress towards delivery.

RGSB has advised – through its annual reports on progress against the strategy - that one of the reasons for this limited progress is an insufficient connection between the strategy and the statutory powers of the Commission. We therefore committed in our corporate strategy (published in November 2017) and in our business plan (published in April 2018) to leading the development of the new strategy ready for April 2019. A significant part of the process for developing the new strategy will continue to be the formal advice we will receive from RGSB.

The current strategy has 12 strategic priorities. You can read more about the current priorities [here](#).

7 Do you have experience of the current National Responsible Gambling Strategy?

The current National Responsible Gambling Strategy

Single choice radio buttons

Please select only one item

•

Yes

•

No

8 What are your experiences of the current National Responsible Gambling Strategy?

Tell us about your experiences of the current strategy

A new national strategy to reduce gambling harms - our approach

We propose that the aim of the new strategy should be to reduce gambling harms.

The strategy is designed to better co-ordinate the way that action is taken to meet this aim. Consistent with approaches in other international jurisdictions, the proposed actions focus on making gambling safer with the aim of reducing harms, rather than on promoting responsible gambling. We feel that the notion of promoting responsible gambling places an undue focus on individuals who are experiencing harms, and does not also consider products or the environment.

A particular theme of implementation will be protecting children and young people - and their needs will be reflected in the work for each of the five proposed priority areas.

By harms, we mean the adverse impacts from gambling on the health and wellbeing of individuals, families, communities and society.

This does not mean that the aim is to minimise harm at all costs. We want to safeguard consumers and the wider public by ensuring that gambling is fair and safe, and will seek to do this by balancing consumer choice and enjoyment against the risks gambling can create and its impact on wider society.

Our approach to the new strategy is similar to that taken in a range of other public health or regulatory areas – by this we mean defining the problem, identifying risk and protective factors, developing and testing prevention strategies and ensuring widespread adoption.

Our Approach

Define the problem

Identify risk and protective factors

Develop and test prevention strategies

Ensure widespread adoption

This approach is not a one-off linear process - it is a constant cycle of defining the current level and nature of the problem, through to ensuring widespread adoption of good or best current practice.

We will work within the current regulatory framework for gambling to implement the strategy. During the life of the strategy it is possible that we may identify parts of the current framework which could be improved to facilitate progress and lead to better outcomes for consumers. Some of these may be changes that can be addressed within the current regulatory framework, others may be recommended through formal advice to Government.

Improvements could include, for example, rules or requirements relating to gambling products or environments, where evidence suggests this is needed.

Definition of harms

For the strategy, we propose to apply the definition of harms that already exists in the [framework for measuring gambling-related harms, published earlier this year](#).

Gambling-related harms are the adverse impacts from gambling on the health and wellbeing of individuals, families, communities and society.

These harms are diverse, affecting resources, relationships and health, and may reflect an interplay between individual, family and community processes.

The harmful effects from gambling may be short-lived but can persist, having longer-term and enduring consequences that can exacerbate existing inequalities.

We speak more about the framework for measuring harms under Priority Area 2: Prevention.

9 What are your views on our overall approach to the strategy from defining the problem through to ensuring widespread adoption of good practice?

Views on our overall approach

Priorities for the new strategy

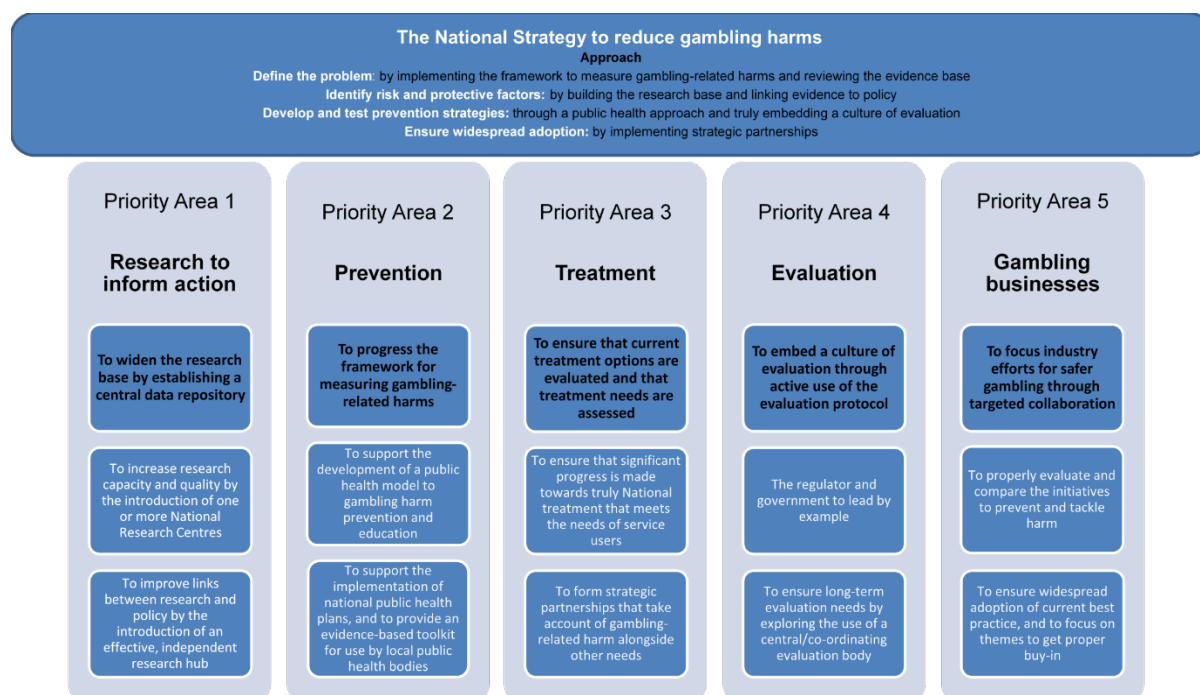
The priority areas are the specific areas for action that we propose to focus on during the life of the strategy and which we think will have the most impact on delivering the strategy's aims.

The five priority areas each flow from the overall aim of reducing gambling harms and are in line with the proposed approach of defining the problem through to ensuring widespread adoption of protective measures.

The five priority areas are set out below. We are interested in your views on whether these are the right priorities to reduce gambling harms over the coming three years.

These priority areas are not entirely discrete programmes of work. The actions that flow from them and contribute towards delivering the strategy are likely to cut across more than one priority area. For example, some actions under Priority Area 5: Gambling businesses, will also deliver progress within Priority Area 4: Evaluation.

Under each priority area, we have proposed the actions we consider will have the most impact. The first action is one which we consider should be delivered in year 1 of the strategy. These are set out by priority in the following sections.



10 Do you have any views on what should be prioritised under a new national strategy?

Views on priorities

Priority Area 1: Research to inform action

The five priority areas set out the specific focus for the life of the strategy which we think will have the most impact on delivering the strategy's aims. They are not entirely discrete programmes of work and will interact with each other across the wider strategy. For each of the five priority areas, we want to:

- agree clear and specific actions to be delivered during the life of the strategy, and*
- identify the appropriate action for progression in year 1.*

Under the proposed Priority Area 1, we wish to accelerate progress with building the evidence base to inform action, focusing on the research infrastructure.

This priority area will be of most interest to academics, research and data bodies, and those interested in the evidence base.

An independent research programme is a key part of the governance arrangements which ensure a separation between the funding for research on gambling and the setting of research priorities and questions. By being specific about the research needed, and setting the research agenda independently, we hope to encourage a wider range of academics, research agencies and others to deliver high quality research. It is vital that independent academics and researchers can contribute to this space without concern about risk to their reputations.

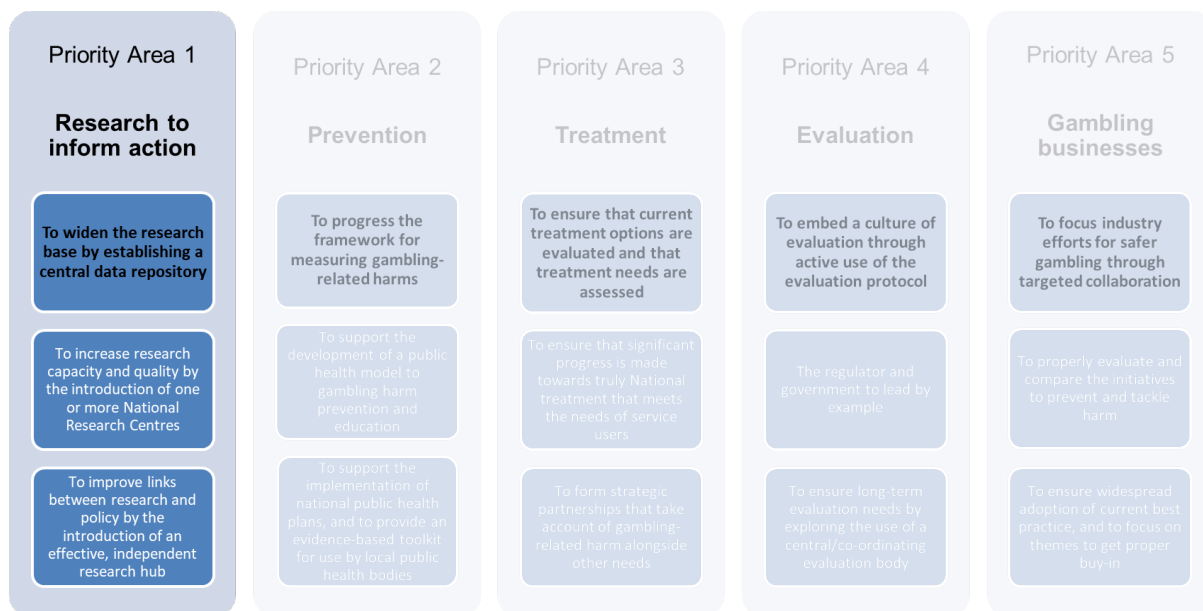
The Commission has recently published the [Research Programme](#) based on advice from our advisers RGSB. This programme has six research themes and we have continued to invite comments on its content. Feedback from stakeholders tells us that the research themes are correct, but that the *pace* of research is too slow.



Separate from the Research Programme set by the Gambling Commission, there have been recent moves to increase public health research into gambling. For example, the National Institute for Health Research put out a call this year for research proposals on gambling, and Public Health England have been asked by the Department for Health and Social Care to conduct an evidence

review into gambling. We also mention these actions in the next section on Priority Area 2: Prevention.

The proposed content of the new national strategy is less about *what* we need to know, and more about *how* we should collectively facilitate the building of the evidence base.



Year 1 action

For Year 1 of the strategy, we want to ensure that a central data repository is established. A data repository enables anonymised information about gambling behaviour to be collated in one place, and therefore removes current barriers to research due to difficulties in accessing data. This information is then made available to researchers.

We are already making the first steps towards a data repository approach through our work with partners on [Patterns of Play](#), where the Commission will be central in requiring the data from businesses in a structured manner to inform current and future research.

A data repository would take this further and ensure that an independent body hosted all anonymised data from the industry and other sources and made it available to researchers in a controlled and transparent manner.

Other actions

To increase research capacity and quality by the introduction of one or more research centres: National Research Centres are one established method of building expertise and research capacity - not necessarily in a physical centre. They are about ensuring the infrastructure is in place that underpins high-quality research. Significant and consistent funding would be required for this action, and therefore more work is needed to scope how this approach would be funded over the long-term.

To improve links between research and policy by establishing a research hub: Research is not for research's sake, but to provide learnings and evidence for action for the Commission and other organisations committed to reducing gambling harms, including gambling businesses. Establishing an independent research hub to collate research and assess the impact on policy would be one way of building a more comprehensive and coordinated evidence base.

Read more about our approach to data in the Patterns of Play work

11 To what extent do you agree with the proposed actions for Priority Area 1: Research to inform action?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know
Creating an independent data repository to facilitate research Please select only one item						
Increasing research capacity and quality through research centres Please select only one item						
Improving links between research and policy using a research hub Please select only one item						
That creating a data repository should be a Year 1 action Please select only one item						

12 Do you have any other comments on Priority Area 1: Research to inform action? For example, what other actions should be considered? How could these actions be taken forward and which organisations should be involved?

Other comments on research priority area

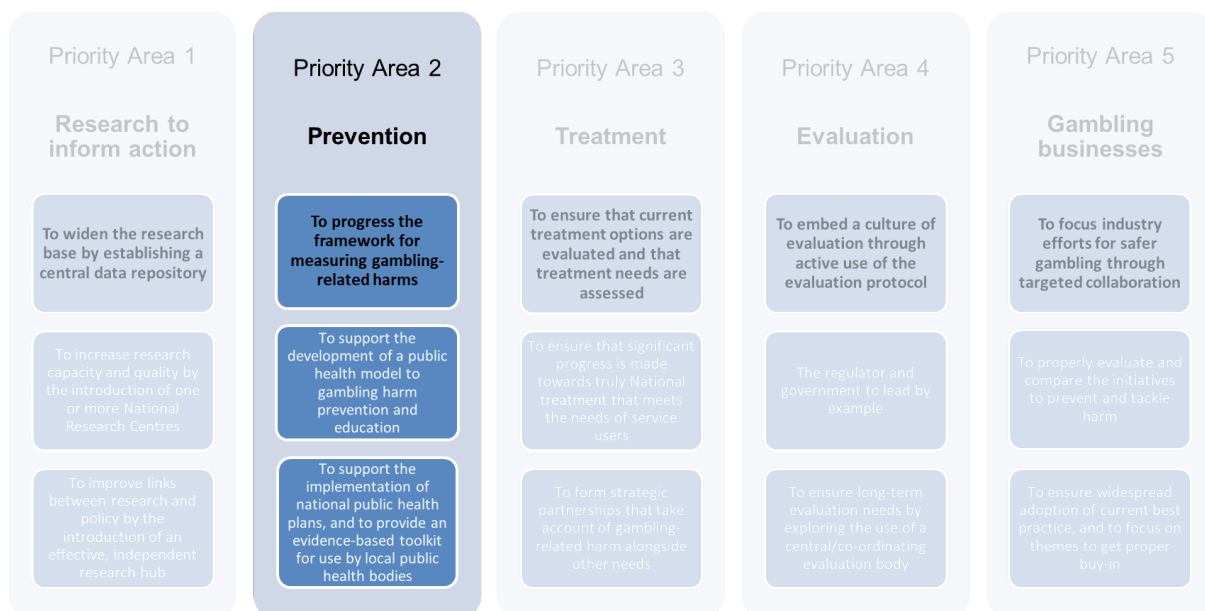
Priority Area 2: Prevention

The five priority areas set out the specific focus areas for the life of the strategy which we think will have the most impact on delivering the strategy's aims. They are not entirely discrete programmes of work and will interact with each other across the wider strategy. For each of the five priority areas, we want to:

- agree actions to be delivered during the life of the strategy, and*
- identify the appropriate action for progression in year 1.*

Under the proposed Priority Area 2, we set out plans for prevention and education, building on and helping to coordinate and target the work that has been carried out by a range of bodies, including GambleAware and other gambling charities working in the area of education.

We take a broad interpretation of 'education' to include public health campaigns, education programmes, and to some extent point-of-sale safer gambling information or campaigns.



Year 1 action

In July, we published a report on gambling-related harms, led by Dr Heather Wardle. The report can be read [here](#).

The report is the result of close collaboration between the Gambling Commission, GambleAware as the funding body, and RGSB. The report calls for views on a framework for understanding and measuring gambling-related harms.

In order to support harm prevention, we need a clear understanding of the hidden harms – and costs – of gambling, on resources, health and relationships. Therefore, in Year 1 of the Strategy, we consider that the priority should be to progress this framework for measuring gambling harms. This means that we are interested in the hidden harms of gambling on resources, health and relationships.



Other actions

To support the development of a public health model for prevention and education

The [Government response to the consultation on proposals for changes to Gaming Machines and Social Responsibility Measures](#) earlier this year included the announcement of three significant steps towards embedding a national public health approach:

- An evidence review to be conducted by Public Health England (PHE) of health aspects of gambling-related harm to inform action on prevention and treatment.
- A call for evidence which was launched by the National Institute for Health Research (NIHR) about which interventions are most effective.
- A referral to the National Institute for Health and Care Excellence (NICE) to consider treatment guidelines (to be allocated on the NICE work programme).

Supporting the development of this important work to inform a national approach to gambling harm prevention and education is therefore included as a proposed action under the strategy. Acknowledging that not all action in the space of reducing gambling harms will happen under the auspices of the strategy, the Gambling Commission's role in this action would focus on sharing the expertise, and in turn reflecting the learnings of research in our regulatory approach.

To support national and local health plans

This action focuses on *implementation* - it is to support action at a national level for England, Wales and Scotland, and includes working with central Government as it coordinates these plans.

The strategy should also continue to support the development and implementation of local health plans, and the Commission's role will include building on our existing toolkit for local authorities for public health action using an evidence-based approach, and supporting evaluation of the impact of public health plans.

The Gambling Commission already works in partnership with local authorities, who have a number of important regulatory functions in relation to licensing premises for gambling through a shared regulation model. Our role tends to focus on gambling businesses and issues of national or regional significance, and licensing authorities take the lead on regulating gambling locally as they are better placed to understand and manage local issues.

Read more about the gambling harms framework

13 To what extent do you agree with the proposed actions for Priority Area 2: Prevention?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know
To measure harms of gambling Please select only one item						
Support public health model for prevention & education Please select only one item						
Support national and local public health plans Please select only one item						
Significant progress on measuring harms as a Year 1 action Please select only one item						

14 Do you have any other comments on Priority Area 2: Prevention? For example, what other actions should be considered? How could these actions be taken forward and which organisations should be involved?

Other comments priority 2: Public health, prevention and education

Priority Area 3: Treatment

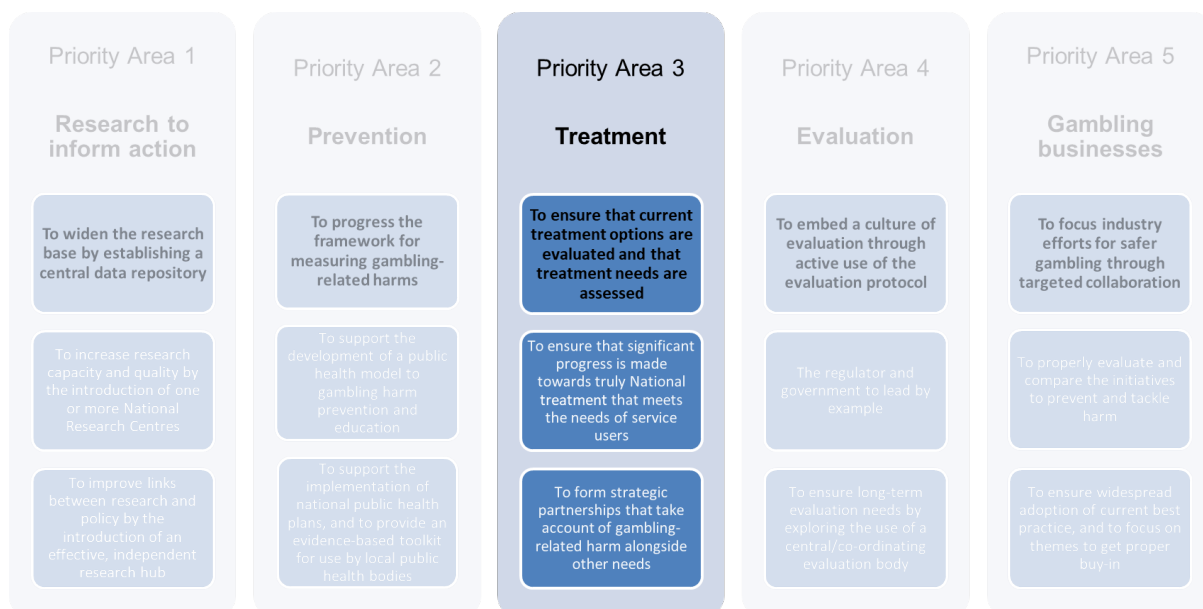
The five priority areas set out the specific focus areas for the life of the strategy which we think will have the most impact on delivering the strategy's aims. They are not entirely discrete programmes of work and will interact with each other across the wider strategy. For each of the five priority areas, we want to:

- agree actions to be delivered during the life of the strategy, and
- identify the appropriate action for progression in year 1.

The majority of treatment services for those affected by gambling-related harms in Great Britain are funded via GambleAware who commission treatment services which provides a range of interventions across England, Scotland and Wales, free at the point of delivery. These services offer psychosocial interventions ranging from brief information and advice, through to counselling and Cognitive Behavioural Therapy (CBT), to psychiatric care and residential treatment. The availability and extent of different types of treatment varies across the nations, and there is a treatment gap recognised which GambleAware seeks to assess and address. The extent of this gap is somewhat 'hidden' because those experiencing harm often may not know what help is available.

Improving the arrangements includes furthering pathways to treatment via primary and social care and supporting those who suffer from mental health issues alongside gambling harms.

In 2017/18 around 8,800 individuals received treatment for their gambling problems under the current arrangements. This is a very small proportion, which would represent approximately 2.6% of the 340,000 who are classified as problem gamblers in Great Britain in the [latest data published](#) by the Commission in September 2018 (which combines data from the Health Survey for England (HSE) 2016, the Scottish Health Survey (SHeS) 2016 and the 2016 Wales Omnibus). A further 30,000 individuals including gamblers and their friends and family received support from the national helpline.



Year 1 Action

We wish to ensure that the evaluation of current treatment services which was set as a priority under the current strategy is put back on track, and a proper needs assessment for treatment in England, Scotland and Wales is carried out. In part, this is to provide ongoing assurance that the voluntary contributions from industry are being targeted at the most cost effective treatment services, maximizing reach and impact.

We need to understand the long-term impact of the various types and methods of treatment for those with gambling addiction or experiencing moderate harms.

This is necessary in order to identify which treatment methodologies best suit different groups, and to inform future work to increase the reach of treatment.

Other Actions

Progress towards truly national treatment coverage: When compared with the numbers of problem gamblers reported via the Combined Health Survey, the numbers of those experiencing gambling addiction and gambling harms who receive treatment are low. Much of the treatment currently available is through the national helpline (funded by GambleAware and operated by GamCare). GamCare has a network of local partners for referring those who come through the helpline and there is also a small number of gambling-specific treatment centres, for example in London and Leeds. There is one charity (Gordon Moody Association) providing residential treatment in London and Dudley. This means that certain forms of gambling treatment are concentrated in certain areas and less available in some parts of England, Scotland and Wales.

We need to collectively make significant progress towards truly national coverage of treatment across England, Wales and Scotland.

Strategic partnerships to take account of gambling harms alongside other addictions and needs: gambling addiction and harms often present alongside other needs or addictions. This comorbidity can be with gambling as a causal factor or as a symptom of depression, mental health issues or loneliness.

It is important that we recognise these links and that we work with others to meet both the aims of the new strategy to reduce gambling harms ***at the same time*** as supporting wider work to reduce health inequalities, and to achieve mental health and wellbeing outcomes.

Any work which is undertaken under the strategy must take account of the development of the NHS Long Term Plan, which is due to be published at the end of this year. The Government has announced funding to work towards:

- Better access to mental health services, to help achieve the Government's commitment to parity of esteem between mental and physical health
- Better integration of health and social care, so that care does not suffer when patients are moved between systems
- Focusing on the prevention of ill-health, so people live longer, healthier lives

The long-term plan is likely to take greater account of comorbidities with mental health including addictions such as gambling. Therefore, there is an opportunity for those bodies offering treatment to develop the partnerships and effective transitions between mental health and gambling treatment or care.

There is also a need to progress independent evaluation under the current system and to consider embedding treatment evaluation in a system of care standards assessment, ideally based on the NICE guidelines when those are progressed.

Background to current treatment provision

The treatment that is currently available is mainly funded by the charity GambleAware under the existing voluntary arrangements. It commissions:

- The National Gambling Helpline (operated by GamCare) providing a multi-channel, confidential help and listening service, information, assessment, and brief interventions, from 8 am to midnight, 7 days a week. The service also offers a moderated online forum for problem gamblers, their family and friends, and an online chat room which provides moderated on-line discussion sessions.
- The community-based psychosocial interventions include up to 12 week/sessions of psychosocial or counselling support. GamCare provide services in London and online. 15 'GamCare Partners' (subcontracted by GamCare) include a range of organisations (from those comprising of groups of independent counsellors to organisations who provide gambling treatment plus other addiction or mental health services).
- CNWL NHS Foundation Trust via its National Problem Gambling Clinic, which provides individual and group work-based treatment in London. Recently, a further clinic has been announced in Leeds.
- Gordon Moody Association, which is the sole provider of commissioned residential rehabilitation and provides residential assessment and a 3- month residential programme for men. It is also piloting a mixed model of care for women.

The treatment providers commissioned in this way are working towards improving data analysis and working towards the Care Quality Standards which apply in other areas of addiction treatment.

15 To what extent do you agree with the proposed actions for Priority Area 3: Treatment?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know
Evaluation and needs assessment Please select only one item						
Progress towards truly national treatment Please select only one item						
Strategic partnership for gambling and other harms Please select only one item						
Evaluation and needs assessment as Year 1 action Please select only one item						

16 Do you have any other comments on Priority Area 3: Treatment? For example, have we adequately mapped the current treatment provision? What other actions should be considered? How could these actions be taken forward and which organisations should be involved?

Other comments Priority 3

Priority Area 4: Evaluation

The five priority areas set out the specific focus areas for the life of the strategy which we think will have the most impact on delivering the strategy's aims. They are not entirely discrete programmes of work and will interact with each other across the wider strategy. For each of the five priority areas, we want to:

- *agree actions to be delivered during the life of the strategy, and*
- *identify the appropriate action for progression in year 1.*

Under the proposed Priority Area 4, we are placing a greater emphasis on improving evaluation and truly identifying what works.



Year 1 action

In 2016, our advisers RGSB published an [evaluation protocol](#), to support the use of evaluation by the industry, proportionate to the intervention or idea being tested. During the life of the National Responsible Gambling Strategy, there have been efforts to pilot or trial new initiatives or approaches, and we have seen increased moves to share information and collaborate about different approaches.

However, the approach to evaluation and finding out what works remains patchy and there is a potential risk of pilots or trials occurring without proper, proportionate evaluation, which hinders progress towards understanding what works and the impact on consumers.

Therefore, we have identified that properly embedding the use of evaluation, particularly for industry-based interventions, should be a key action for Year 1 of the new strategy.

Other actions

Leading by example: It is important that new measures or programmes that are introduced are properly evaluated and this applies to the regulator as much as to other bodies.

As the lead for development of the new national strategy, we recognise the need for the Commission to step up our own evaluation processes, and this includes monitoring progress of significant new policy initiatives or LCCP changes. We will also ensure that progress towards the strategy continues to be measured annually, based on advice from our advisers RGSB.

To explore long-term structures and solutions: over the longer term, those involved in delivering the new national strategy to reduce gambling harms may benefit from a more coordinated approach to evaluation.

We propose therefore to explore options to prioritise, coordinate and embed proportionate evaluation and ensure that steps are taken to agree the method and ownership of implementing the preferred approach.

While there are links between all of the priority areas, and an expectation that many actions will deliver progress across more than one area, we consider that Priority Area 4: Evaluation, is genuinely cross-cutting across all other areas of the strategy.

Read more about the current evaluation protocol

17 To what extent do you agree with the proposed actions for Priority Area 4: Evaluation?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know
Embed use of evaluation through evaluation protocol Please select only one item						
The regulator and government to lead by example Please select only one item						
Explore use of central/co-ordination evaluation body Please select only one item						
Embed evaluation protocol as Year 1 action Please select only one item						

18 Do you have any other comments on Priority Area 4: Evaluation? For example, what other actions should be considered? How could these actions be taken forward and which organisations should be involved?

Other comments priority 4

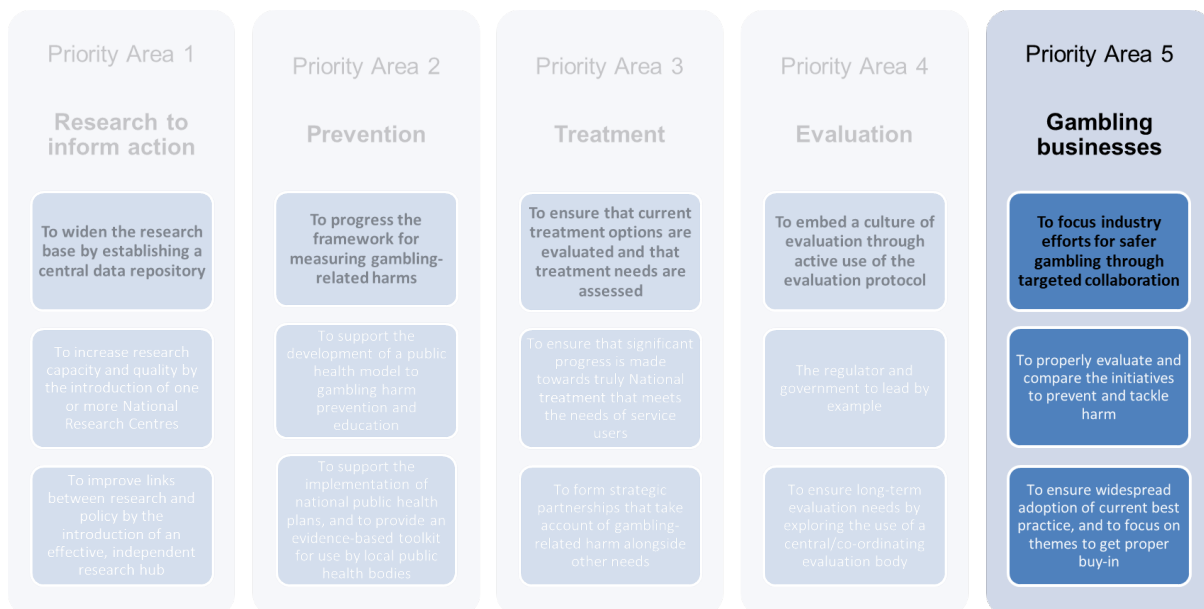
Priority Area 5: Gambling businesses

The five priority areas set out the specific focus areas for the life of the strategy which we think will have the most impact on delivering the strategy's aims. They are not entirely discrete programmes of work and will interact with each other across the wider strategy. For each of the five priority areas, we want to:

- *agree clear and specific actions to be delivered during the life of the strategy, and*
- *identify appropriate the action for progression in the year 1.*

Under the proposed Priority Area 5, we recognise that gambling businesses have a key role to play in reducing the risk of gambling harms. In order to maximise progress, gambling businesses should focus their collaborative efforts to achieve the most impact.

Unlike some of the more thematic priority areas, Priority Area 5 focuses on the role the industry can play to drive and deliver progress across the strategy as a whole.



Year 1 Action

The proposed Year 1 action is to ensure that the efforts of gambling businesses are coordinated through targeted collaboration.

Gambling businesses have been encouraged, or required, throughout the life of the current strategy to do more to protect their consumers, in particular children and other vulnerable people. There has been some progress by businesses in recognising the need to increase efforts to proactively identify problematic gambling to reduce the risk of harm to customers.

We have seen developments in the use of data analytics and processes to identify and interact with customers, and collaboration between businesses to share good practice and identify solutions has increased.

However, businesses still sometimes fail to use the information at their disposal or take the basic actions needed to meet their responsibilities - this is evident in the Commission's enforcement activity. We want to target efforts to collaborate on areas where most impact can be seen by the actions of businesses.

Other actions

Comparing and contrasting initiatives and programmes will be an important action throughout the life of the strategy. It is only through proper and proportionate evaluation that we can identify what works, so there is a role for gambling businesses to collaborate on actions to address *Priority Area 4: Evaluation*, and embed evaluation into both current practices and new ideas from the start.

Businesses should see sharing the lessons learned from approaches which have proved to be less successful to be as important as identifying the good aspects of their work.

Ensuring widespread adoption of current good practice: In order to make the most of the increasing evidence base through research, trialling and evaluating interventions to deliver better outcomes for all consumers, in particular vulnerable groups, we will support the sharing of current good practice and collaborate with businesses to do so.

Where there is evidence of what works to minimise the risk of gambling harms to customers, we will expect widespread adoption and use our regulatory tools to deliver consumer protections, including licence conditions, assurance processes and placing the onus on the right people (such as personal licence holders) to deliver these protections.

19 To what extent do you agree with the proposed actions for Priority Area 5: Gambling businesses?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know
Focus industry efforts for safer gambling Please select only one item						
To properly evaluate and compare initiatives Please select only one item						
To ensure widespread adoption of current best practices Please select only one item						
Focus industry efforts as Year 1 Action Please select only one item						

20 Do you have any other comments on Priority Area 5: Gambling businesses? For example, what other actions should be considered? How could these actions be taken forward and which organisations should be involved?

Other comments Priority 5

Summary of discussion on the new strategy

If your time is limited, or you wish to recap the content set out in this consultation, this one-page summary of the proposed ***national strategy to reduce gambling harms*** may help.

This summary sets out the aim of the strategy and the proposed approach. It shows that we have identified five possible priority areas, and under each of these a priority action for Year 1, and two further key actions.

You do not need to complete the question below if you have already completed or intend to complete the detailed sections of this consultation.

One-page summary of emerging content



21 To what extent to do you agree with the emerging content of the new national strategy to reduce gambling harms?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know
Overall aim to reduce gambling harms Please select only one item						
The overall approach: define problem through to adopt best practice Please select only one item						
Priority Area 1: Research to inform action Please select only one item						
Priority Area 2: Prevention Please select only one item						
Priority Area 3: Treatment Please select only one item						
Priority Area 4: Evaluation Please select only one item						
Priority Area 5: Gambling businesses Please select only one item						

22 Do you have any other comments on the emerging proposals for the new national strategy to reduce gambling harms?

Any other comments

Please attach a copy of any documents you wish to include to this printout.

Please feel free to upload any further information for us to consider in relation to the new National Strategy to reduce gambling harms.

Upload here

Consultation on proposed amendment to LCCP requirement for businesses to support research, prevention and treatment of gambling harms

This is a consultation under Section 24 of the Gambling Act 2005 about proposed changes to the licence conditions and codes of practice (LCCP). It will be of particular interest to gambling businesses and those who receive funding for research, prevention and treatment of gambling-related harm.

At the moment, core funding to address gambling-related harms is through a system under which the **amounts** contributed by gambling businesses are voluntary. There is not in place a statutory levy which would specify amounts to be contributed for these purposes. We simply require operators through LCCP to make **an annual financial contribution to one or more body that delivers each of the aspects of research, harm prevention and treatment.**

In practice, the highest volume of contributions are made to GambleAware. However, contributions under this requirement are also made to a wide range of bodies, both within Great Britain and internationally. Some of these organisations have a clear link to the delivery of the current strategy but the extent of their responsibilities are unclear. In some cases, the link to both the strategy and research, prevention and treatment of gambling-related harm is questionable which means that funds are not targeted at actions that will have the most impact to protect children and other vulnerable persons from being harmed by gambling in Britain.

Earlier this year, to feed in to the Government's Review of Gaming Machines and Social Responsibility Measures, we reviewed the current arrangements, and considered options which could improve the application of funding to further the strategy. [Click to access the review](#). The outcome of this review included a commitment to consulting on a change to our LCCP requirement on businesses to specify where contributions must go in order to meet the LCCP requirement. In that review, we said we would consider a mechanism to ensure that contributions to meet the LCCP requirement are made to organisations signed up to deliver the new national strategy under an agreed governance framework. This is to ensure that contributions are focused on actions to reduce gambling harms, and coordinated to enable the most effective delivery of the strategy.

We are therefore proposing an amendment to LCCP to specify that licensees' contributions under this provision are made to one or more organisations that are approved by the Commission. This is intended to give clarity to gambling businesses on how they can ensure they are compliant. It will reduce the risk to operators that they will select an inappropriate recipient in breach of code provision 3.1.1.(2). It will improve the outcomes for vulnerable persons who are or may be affected by gambling-related harms by helping to target funding within the priorities of the strategy and ensuring that organisations in receipt of funds operate within appropriate governance principles and arrangements.

Our engagement so far suggests that stakeholders, including those currently in receipt of contributions and gambling businesses themselves, will welcome this additional clarity and resulting coordination of effort.

This proposed change would only apply to those contributions made under the LCCP requirement and which are therefore reported to the Gambling Commission as part of regulatory returns. Contributions that are made to organisations which are not made in order to meet the LCCP requirement could continue to be made - as they are now - to any organisation which the gambling business considers appropriate.

As is sometimes the case at the moment, contributions could be made via trade associations so long as the destinations of the contribution meet the proposed amended LCCP requirement and there is clarity about the level of contributions made on behalf of each business.

The draft of the new requirement on businesses

The proposed additional wording for all gambling licensees is set out below at paragraph 2, shown with proposed changes marked in bold.

Social responsibility code provision 3.1.1

Combating problem gambling

All licences

- 1 Licensees must have and put into effect policies and procedures intended to promote socially responsible gambling including the specific policies and procedures required by the provisions of section 3 of this code.
- 2 Licensees must make an annual financial contribution to one or more organisation(s) **which are approved by the Gambling Commission**, and which between them research into the prevention and treatment of gambling-related harms, develop harm prevention approaches and identify and fund treatment to those harmed by gambling.

How would this proposed amendment work in practice?

When deciding whether to approve an organisation to which businesses may direct contributions under the LCCP requirement, the Commission proposes to take into account three aspects:

- *Does the organisation meet the basic principles of governance set out below, as appropriate for their role?*
- *Is the organisation signed up to deliver one or more of the functions of research, prevention or treatment under the next national strategy, with clear roles and responsibilities?*
- *If appropriate and proportionate to the role which the organisation is carrying out, is there an appropriate governance framework in place?*

Approval could be requested by a number of routes:

- *The organisation approaches the Commission*
- *A gambling business approaches the Commission naming its proposed recipient; or*
- *The Commission identifies appropriate bodies on its own initiative.*

The basic principles of governance

Independence: the body is independent from the industry or from undue influence as is appropriate for their role

Openness and transparency: the body has open and transparent governance processes

Integrity: the body has a defined interest in reducing gambling-related harms

Clarity of purpose: the body commits to delivering aspects or actions of the strategy against a set timetable

Effectiveness and accountability: the body commits to full but proportionate evaluation processes, against the criteria set by the strategy

Signed up to delivery of the strategy

The Commission will need to understand which function(s) of research, prevention or treatment will be delivered to meet the LCCP requirement. The Commission will also need to understand what parts of the strategy the body will deliver and how their work will fit within the overall work programme.

In our review of the RET arrangements published earlier this year, we explained that *‘we want all the bodies within the RET arrangements to be working in an efficient and co-ordinated manner. There should be effective co-ordination of efforts in areas of shared interest (of which there will be many). Funds should be allocated appropriately to the elements of R, E and T (and to projects within those strands) to ensure delivery of the objectives of the NRGs.’*

Appropriate governance framework in place

Where a body is taking on a significant role to deliver the strategy, or where there may be confusion about how it interacts with other bodies working to deliver the strategy, it may be appropriate for the body to have implemented a specific governance framework for the delivery of that work. A governance framework could be implemented with other bodies which have connecting actions under the strategy (this could also include the Commission).

An example of a current governance framework in place under the current strategy is the revised [Research and Commissioning Governance Framework](#), published by the Gambling Commission which sets out the arrangements between the *Commission*, which sets the Research Programme and specifies research briefs, our advisers *RGSB* who provide independent advice on the programme and its delivery, and the main delivery partner under the current strategy, *GambleAware* which commissions the research.

Other actions the Commission is taking to support the direction of funding for research, prevention and treatment

We continue to progress other actions under our Review of Research, Education and Treatment. For example, we committed in that review to improving the transparency of the amounts and destinations of RET funding, including those which are made to organisations other than GambleAware.

The Commission's review of the arrangements for Research, Education and Treatment

23 Do you broadly agree with the proposed change to our requirements to give clarity to operators on where contributions made under the LCCP requirement may go?

Single choice radio buttons

Please select only one item

•

Yes, I broadly agree with the proposed change

•

No, I do not agree with the proposed change

24 Do you have any comments on the proposed drafting of the provision?

Comments on draft requirement on businesses

25 Do you have any other comments on the requirement on businesses?

Comments on requirements on businesses

26 To what extent do you agree with the principles for bodies signing up to delivery of the new strategy?

The principles of the governance framework

For bodies signed up to deliver the new national strategy, the proposed principles of governance are:

- **Independence:** the body is independent from the industry or from undue influence
- **Openness and transparency:** the body has open and transparent governance processes
- **Integrity:** the body has an interest in reducing gambling-related harms
- **Clarity of purpose:** the body commits to delivering aspects or actions of the strategy against a set timetable
- **Effectiveness and accountability:** the body commits to full but proportionate evaluation processes, against the criteria set by the strategy

•	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know
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Independence

Please select only one item

Openness and transparency

Please select only one item

Integrity

Please select only one item

Clarity of purpose

Please select only one item

Effectiveness and accountability

Please select only one item

27 Do you have any other comments on the proposed principles?

Comments on governance principles

28 We believe it is implicit that most funding under the LCCP requirement will be targeted at reducing gambling harms in Britain. However, in order to promote the principle of international co-operation, we recognise there may be instances where organisations signed up to deliver the strategy are based in other jurisdictions. We are of the view that in these circumstances their work should have a clearly defined link to the impact of reducing gambling harm in Britain. To what extent do you agree with this assessment?

Single choice radio buttons

Please select only one item

•

Strongly agree

•

Agree

•

Neither agree nor disagree

•

Disagree

•

Strongly disagree

•

Don't know

Submit response