

The Lord Grade of Yarmouth CBE  
Chair of the Select Committee on the Social and Economic Impact of the Gambling Industry  
House of Lords  
London  
SW1A 0PW

3 April 2020

By email: HLGAMBLINGINDUSTRY@parliament.uk

Dear Lord Grade,

**Re: GambleAware: our role in preventing gambling harms in England, Scotland and Wales**

I hope you and your colleagues are keeping well in these challenging times.

Following our attendance at the Committee evidence session on Tuesday 29<sup>th</sup> October, we are pleased to provide the following further information as requested.

### **Governance & organisational structure**

GambleAware is a wholly independent charity regulated by the Charity Commission for England and Wales, and the Scottish Charity Regulator (OSCR). Our charitable objectives are:

A) The prevention and treatment of gambling harms, understood as matters of health and well-being, for the benefit of the public in Great Britain, in particular for those who are most vulnerable; and,

B) Keeping people safe from gambling harms through the application of a public health model taking into account the following three levels of prevention: Primary – universal promotion of a safer environment; Secondary – selective intervention for those who may be ‘at risk’; and, Tertiary – direct support for those directly or indirectly affected by gambling disorder.

Guided by this public health model, we commission integrated prevention services on a national scale and in partnership with expert organisations and agencies, including the NHS, across three areas of activity:

- Commissioning the National Gambling Treatment Service;
- Public health campaigns & practical support to local services;
- Commissioning research & evaluation to improve knowledge of what works in prevention.

Currently, we have around £45 million of funding committed to these activities and a summary of the work we have commissioned can be accessed [here](#). We commission the National Gambling Helpline and are the primary commissioner of treatment services across England, Scotland and Wales. We are working with Citizens Advice, the Royal Society for Public Health and Parent Zone among others to deliver effective prevention activity, and we are funding research in over 30 British universities including five doctoral students. In total we are managing and monitoring around 50 grant agreements and service contracts.

A substantial element of our 'added-value' derives from our expertise, experience and knowledge allied to our ability to leverage extensive networks and relationships nationally and internationally, and to broker engagement to affect positive and sustainable change.

GambleAware is governed by a Board of Trustees, whose independence and extensive public health and NHS experience is essential in helping us to fulfil our role in commissioning effective prevention and treatment services, and our research programme.

Chaired by **Kate Lampard CBE**, who is lead non-executive on the Department of Health & Social Care Board and a trustee of the Esmée Fairbairn Foundation, the Board includes:

- **Saffron Cordery** - Director of Policy and Strategy and Deputy Chief Executive, NHS Providers
- **Professor Siân Griffiths OBE** - Chair of the Global Health Committee & Associate Non-Executive member of the Board of Public Health England (PHE)
- **Michelle Highman** - Chief Executive, The Money Charity
- **Professor Anthony Kessel** - Clinical Director at NHS England and NHS Improvement; Honorary Professor & Co-ordinator of the International Programme for Ethics, Public Health & Human Rights at the London School of Hygiene & Tropical Medicine
- **Rachel Pearce** - Regional Director Commissioning at NHS England South West
- **Paul Simpson** - Chief Finance Officer/Deputy Chief Executive, Surrey & Sussex Healthcare NHS Trust
- **Professor Marcantonio Spada** - Professor of Addictive Behaviours and Mental Health at London South Bank University

As of April 2020, GambleAware employs 23 full and part time staff. The Senior Management Team consists of six roles: Chief Executive Officer; Chief Finance and Corporate Affairs Officer (Interim); Director of Commissioning (Treatment Services); Director of Education; Director of Research & Evaluation; and, Director of Communications and Engagement. Further details about the management team are published on our website [here](#).

As discussed during the evidence session, we have expanded significantly over the last two years in response to a doubling of both funding and commissioning activity:

	2019-20	2018-19	2017-18	2016-17	2015-16
Income	£14,953,624	£18,441,553	£14,507,455	£8,621,499	£7,632,371
Expenditure	£18,400,000	£15,650,056	£8,299,321	£8,262,328	£6,350,697
Number of staff	23	13	9	7	6

Full details of our annual accounts are published via the Charity Commission and are available [here](#). Please note that the income and expenditure for the 12 months to 31 March 2020 are provisional and unaudited; the final accounts will not be published until January 2021.

## Funding agreements with treatment providers

In addition to the information above, I thought it would be helpful to address some of the issues raised during the Committee's session on the 10<sup>th</sup> March, attended by Anna Hemmings (GamCare) and Matthew Hickey (Gordon Moody Association).

Over the course of this inquiry, the Committee will have hopefully gained a sense of the strong commitment to collaborative working that exists throughout the National Gambling Treatment Service. Specific

mechanisms have been put in place to support and underpin this collaboration, and a key aspect of GambleAware's function as commissioner is to lead the development of those tools and processes.

The evidence that GambleAware has already submitted includes information about the work we have commissioned ViewItUK to undertake. ViewItUK expects to be in a position in the autumn to publish validated GB-wide activity data on gambling treatment through the National Gambling Treatment Service. This will allow partner agencies, the public, Parliament, and all stakeholders to better understand in detail the breadth and depth of the treatment that is provided.

Also, it may be helpful to know that GambleAware, the Gambling Commission and the Care Quality Commission (CQC) have agreed a programme of work to develop an inspection regime for gambling treatment service, which CQC is set to carry out. The development phase of this work is being disrupted by COVID-19, but we hope to make a formal announcement of how this will be undertaken as soon as possible. Independent inspection by the CQC will provide us, and all interested parties, with an authoritative assessment of the quality of services.

We also want to make clear that the relationship between provider and commissioner is a wholly collaborative one. It does not involve the former pleading for funding from the latter, as was perhaps suggested during the session (and which we do not feel represents either our aims or work in practice). Co-design runs throughout our work, with provider and commissioner contributing their respective perspectives and insights to initiatives to improve and develop gambling treatment.

The Committee also spent some time discussing the Grant Agreements that GambleAware has with treatment providers, and there seemed to be a concern these agreements are being used to enforce monopsony.

I want to reassure you that this is not the case. As an independent charity, GambleAware needs to be able to account for its expenditure. Trustees would be failing in their duty if GambleAware was giving money to a particular activity that was simultaneously being funded from another source, i.e. 'double-funded'.

Also, we are keen to ensure that the Grant Agreements do not stifle innovation, or additional investment. This is demonstrated, for example, in the funding from NHS England to support both the Problem Gambling Clinic based at Central & North West London NHS Foundation Trust and the NHS Northern Gambling Service being run by the Leeds and York Partnership NHS Foundation Trust, over and above the pre-existing, continuing funding from GambleAware.

GambleAware is committed to ensuring the success and expansion of the National Gambling Treatment Service and the prevention and research activity supporting it. This will require continued collaboration with treatment providers (alongside national health agencies, local authorities, and others), which continues to be at the heart of our approach.

I hope this is helpful in clarifying our governance and organisational structure, as well as our approach to working with treatment providers. If you have any further questions, please do get in touch with me via [marc@gambleaware.org](mailto:marc@gambleaware.org)

Thank you and I hope you and your family stay healthy.

With kind regards,



Marc Etches  
Chief Executive