

# At a Glance

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### 5 Responsible Gambling and the Prevention and Treatment of Problem Gambling

#### Summary

Regulated gambling in Nova Scotia generated more than \$500 million in revenue in 2013-14. While many Nova Scotians gamble without significant problems, approximately 7,000 Nova Scotians experience adverse consequences related to their gambling. We found Nova Scotia is not adequately managing its problem gambling prevention and treatment programs. Additionally, improvements are needed in the evaluation of responsible gambling programs.

The Department of Health and Wellness does not monitor gambling treatment within health authorities for compliance with treatment standards. Updated prevention standards have been under development since 2008 but have not been approved and implemented. In addition, the Department does not know whether prevention and treatment services result in reduced gambling-related harms. We recommended Health and Wellness monitor compliance with standards and the outcomes of gambling prevention and treatment services to see if they are helping Nova Scotians experiencing gambling problems.

The Nova Scotia Provincial Lotteries and Casino Corporation has a variety of programs to promote responsible gambling. We found these are consistent with a framework established by an external responsible gaming group. The Corporation does evaluate the effectiveness of its responsible gambling programming annually; however, there was a lack of support for the targets used in the evaluation. We recommended the Nova Scotia Provincial Lotteries and Casino Corporation determine whether the targets used are appropriate.

Information on gambling treatment services is communicated to the public but few people are accessing services. A project to improve awareness of the problem gambling help line, was initiated in 2011, but not completed until March 2015. Health and Wellness and the Nova Scotia Health Authority need to focus on increasing the number of people seeking problem gambling treatment services to help Nova Scotians in trouble.

The province has not clearly defined roles and responsibilities in First Nations gaming agreements; as a result, there are no processes to ensure gambling on First Nations reserves is in compliance with relevant provincial laws, including related to advertising and age limits. The majority of First Nations gaming agreements do not include responsible gambling requirements, such as training and responsible gambling signage. We recommended responsible gambling be addressed in the current renegotiation of First Nations gaming agreements.



### **5** Responsible Gambling and the Prevention and Treatment of Problem Gambling

#### Background

- 5.1 Regulated gambling in Nova Scotia generated more than \$500 million in revenue in 2013-14. Revenue comes from many sources, including ticket and video lotteries, casinos, and bingos. While it is a significant source of provincial revenue, gambling can potentially lead to adverse consequences for some participants, such as job loss, financial struggles and domestic violence.
- 5.2 The most recent provincial gambling surveillance study, which provides information on the prevalence of gambling and problem gambling among Nova Scotians 19 years of age and older, was completed in 2007. This study indicated approximately 87 percent of Nova Scotians had gambled at least once in the previous year and approximately one per cent (7,000) of these individuals were identified as having experienced adverse consequences from their gambling. Another 1.6 per cent of gamblers (12,000) were scored at a moderate risk level for problem gambling; individuals in this category may or may not have experienced adverse consequences from gambling.
- 5.3 While gambling problems can happen to anyone, certain Nova Scotians have been identified as being at higher risk, including those who have disabilities, students, unemployed, or separated from a spouse or partner. A small percentage of gamblers are accounting for a high percentage of gambling revenue. In 2007, approximately 14 percent of the population regularly took part in gambling outside of lottery tickets, but this group accounted for approximately 62 percent of gross gambling revenues generated for the province.
- 5.4 The regulated gambling industry in Nova Scotia includes many government stakeholders, including the Nova Scotia Provincial Lotteries and Casino Corporation, the Department of Health and Wellness, health authorities, the Alcohol and Gaming Division of Service Nova Scotia, and the Office of Aboriginal Affairs. Each of these plays a role in the management of gambling. Stakeholders can have competing mandates. For example; generating revenue through regulated gambling can lead to gambling-related harms from some people. The roles and responsibilities of each have been outlined in the following table.



Stakeholder	Role
Nova Scotia Provincial Lotteries and Casino Corporation	Management of the regulated gambling industry within the province in a socially responsible manner
Department of Health and Wellness	Setting provincial direction for addiction prevention and treatment, including gambling
Health authorities	Delivery of addiction prevention and treatment programming, including gambling
Alcohol and Gaming Division (Service Nova Scotia)	Responsible for licensing and regulation of all gambling activity conducted by the provincial government
Office of Aboriginal Affairs	Responsible for the negotiation and administration of First Nations gaming agreements

- 5.5 The Nova Scotia Provincial Lotteries and Casino Corporation is a crown corporation responsible for the management of regulated gambling in Nova Scotia. Through its operators, Atlantic Lottery Corporation and the Great Canadian Gaming Corporation (operates the casinos in the province), the Provincial Lotteries and Casino Corporation manages ticket and video lottery schemes within the province, along with the operation of casinos in Halifax and Sydney. During 2013-14, the Corporation spent approximately \$1 million on responsible gambling programs and initiatives to provide gamblers with the information they need to make informed decisions about their gambling. The Corporation also contributed approximately \$4.5 million annually to the Department of Health and Wellness to support gambling prevention and treatment.
- 5.6 The Department of Health and Wellness is responsible for setting provincial direction in addiction prevention and treatment, including gambling, and managing the problem gambling help line. For 2013-14, approximately \$3.2 million was spent on gambling prevention and treatment. Health authorities are responsible for the delivery of problem gambling prevention and treatment services. Treatment services may include community-based services, such as group therapy or one-on-one counselling; or inpatient treatment services. Treatment services are usually not gambling-specific but intended to treat addictions in general. The treatment focus will be based on the client's addictions.
- 5.7 The province, through the Office of Aboriginal Affairs, signed agreements with 13 First Nations Bands allowing each Band to manage gambling on its reserve. This is mostly through video lottery terminals. Each Band is entitled to keep all of the revenues generated to be used for community and economic development.



#### Why Did We Do This Audit

5.8 In 2007, almost 25 per cent of Nova Scotia adults reported being personally aware of at least one person they believed to be experiencing problems controlling their gambling. Approximately 7,000 Nova Scotians experienced adverse consequences related to gambling while another 12,000 were at a moderate risk level for problem gambling, although negative consequences may or may not have been experienced. These numbers do not consider the negative impacts of problem gamblers on friends, families and communities. It is important for government to be effective in the delivery of services focused on results in the prevention and treatment of problem gambling.

#### Audit Objectives and Scope

- 5.9 During 2014-15, we conducted a performance audit to determine whether the province is effectively managing its responsible gambling and problem gambling strategies. The audit was conducted in accordance with sections 18 and 21 of the Auditor General Act, and auditing standards of CPA Canada.
- 5.10 The objectives of the audit were to determine whether:
  - the Nova Scotia Provincial Lotteries and Casino Corporation is effectively managing responsible gambling in a manner that reduces the risks of gambling-related harm, including adequate oversight of Atlantic Lottery Corporation and the Great Canadian Gaming Corporation, and evaluating the results of responsible gambling programs;
  - the Department of Health and Wellness is providing adequate oversight of problem gambling prevention and treatment services delivered by health authorities and third party service providers;
  - the Department of Health and Wellness, health authorities and the Nova Scotia Provincial Lotteries and Casino Corporation are communicating to the public information on responsible gambling and services available for the prevention and treatment of problem gambling;
  - First Nations gambling is monitored to ensure it is conducted in a socially responsible manner and in compliance with the terms and conditions of First Nations gaming agreements; and
  - there is a coordinated approach among all parties involved in the promotion of responsible gambling and the prevention and treatment of problem gambling.

- 5.11 Audit criteria were developed specifically for this engagement and were discussed with, and accepted as appropriate by, management of the Nova Scotia Provincial Lotteries and Casino Corporation; the Department of Health and Wellness; the Office of Aboriginal Affairs; Capital Health; South West Health; and Cape Breton District Health Authority.
- 5.12 Our audit approach included reviewing relevant programs, standards and agreements, and testing compliance with applicable processes. We also conducted interviews with management and staff at the Nova Scotia Provincial Lotteries and Casino Corporation, various government departments, health authorities, and select First Nations Bands. Our audit period was April 1, 2012 to August 31, 2014. Our audit did not include the delivery of problem gambling prevention and treatment programs at health authorities but focussed on the Department of Health and Wellness' oversight of this work. Our work related to First Nations gaming agreements was limited to an examination of how government ensures compliance with agreements and whether gambling on First Nations reserves is monitored to ensure it is conducted in a socially responsible manner. Our work did not include testing at First Nations gambling operators or their records. In addition, the audit did not address the moral or ethical considerations surrounding public policy decisions to have legalized gambling within Nova Scotia.

#### Significant Audit Observations

### Monitoring and Oversight of Problem Gambling Prevention and Treatment Services

#### Conclusions and summary of observations

The Department of Health and Wellness is not adequately monitoring gambling prevention and treatment in health authorities. In 2008, the Department began drafting revised addiction prevention standards but these have not been approved and implemented. These standards would guide the work within health authorities in such areas as reducing the demand for gambling or minimizing the harms. In addition, the Department does limited monitoring of health authorities' prevention work. Treatment standards for those experiencing gambling problems have been established, but Health and Wellness does not monitor health authorities to ensure the treatment provided meets the requirements outlined in the standards. There is also a lack of current provincial data on the number of people experiencing gambling problems, with the most recent information dating to 2007.

5.13 *Background* – The Department of Health and Wellness is responsible for setting provincial direction in addiction prevention and treatment, while district health authorities are responsible for delivering prevention and



treatment services. Under section 60 (c) of the former Health Authorities Act, the Department is responsible for monitoring, measuring and evaluating the quality, accessibility and comprehensiveness of services delivered within the health authorities.

Health and Wellness monitoring of gambling prevention and treatment services not adequate

- 5.14 *Prevention standards* Prevention standards exist, but the Department of Health and Wellness does limited monitoring of gambling prevention work at health authorities. In 2008, the Department began developing updated addiction standards for prevention, health promotion and population health. The goal of these standards was to reduce and prevent the harms associated with substance abuse and gambling. As of March 2015, these have not been approved and implemented. Prevention standards focus on the following areas.
  - Supply reduction strategies such as policy changes limiting access to gambling venues
  - Demand reduction strategies such as school-based programs focusing on the risks related to gambling
  - Harm reduction strategies such as providing information in casinos on how an individual experiencing gambling problems can receive help
- 5.15 Treatment standards Treatment for people experiencing gambling problems may include community-based services, such as group therapy and one-on-one counselling, or inpatient treatment services. Standards have been established for both treatment options. While the standards for community-based services include some gambling specific standards, generally, treatment standards are focused on overall addictions rather than a particular area. The majority of individuals undergoing treatment for gambling problems do so through community-based programming; accordingly we focused our audit efforts in this area rather than inpatient services.
- 5.16 Updated treatment standards for community-based services were implemented in April 2013 and include standards related to accessibility of services, retention of clients, and treatment outcomes. Specific examples of standards include the following:
  - 90 percent of general priority clients will be offered services that begin within 15 business days
  - 60 percent of clients attending community-based services will have at least three clinical sessions and 75 percent of clients will report a reduction in gambling-related harms at program completion



- 5.17 Department management told us that district health authorities are not expected to report on compliance with the updated standards until June 2015; however, not all standards will be monitored. For example, of the five standards specific to problem gambling, only one will be monitored by the Department. Health and Wellness staff told us the current addiction services information system does not have the ability to report on all standards; only those that can be reported will be monitored. The Department is developing a new information system which may allow reporting of additional standards. Certain standards can only be monitored through compliance reviews of patient files and currently, Health and Wellness does not complete compliance reviews. Unless a process is developed and implemented to monitor all community-based treatment standards, the Department will not be able to determine whether people experiencing gambling problems are receiving the help they need.
- 5.18 Concurrent disorder treatment standards Concurrent disorders refers to the existence of mental health disorders along with addiction problems. In 2012, the Department of Health and Wellness developed standards for the treatment of concurrent disorders. Gambling was identified as an important issue that required additional work, with the possibility of the development of gambling-specific standards. Work to date has focused on improving staff knowledge and competencies around concurrent disorders. This includes specific information on gambling and predictors for concurrent disorders associated with gambling. A screening tool is used to assist in identifying clients with gambling problems. While some work has been completed, the Department has not yet determined if gambling-specific standards are required.
- 5.19 The province's 2011 Responsible Gaming Strategy included a goal to enhance the prevention and treatment of problem gambling. The Department of Health and Wellness has identified implementation of the new prevention standards as a step towards achieving this goal. However, the updated standards have not been implemented and there is inadequate monitoring of health authorities' work. Current standards and adequate monitoring are necessary to ensure individuals experiencing gambling problems are receiving the assistance they require.

#### **Recommendation 5.1**

The Department of Health and Wellness should approve and implement its addictions standards and determine whether gambling-specific standards should be included in the concurrent disorders standards. Processes should also be developed and implemented to monitor gambling prevention and treatment work at health authorities, including measuring compliance with all standards.



**Department of Health and Wellness Response**: DHW agrees with the recommendation and intends to implement. In particular, the Standards for Prevention, Health Promotion, and Population Health will be approved and implemented in 2015-2016.

DHW will continue to support the implementation of the Concurrent Disorder Treatment Standards (2012) which includes training staff to undertake screening and provide clinical intervention for gambling. The decision regarding the need for the development of gambling specific sub-section within the Concurrent Disorders Treatment Standards will be made in Fiscal 2015/16.

DHW will continue its work, initiated in 2012, on the development and launching of the Mental Health and Addiction Services Information System which will support the monitoring of health promotion, prevention and treatment work through the Nova Scotia Health Authority and IWK, including the measuring of compliance with selected standards. Target launch for the new system is Fiscal 2016/17.

Health and Wellness does not have current gambling frequency data

- 5.20 *Gambling data* Health authorities we met with indicated concerns with the lack of current data on gambling in the province. The most recent gambling surveillance data is from 2007. A draft study was completed for 2013. The draft report was submitted to Health and Wellness in July 2014, but an external peer review identified issues with how the study measured instances of gambling-related harm. Additional work was required, but as of December 31, 2014, this had not been completed.
- 5.21 In addition, a youth gambling prevalence study was completed in 2011 but the Department of Health and Wellness did not publicize the results due to concerns around the sample sizes used and the accuracy of specific conclusions. The Department does complete surveys of Nova Scotia junior and senior high school students about their experiences with substance use and gambling. The most recent study was completed in 2012 but does not provide the same level of detail as provided in the 2011 prevalence study. Up-to-date gambling research and surveillance data are necessary to identify specific risk groups, formulate gambling policy, develop standards and best practices, and assess the effectiveness of prevention and treatment efforts.

#### **Recommendation 5.2**

The Department of Health and Wellness should obtain accurate and current gambling prevalence rates for both youths and adults and use this information to guide and evaluate gambling prevention and treatment work.

**Department of Health and Wellness Response:** DHW agrees with this recommendation and intends to implement. DHW is preparing the 2011 Nova



Scotia Adolescent Gambling Surveillance Technical Report and the 2013 Nova Scotia Adult Gambling Information Collection Project for release in 2015/16.

The Department is in step with other jurisdictions as far as the application of methodological practices in measuring gambling harms and is confident in the accuracy of published data. DHW applies rigor to its surveillance; involving the Nova Scotia Health Research Foundation to facilitate peer review of methodology and reporting. This practice will continue.

5.22 Cross-departmental committees – The regulated gambling industry impacts numerous stakeholders in the provincial government, each with its own mandate. The 2011 Responsible Gambling Strategy established a Deputy Minister's Advisory Committee on Gambling which includes the deputy ministers from the Departments of Health and Wellness; Communities, Culture and Heritage; Finance; Agriculture; Aboriginal Affairs; and Service Nova Scotia. A senior officials committee was also established, including management from these departments, as well as the Nova Scotia Provincial Lotteries and Casino Corporation. These committees provide an opportunity for members to discuss gambling from a cross-departmental perspective. Staff interviewed indicated these committees have improved communication and collaboration among departments.

#### Problem Gambling Help Line

#### Conclusions and summary of observations

The Department of Health and Wellness is not adequately managing the problem gambling help line. Instances were identified in which calls to the help line were not answered in a timely manner and Health and Wellness did not take timely action to address the issues with the service provider. As well, the Department does not assess the level and quality of service provided to callers. Although it has the authority under the service provider agreement, the Department has not audited the help line or monitored calls to ensure an appropriate level of service is provided and the Department is receiving the services it is paying for.

5.23 Background – The problem gambling help line is a toll-free number (1-888-347-8888) available 24 hours a day, seven days a week to provide telephone counselling to people experiencing gambling problems. It is managed by the Department of Health and Wellness, through a third-party service provider, at a cost of approximately \$400,000 per year. During 2013-14, there were approximately 445 calls (2012-13: 524 calls) to the help line. In March 2015, the help line was renamed the Gambling Support Network.



Health and Wellness monitoring of the problem gambling help line not adequate

- 5.24 Service standards A help line operator is to answer 80 percent of all calls within 20 seconds. We reviewed six monthly reports and noted one month for which this standard was not met. Of 50 calls during that month, 12 (24 per cent) were not answered within the 20-second standard. Five of these calls took over three minutes to answer, including one which was not answered for almost 12 minutes. There is no documentation to confirm whether this was addressed with the operator. When service standards are not met, there is a risk that callers to the problem gambling help line are not receiving the assistance they require. Callers experiencing long waits may hang up without reaching a therapist and may not call the help line again. Issues need to be identified and discussed in a timely manner to implement the necessary changes and ensure the Department is receiving the services it is paying for.
- 5.25 Service interruptions Two of the six monthly reports we reviewed identified service interruptions to the problem gambling help line. In one instance, there was a service interruption from July 19 to July 26, 2012 during which 34 callers were not able to reach the help line. While the issues were addressed, and processes established to identify service interruptions in the future, it is important that the Department of Health and Wellness continue to monitor the help line to ensure reliable service to assist callers.
- 5.26 *Audits and call monitoring* The Department of Health and Wellness has the authority to audit the service provider's records and listen to calls to the problem gambling help line. However, during the audit period, no audits were conducted. Department management told us that Health and Wellness staff listened to help line calls on one occasion but there is no documentation of the results. Audits and call monitoring are important for the Department to ensure the service provider is meeting its requirements, especially given known instances when standards were not met and service interruptions were experienced.

#### **Recommendation 5.3**

The Department of Health and Wellness should ensure the gambling support network is meeting the needs of Nova Scotians. This should include monitoring the service provider to ensure callers are getting the help they need and the Department is receiving the services it is paying for.

**Department of Health and Wellness Response:** DHW agrees with the recommendation and intends to implement. In 2014, DHW entered into a new Telecare contract which includes a number of measures that will strengthen the services provided to Nova Scotians harmed by gambling. In 2015/16, the department will commence a process to evaluate service impact on clients as well as develop and implement a schedule of regular auditing.



#### Responsible Gambling

Conclusions and summary of observations

The Nova Scotia Provincial Lotteries and Casino Corporation's responsible gambling programs and initiatives are consistent with a responsible gambling framework established by an external responsible gaming group. These programs and initiatives communicate information so gamblers can make informed choices about their play. However, the decision to cancel the My-Play system and rely on the existing responsible gambling programming was not included in a list of options assessed by an independent panel of responsible gambling experts. We also found that proposals under the Responsible Gambling Assessment Program are not always reviewed by the appropriate staff or assessed against the required criteria.

- 5.27 *Background* The Nova Scotia Provincial Lotteries and Casino Corporation is responsible for leading an economically sustainable and socially responsible, regulated gambling industry in Nova Scotia. The Corporation generates revenues through ticket and video lottery schemes delivered by Atlantic Lottery Corporation and casinos in Halifax and Sydney operated by the Great Canadian Gaming Corporation.
- 5.28 *Responsible gambling programs* The Nova Scotia Provincial Lotteries and Casino Corporation administers various programs and initiatives to communicate responsible gambling messages, with the intention of ensuring those that choose to gamble have sufficient information to make informed decisions. These include Responsible Gambling Awareness Week, a responsible gambling website, and responsible gambling resource centres at both casinos.

Responsible gambling programming consistent with externally-established framework

- 5.29 *Responsible gambling framework* The Nova Scotia Provincial Lotteries and Casino Corporation's responsible gambling programming is consistent with a framework established by the Responsible Gambling Council, an independent, non-profit organization dedicated to reducing the incidence of problem gambling. The framework outlines the information to communicate to gamblers to encourage responsible play, along with methods for disseminating this information.
- 5.30 Responsible gambling programs are focused on gamblers in general and not specific groups at risk for gambling problems. In the past, the Corporation offered specific programming targeted at high school and university students under age 19. However, the province's 2011 Responsible Gambling Strategy clarified that responsibility for youth gambling prevention rests with the Department of Health and Wellness; the programs offered by the Corporation



were discontinued. As previously noted, our audit found that the Department of Health and Wellness does not adequately monitor the prevention work at health authorities. During our fieldwork, a new initiative began which focusses on youth gambling prevention; however it was ongoing when this chapter was written and we have not audited this project.

- 5.31 Nova Scotia Provincial Lotteries and Casino Corporation did not subject all options for the replacement of My-Play to the same responsible gambling review
- 5.32 *Termination of My-Play* My-Play was a mandatory system installed on all video lottery terminals or VLTs in the province. It was intended to provide players with tools to promote responsible gambling. However, after implementation, the Nova Scotia Provincial Lotteries and Casino Corporation found that it was not used as intended by VLT users. An independent panel of experts examined five options to replace My-Play from a responsible gambling perspective. All of these options included a replacement for My-Play. Ultimately, in September 2014, the system was cancelled. Although the Corporation considered responsible gambling considerations, the impact on problem gamblers, and the costs of the My-Play system before it was cancelled, the expert panel did not consider the impact of cancelling the system without implementing another alternative. While the decision to remove My-Play may have been a valid one, a consistent process was not used to assess all options for the removal or replacement of the system.
- 5.33 *Responsible gambling assessment program* The responsible gambling assessment program is intended to consider responsible gambling in decisions regarding gambling products and promotions. New games and promotions or changes to existing games and promotions are grouped into one of three categories, based on the impact to the Nova Scotia gambling industry.
  - Level 1 (low risk) assessments may include changes to online or point of sale promotions, or changes in scratch'n win ticket themes.
  - Level 2 (moderate risk) assessments may include new video lottery terminal games, or slot machine games or promotions that have a mass media element.
  - Level 3 (high risk) assessments may include new products, initiatives or innovations in the Nova Scotia gambling industry.
- 5.34 We selected a sample of 30 assessments to test compliance with program policies. For two of 30 samples, the checklist assessing the initiative against program criteria was not completed. It includes considerations such as compliance with age of majority guidelines and advertising standards.



Without this documentation, there is no evidence to support that responsible gambling was appropriately considered. Each of these sample items related to low risk assessments and the required checklists were subsequently completed by the Corporation. For an additional ten sample items, the assessment was not reviewed by all required Nova Scotia Provincial Lotteries and Casino Corporation staff prior to approval. For one of these samples, the assessment was missing two of three required reviewers. While the approval process for each of these assessments was not followed, each was still reviewed by at least one of the required managers. Complete assessments and key personnel approvals are important to ensuring that responsible gaming is appropriately considered.

5.35 Oversight of operators – Atlantic Lottery Corporation and Great Canadian Gaming Corporation operate video and ticket lotteries and casinos within the province on behalf of the Nova Scotia Provincial Lotteries and Casino Corporation. The Corporation provides oversight of each operator, including monitoring of responsible gambling training delivered by the operators to ticket and video lottery retailers and casino employees on behalf of the Corporation. The Nova Scotia Provincial Lotteries and Casino Corporation reviews and approves annual training and receives regular updates from the operators confirming the required retailers and casino staff have taken the training.

# Evaluation of Responsible Gambling Programs and Prevention and Treatment Services

Conclusions and summary of observations

The Nova Scotia Provincial Lotteries and Casino Corporation does not have support for the targets used to evaluate the effectiveness of its responsible gambling programs. Targets are based on past results, and in one instance, when a target was not met, it was adjusted downwards for subsequent years. In addition, the Department of Health and Wellness is not adequately evaluating gambling prevention and treatment work, including the impact of the problem gambling help line on clients. Health and Wellness set goals for gambling prevention and treatment but these do not represent significant improvements from status quo. Progress towards goals was not assessed due to a lack of current gambling prevalence information. In addition, the Department does not know if treatment services delivered at health authorities are reducing gambling-related harms for clients.

Nova Scotia Provincial Lotteries and Casino Corporation does not have support for targets

5.36 *Evaluation of responsible gambling initiatives* – One of the goals of the Nova Scotia Provincial Lotteries and Casino Corporation is to continue to deliver



effective responsible gambling programs so that players can continue to make informed decisions. This is partially assessed by the percentage of people surveyed who can name two responsible gambling behaviours. The Corporation also surveys the public to determine how many people recall seeing or hearing something about responsible gambling. Both measures are assessed during the annual Responsible Gambling Awareness Week.

- 5.37 The Corporation's target for the percentage of people surveyed who can name two responsible gambling behaviours is not clear. For the 2012-13 fiscal year, some documents stated a target of 35 percent, another stated a target of 20 percent. Actual results for the year were 22 percent. Management was not aware of these inconsistencies and told us they considered 20 percent as the target. In 2013-14, the target was 20 percent and actual results were 25 percent. Corporation management told us that a target of 20 percent is used because actual results in previous years have been around this level and a similar level of education and awareness campaign were used during this period. In 2012-13 and 2013-14, a target of 60 percent was established for the percentage of people who recalled hearing or seeing something about responsible gambling. Actual results were 45 percent and 39 percent respectively. The target was lowered to 45 percent for 2014-15.
- 5.38 The Nova Scotia Provincial Lotteries and Casino Corporation indicated these results can be partially attributed to the lack of sustained public awareness campaigns, other than Responsible Gambling Awareness Week, and the discontinuation of their youth prevention programming after clarification from government that the Department of Health and Wellness has this responsibility. When these initiatives were discontinued Corporation management decided not to undertake new awareness campaigns.
- 5.39 Responsible gambling messaging is reaching less than 50 percent of the Nova Scotians surveyed. We are unable to comment on the appropriateness of the target used as it was set based on the results of previous evaluations. Management were not able to provide support for the initial target or for subsequently lowering the target for the number of people who recalled seeing or hearing something about responsible gambling.

#### **Recommendation 5.4**

The Nova Scotia Provincial Lotteries and Casino Corporation should determine appropriate targets for its responsible gambling programming and establish strategies to achieve these targets.

**Nova Scotia Provincial Lotteries and Casino Corporation Response:** NSPLCC believes it does have a process in place to determine appropriate performance metrics and targets. NSPLCC does agree that a review of the process is warranted and will engage a third party expert specializing in program evaluations and the



identification of processes for setting performance metrics and targets that are based on standards of professional practices and principles. In 2015-16, it is expected the expert will assist NSPLCC in the following areas:

- Complete a review of NSPLCC's responsible gambling program evaluation processes;
- Assist in identifying improvements to the process for setting performance metrics and targets specific to NSPLCC's responsible gambling programs; and,
- Assist in identifying updated performance metrics and targets for NSPLCC's responsible gambling programs.

Health and Wellness is not monitoring the outcomes of gambling prevention and treatment services

- 5.40 *Evaluation of problem gambling prevention and treatment services* For 2012-13 and 2013-14, the Department of Health and Wellness set the following goals.
  - Increase the number of adults experiencing gambling problems that seek professional treatment services from 7 percent (determined in 2007) to 10 percent by 2015
  - Decrease the number of adolescents between the ages of 13 and 18 years old who are engaged in organized forms of gambling from 54 percent (determined in 2011) to 50 percent by 2015
- 5.41 The baseline established for adults seeking treatment services is not consistent with most up-to-date information available to the Department of Health and Wellness. The 2007 provincial gambling surveillance report noted approximately 10 percent of people experiencing gambling problems seek assistance. This should have been used as the baseline. Achieving the goal of 10 percent would mean there has been no change in the percentage of people accessing treatment services. Health and Wellness indicated they were aware of this error since 2012-13 but it was not corrected in subsequent years. To be effective goals need to be based on accurate information.
- 5.42 Neither of the goals established by the Department of Health and Wellness represent significant improvements. In addition, the Department was unable to assess progress towards these goals due to a lack of updated gambling surveillance data. These issues call into question the value of the goals and whether the Department is serious about addressing the issues. Without meaningful goals and accurate gambling surveillance data generated on a regular basis, the Department will be unable to appropriately assess the effectiveness of gambling prevention and treatment work.
- 5.43 Health and Wellness management told us that these goals will no longer be used. They indicated the Department plans to focus on strategic and system-level issues, while the establishment of disease-specific and condition-



specific goals, such as for gambling prevention and treatment, would be left to each program area within the Department. Management responsible for gambling prevention and treatment indicated there are plans to develop gambling-specific goals in the future.

- 5.44 Additionally, the Department of Health and Wellness is not monitoring the treatment outcomes at health authorities. Treatment standards require health authorities to measure client satisfaction with the services and measure the reduction in gambling-related harms. This would provide valuable information on treatment outcomes, but health authorities are not required to report these results to the Department. Furthermore, Health and Wellness management does not know if health authorities are monitoring their results. Without outcome monitoring, it is impossible to know the effectiveness of gambling treatment services.
- 5.45 *Evaluation of the problem gambling help line* The operator of the problem gambling help line reports changes in the level of harm being experienced by gamblers between their first and last treatment session. While the results indicated clients are experiencing improvement, the average scores still fall within the problem gambling category. While we recognize treatment may not result in problem gamblers no longer gambling, the Department of Health and Wellness has not identified the possible causes of these results or determined ways to improve the service.
- 5.46 The service provider is also required to survey those using the help line three months after treatment is complete but these surveys have not been conducted. Health and Wellness has not contacted clients to assess their level of satisfaction with the service or the impact of the treatment on their gambling problems.

#### **Recommendation 5.5**

The Department of Health and Wellness should establish goals to determine if gambling prevention and treatment efforts are effectively reducing the number of Nova Scotians experiencing gambling harms, including those receiving treatment through the Gambling Support Network. The Department should evaluate progress against goals on an annual basis.

**Department of Health and Wellness Response:** DHW agrees with this recommendation and intends to implement. As part of the Accountability Framework for the health system, DHW will develop mental health and addiction specific prevention and treatment indicators. The indicators will contribute to meeting Government's strategic goals. DHW will evaluate progress on achieving the indicators annually, appreciating that there may be limited significant annual change in progress on the strategic goals given the complexity of the underlying structural contributors to poor health.

Current initiatives to assist in evaluating progress:

- Development and implementation of the Mental Health and Addictions Services Information System;
- Development and implementation of treatment outcome monitoring initiatives;
- Completion and public release of the gambling surveillance results undertaken in 2010 and 2013; and,
- Development and implementation of a comprehensive monitoring and surveillance system which will provide the department with a more accurate and up-to-date understanding of the incidence of at-risk and problem gambling and associated harms.

#### Communications

#### Conclusions and summary of observations

The Department of Health and Wellness and health authorities did not have strategies to communicate gambling prevention and treatment services during the audit period. Health authorities' communication efforts are focused on the promotion of overall addiction services and do not always include gamblingspecific messaging. Despite knowing that very few people experiencing gamblingrelated harms reach out to treatment services, health authorities do not evaluate their communications with the public, nor have they determined the reasons for the low number of people accessing services. The Department of Health and Wellness implemented a strategy to improve the marketing of the problem gambling help line but this took the Department over three years to complete.

5.47 *Communication strategies* – The former district health authorities of Capital Health and Southwest Health did not have communication strategies for the promotion of gambling prevention and treatment services during our audit period. After we completed our audit fieldwork, the former Cape Breton District Health Authority developed a communication strategy for addiction services, which includes gambling. The strategy outlined how information on addictions services would be communicated using tools such as social media, radio, television and newspaper advertising, along with marketing materials, such as brochures and community presentations. This also included the development of an addiction services website with a gambling-specific section.

Over three years to complete and implement improvements in marketing problem gambling help line

5.48 *Communication of the problem gambling help line* – During 2013-14, there were 445 calls to the help line (2012-13: 524 calls). This is very low relative to the number of people in the province believed to be experiencing



gambling-related harms. During our audit period, the Department of Health and Wellness did not have a communication strategy to promote the problem gambling help line. In 2011, the Department began working to improve help line marketing but this initiative was not completed until March 2015, at which time the help line was renamed the gambling support network.

- 5.49 As part of this initiative, the Department of Health and Wellness held focus groups to determine why people were not utilizing the problem gambling help line. The reasons ranged from shame and denial, to not understanding the services provided. Updated marketing includes television and online ads, and the development of a new website that provides information on the service, as well as resources for users. While this is a positive step in the promotion of the service, it took over three years to complete.
- 5.50 *District health authority communications* Health authorities use a variety of methods to communicate addiction services information to the public, including websites, brochures and social media such as Facebook, Twitter and blogs. However, gambling-specific messaging is not always included.
- 5.51 Statistics from health authorities indicate very few people experiencing gambling-related harms are accessing treatment services. While each district health authority we audited suggested reasons for this, none had completed an evaluation of communications or a formal assessment of why people did not access treatment services during our audit period. Without this information, it is difficult to know how to increase the number of people utilizing treatment services. The Cape Breton District Health Authority's new communication strategy included tools for evaluating how many people are reached but since this was only implemented in the fall of 2014, all work has not been fully completed.

#### **Recommendation 5.6**

The Department of Health and Wellness should work with the health authorities to determine why so few people experiencing gambling harms are accessing treatment services. The results of this work should be used to develop strategies for improvement.

**Department of Health and Wellness Response:** DHW agrees with this recommendation and intends to implement. The Department will invite the Nova Scotia Provincial Lotteries and Casino Corporation, the Nova Scotia Health Authority, IWK, interested non-governmental organizations, and First Nations communities to co-create and implement a comprehensive plan to address gaps within the system in an effort to better support Nova Scotians at any level of risk for gambling related harm. This plan will recognize that not all Nova Scotians at-risk for gambling related harm will desire, or require, formal treatment.



#### First Nations Gaming Agreements

#### Conclusions and summary observations

The province did not include responsible gambling requirements in the majority of First Nations gaming agreements we examined. Additionally, the agreements have poorly-defined roles and responsibilities. This is likely due to the province not including all relevant stakeholders in negotiations. As a result, gambling on First Nations reserves are not monitored to ensure compliance with provincial laws. Additionally, there are no processes to ensure compliance with the terms and conditions of First Nations gaming agreements.

- 5.52 Background The province has signed agreements with 13 First Nation Bands across Nova Scotia granting authority to each Band to operate gambling on reserve land and retain 100 percent of the net revenues. Total First Nations gross revenues from video lottery terminals in 2013-14 were approximately \$41 million. The province is currently renegotiating First Nations gaming agreements as the majority of agreements expire in 2015 or 2016.
- 5.53 Development of First Nations gaming agreements We reviewed four First Nations gaming agreements and determined roles and responsibilities for monitoring compliance with the agreements and provincial gambling laws are poorly defined. This has contributed to a lack of enforcement of the terms and conditions of the agreements. Furthermore, Service Nova Scotia's Alcohol and Gaming division and the Nova Scotia Provincial Lotteries and Casino Corporation indicated limited involvement in developing the agreements.
- 5.54 Each of the four agreements we reviewed stated that the Alcohol and Gaming Division would be responsible for enforcing provincial gambling laws and regulations on reserves. For example, Nova Scotia's VLT Regulations stipulate age and advertising restrictions, along with consequences when regulations are not followed. That division was also to assist each band with the development of a protocol for monitoring compliance with provincial laws and regulations, along with the terms and conditions of the agreement. However, management at the Alcohol and Gaming Division indicated they were not involved in the development of the agreements. Management believes they have no legislative authority on First Nations reserves under the current agreements. As a result, gambling on First Nations reserves is not monitored. For non-First Nations establishments, Alcohol and Gaming issue registration certificates to bar owners. The Division can revoke the registration certificate if gambling is not conducted in accordance with provincial laws. First Nations VLT operators do not need registration certificates and thus Alcohol and Gaming do not have a mechanism to enforce compliance.



5.55 We also noted the First Nations gaming agreements fail to identify which provincial government department is responsible for monitoring compliance with the agreements.

First Nations Bands not required to participate in responsible gambling programming

- 5.56 *Responsible gambling* Three of four First Nations gaming agreements reviewed did not include requirements around the promotion of responsible gambling on First Nations reserves. Each of these agreements were developed in 2003. The remaining agreement was signed in 2011 and stated the Band is to participate in any responsible gambling programs and initiatives administered by the Nova Scotia Provincial Lotteries and Casino Corporation; the Corporation is to include the Band in any such programs or initiatives. This would include initiatives such as retailer training and responsible gambling signage at gambling venues. However, due to ongoing legal issues with other aspects of the agreement, this has not been done.
- 5.57 Video lottery terminals on First Nations reserve land are the same as terminals located at non-First Nations sites across the province, and have the same built-in responsible gambling features, such pop-up reminders and mandatory cash-in and cash-out features. However, Bands are not required to implement the same responsible gambling programming required at non-First Nations sites.
- 5.58 It is important for gamblers to have access to information to make informed decisions about their play, along with information on where they can seek assistance for gambling problems. Since First Nations Bands are not required to follow the same responsible gambling programming in place at non-First Nations gambling venues, there is a risk players may not have access to this information.

#### **Recommendation 5.7**

The province should work with First Nations Bands to see the objectives of responsible gambling are reflected in the operation of First Nations gambling venues. In addition, the negotiation of the new First Nations gaming agreements should include all relevant provincial government stakeholders and clearly outline a process to monitor compliance with agreement terms and conditions. This should include clarifying the role of Service Nova Scotia's Alcohol and Gambling Division in monitoring compliance with provincial gambling laws on First Nations reserves.

**Aboriginal Affairs Response:** The Province accepts this recommendation and will work with First Nations on responsible gaming programs on reserve. As work continues on the negotiation of new First Nations gaming agreements, the Province will work on governance of the file and clarity of roles and responsibilities to ensure oversight and compliance with provincial gaming laws.



#### Department of Health and Wellness: Additional Comments

At risk and problem gambling is a complex issue and reducing gambling-related harms requires a comprehensive approach. DHW, in consultation/collaboration with its partners, will consider a variety of options such as: legislative and regulatory possibilities; consumer awareness/education; services and supports for individuals experiencing harm; monitoring and surveillance; and, modifications to the gambling environment to protect the consumer.

## Nova Scotia Provincial Lotteries & Casino Corporation: Additional Comments

NSPLCC is responsible for the conduct and management of the regulated gambling industry in the province, with the exception of First Nations and charitable gaming. NSPLCC is a Crown corporation governed by Part I of the Gaming Control Act and charged with leading an economically sustainable and socially responsible gaming industry for the benefit of Nova Scotians and their communities.

For NSPLCC, responsible gambling is about fostering an environment that promotes safer play and informed decisions. This means upholding high standards and providing a safe and entertaining player experience, delivering effective responsible gambling programs, assessing products and promotions and making information available to people so they can make informed decisions about their play.

NSPLCC would like to note that responsible gambling was a key consideration throughout the My-Play decision-making process. Several mandatory responsible gambling features are still available on VLTs in the province to assist players in managing their play.

In 2015-16, NSPLCC will address the OAG's recommendation as noted, and will conduct a bi-annual review of the Responsible Gambling Assessment Program. NSPLCC's priority is to ensure a responsible, accountable and sustainable approach to gambling.