

**Department of Health and Human Services (DHHS)
Advisory Committee for Problem Gambling
DRAFT Meeting Minutes
October 20, 2011**

Video Conference Locations

Nevada Department of Health and Human Services
4126 Technology Way, Suite 100
Carson City, NV

Division of Child and Family Services
4180 South Pecos, Suite 150
Las Vegas, NV

Committee Members Present

Krista Creelman
Connie Jones
Carol O'Hare, Vice Chair
Denise Quirk
Jessica Rohac
Jennifer Shatley
Dianne Springborn

Committee Members Absent

Bill Eadington, Chair
Greg Lee

Department of Health and Human Services (DHHS) Staff and Contractors Present

Mary Liveratti, DHHS Deputy Director for Programs
Laurie Olson, Chief, DHHS Grants Management Unit
Sheila Swartz, Auditor III, DHHS Grants Management Unit
Toni Cordova, Administrative Assistant III, DHHS Grants Management Unit
Barbara Setser, Administrative Assistant II, DHHS Grants Management Unit
Dr. Jeff Marotta, Problem Gambling Solutions
Dr. Bo Bernhard, University of Nevada, Las Vegas, International Gaming Institute
Tim Melnyk, UNLV Ph.D. graduate student

I. Call to Order

Carol O'Hare, Vice Chair

The meeting was called to order at 9:15 a.m.

II. Public Comment

None

III. Approval of April 29, 2010 Meeting Minutes Meetings

- A MOTION WAS MADE BY DENISE QUIRK TO APPROVE THE MINUTES WITH CHANGES NOTED REGARDING ATTENDANCE AT THE FEBRUARY 25, 2011, MEETING. THE MOTION WAS SECONDED BY CONNIE JONES, AND UNANIMOUSLY APPROVED.

Meeting dates for the Advisory Committee on Problem Gambling (ACPG) in 2012 were discussed and it was decided to meet on the third Thursday of the second month of each quarter. The following dates were scheduled: February 16, May 17, August 16, and November 15.

- A MOTION WAS MADE BY JENNIFER SHATLEY TO APPROVE THE MEETING DATES. THE MOTION WAS SECONDED BY JESSICA ROHAC, AND UNANIMOUSLY APPROVED

IV. Fiscal Report

Laurie Olson, GMU Chief

Reports on FY12 funding and Problem Gambling Service Breakouts were distributed. Laurie Olson reviewed the data and payout rates. Overall, grantees have drawn 17% of the available funds for FY12. The least paid to a treatment provider was 8% (with draws through August) and the most paid to a treatment provider was 28% (also drawn through August). She noted that the Salvation Army had not drawn any funds as yet.

Jennifer Shatley asked what would happen to the Salvation Army's remaining funds if the organization does not use their full allocation. Ms. Olson explained that at the mid-year point, if it appears they will not be able to continue providing these services, the remaining funds could be reallocated to other grantees that may need it. If the funds aren't needed, they will remain in the funding pool for use in the next fiscal year.

V. Treatment Strategic Plan Implementation Report

**Laurie Olson, Bo Bernhard,
and Jeff Marotta**

Ms. Olson reported that implementation of the treatment strategic plan has gone very well. The grantees are submitting their encounter data to UNLV on a very timely basis and the data has been very accurate and easy to understand. She did receive quite a few questions. Some pertained to interpretation of the strategic plan, but the majority of questions were of a technical nature regarding the transfer of client status, etc. Ms. Olson toured UNLV and Pathways the week before the ACPG meeting and was very impressed with the UNLV facility and gambling lab. She sees the need for another person to help out as a first point of contact for people asking to review their encounter data or requesting reports, and asked Dr. Bo Bernhard to submit a proposal to add another graduate student.

Dr. Bernhard expressed his gratitude to Dr. Jeff Marotta and to all the clinics for submitting their information and responding to requests in a timely manner. He reported that he and Dr. Marotta were in Boston for the National Council on Problem Gambling Conference, where he learned that a number of other states have large databases and are using very expensive software programs and staff teams. In comparison, the UNLV system is extremely cost effective and is working far better than had been anticipated. He agreed with Ms. Olson that adding another graduate student and creating a "first response team" to investigate immediate needs for the treatment providers would greatly improve system efficiency. He introduced Tim Melnyk, who joined the Ph.D. program this year after working in Manitoba as a regulator with the Gaming Control Commission, and stated that Mr. Melnyk is typical of the high caliber of people who are available at the university and at a very low rate.

Dr. Marotta commented on the first round of site visits that he conducted with all the grantees, at which time they discussed the transition experience and the rules and standards that were put in place. He acknowledged the grantees for their efforts to transition their programs to meet the new requirements. There were glitches, as to be expected, and they seemed to all have been worked out efficiently. In general, he was impressed with what he found during the site

visits. Very few questions came up, and he will add them all to a Frequently Asked Questions document.

Dr. Marotta reviewed the Treatment Strategic Plan Implementation Report, dated October 20, 2011, which was distributed to the committee. On the report, which was extracted from the strategic plan, Dr. Marotta had checked those activities that had been completed and made brief notations regarding the status of the others.

Included under Improvements to Domain 2, Information Management, were things that will be added down the road (e.g., survey grantees, monitor program performance, and define benchmarks). Still pending is developing the protocol for conducting site reviews. Dr. Marotta explained that site visits focus on technical assistance, providing two-way communication to better understand the needs of the grantees and help them interpret the strategic plan when it is unclear. Site reviews, on the other hand, examine whether programs are meeting the standards laid out in the strategic plan. Reviews include an audit of data to verify that reported activities are documented in the client file. Some reviews have taken place this year, though not as structured as they will be in FY13. It will be necessary to develop protocols and make it very transparent so providers know what to expect. He mentioned that during the site visits, and as questions came in, he has identified areas where adjustments to the program standards are needed. A system will need to be developed to address this.

Regarding Workforce Development, Domain 4, Dr. Marotta noted that due to the reduction in funding, the only thing the funds are supporting now is the cost of providing supervision to interns. The second bullet point (getting notification to grantees regarding training opportunities) is being achieved through the voluntary efforts of the Nevada Council on Problem Gambling (NCPG). Carol O'Hare of the NCPG agreed to monitor training opportunities offered in Nevada and online, and disperse that information to the providers. Ms. O'Hare encouraged the members to forward this type of information to her for dissemination. She has an email list of certified counselors, but would like to expand the list to include a broader group. She added that community events are posted on the website, and she would like to include training event information there as well.

Denise Quirk posed a question regarding Improvement Domain 2, Information Management, asking if that was in reference to the benchmarks that were set for treatment goals and how the funds are being used to provide treatment. Dr. Marotta clarified that it referred to the benchmarks defined in the strategic plan, where well-defined performance standards were set forth for access, retention, successful completion, client satisfaction, and long-term outcomes. The first three are being collected with intake and discharge data, but the client satisfaction needs work, and long-term outcomes are not currently being addressed. He commented on the valuable data that was collected during previous grant cycles, but noted that funds are not available for this activity at the present time. Ms. Quirk asked whether Dr. Bernhard could provide a rough outline of what it would cost to re-implement outcome research through UNLV.

VI. Plans for Upcoming Request for Applications

Laurie Olson

Ms. Olson outlined the Request for Applications (RFA) process for FY13. The RFA was expected to be published on or about January 13, which is also the target date for the Grants Management Unit's other competitive grants. FY13 will be a one-year grant cycle to sync up with the Legislature. The purpose is to be sure of the legislatively approved funding for both years of a two-year grant cycle instead of just the first year.

Ms. Olson said a decision had not yet been made regarding whether the RFA will be on online process or a paper process; there are advantages and drawbacks to both approaches. Outside reviewers, all experts in the field, will score the applications. The scored applications will then go to the ACPG for review. The ACPG will formulate recommendations at the May meeting, at which time the applicants will have an opportunity to make a presentation and answer questions.

Ms. Olson said the RFA will relate back to the Treatment Strategic Plan. For example, applicants may be asked how they will:

- Help the State meet its strategic plan goals;
- Handle aftercare;
- Help increase problem gambling services; and
- Handle the supervision of interns.

General questions regarding staff and treatment programs will also be included.

A question was raised as to whether the RFA would include any questions regarding targeted high-risk populations such as veterans. Ms. Rohac (of the United States Veterans Initiative) was asked whether the Veterans Administration had conducted any surveys regarding veterans with gambling problems in Nevada. She was not aware of any, but indicated that about 20% of her veterans have some degree of gambling problems. Ms. Quirk said that 50% of her gamblers are veterans and at least 80% of the veterans she comes in contact with have gambling issues.

Ms. Olson mentioned that, during the pre-meeting conference call, she and Ms. O'Hare had talked about encounter data and how to determine whether implementation of the strategic plan had (1) increased the number of people reached and (2) impacted their completion rate. She asked for suggestions for ways to successfully compare outcomes from year to year, adding that it is important to present good data to the Legislature.

VII. Public Comment

None

VIII. Announcements, Additional Business, and Adjournment

Carol O'Hare

- Ms. O'Hare provided an update concerning AB102, the bill the ACPG successfully supported in 2009 to get treatment diversions through the court system in Nevada. There has been some progress in the north with getting diversions, but in the first test

case in Nevada, the judge ruled that the law could not be implemented because the State had not implemented a gambling "court." She felt that to be a terrible misreading of the law, which set an unfortunate precedent on the books, and raises concerns on how future cases will be affected. Ms. O'Hare reported that Tony Cabott, who was the vice chair of the ACPG Legal Subcommittee, felt it was important to challenge that ruling, but the defendant took the sentence, went to jail, and did not appeal. Ms. O'Hare added that Judge Crawford, who also sat on the Legal Subcommittee, would be reviewing the implementation of the diversion law.

- Ms. Quirk asked if there was a way for the providers to coordinate their client follow-up questions. Dr. Bernhard replied that they could use the same questions that have been used over the past few years, and that he and Dr. Marotta had been thinking about ways to include more outcome evaluation.
- Ms. Olson announced that Barbara Setser, the GMU's administrative assistant in Las Vegas, was retiring. She thanked Barbara for her work with the ACPG. Ms. Olson said she expected to have a new person on board before the February 16th meeting.
- A MOTION WAS MADE BY CONNIE JONES, SECONDED BY JESSICA ROHAC, AND CARRIED UNANIMOUSLY TO ADJOURN THE MEETING.

The meeting concluded at 10:30 am.