Newport Citizens Advice Bureau’s

2015-18 HARM MINIMISATION PROJECT

Evaluation report for GambleAware

Final Report: Published March 2020
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i Acknowledgements

Chrysalis Research would like to thank all members of staff within GambleAware (formerly the Responsible Gambling Trust) and Newport Citizens Advice Bureau, as well as all other stakeholders who have been involved in this evaluation, for their time and participation in interviews with the evaluation team.

Chrysalis Research would also like to thank GambleAware and particularly Newport Citizens Advice for providing the relevant documentary evidence and enabling evaluator access to other stakeholders who had been involved in the project in partner or beneficiary capacity.

It is hoped that this report will recognise the project and delivery team’s achievements and also identify areas where improvement or further development in carrying out similar work is needed, to strengthen both the commissioner’s and delivery provider’s capacity and systems.

The report is prepared for these two parties and is published with their permission.

ii List of abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tr>
<td>CAB</td>
<td>Citizens Advice Bureau</td>
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<tr>
<td>GAST</td>
<td>GambleAware Screening Tool</td>
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<td>GRaHM</td>
<td>Gambling Risk and Harm Minimisation pilot</td>
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<tr>
<td>ITT</td>
<td>Invitation to tender, project specification</td>
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<tr>
<td>PGSI</td>
<td>Problem-gambling severity index</td>
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<td>RGT</td>
<td>The Responsible Gambling Trust</td>
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iii Structure of the report

The report begins with a brief description of the project that was evaluated and an executive summary of the main findings. The report then comprises three main sections:

- **Introduction**, which includes a summary of project background and specification, its description and an overview of the evaluation
- **Key evaluation findings**, focusing on relevance and appropriateness, effectiveness and efficiency and impact and sustainability of the project
• **Conclusions**, offering an outline of key lessons learnt and recommendations.

**Reporting note**

Throughout this report we present percentages rounded to the nearest whole number. This sometimes means that totals can appear to be one or two percentage points out. In charts the text for small percentages (generally less than 3%) is not shown so that the chart can be read more easily.
### BRIEF PROJECT OVERVIEW

<table>
<thead>
<tr>
<th><strong>Title</strong></th>
<th>Newport Citizens Advice Gambling Support Service: Harm Minimisation Project</th>
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<tr>
<td><strong>Timing</strong></td>
<td>January 2016 – June 2018</td>
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<tr>
<td><strong>Budget</strong></td>
<td>Original project proposal: £155,305  &lt;br&gt;Updated proposal (Addendum), incorporating additional dissemination of training to the national Citizens Advice network: £259,544</td>
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<td><strong>Delivery provider</strong></td>
<td>Newport Citizens Advice</td>
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| **Partners** | A number of partners were involved during the lifetime of the project. These included:  
  - Organisational users of the services provided, such as Leeds and Doncaster Councils, other local citizens advice services, and the National Association Student Money Advisers  
  - National Citizens Advice, whose involvement enabled scaling up of the practice and approaches developed as part of the project within the Citizens Advice national network  
  - Prof David Parsons, who, in the early stages of the project, carried out a review of the project processes, focusing on the monitoring and evaluation systems in particular, and provided guidance and support in refining them  
  - Organisations carrying out strategic work around and research into gambling-related harm minimisation and public health, including the Gambling Commission, Safeguarding Board and Welsh government and the university of South Wales, to the activities of which the project contributed in different ways. |
### Project activity

There were two main strands of activities:

- **Education, awareness-raising and training**\(^1\) work aimed at two target groups:
  - Young people and other vulnerable groups
  - Agencies, services and statutory bodies who offer help and support to these groups.

- **Support for:**
  - Clients at risk or experiencing gambling-related harm, including advice, signposting and brief interventions
  - Professionals

As part of the additional activities commissioned by GambleAware related to this project (Addendum), Newport CAB put in place mechanisms for disseminating gambling-related harm-minimisation training to the national Citizens Advice network.

The project team also carried out various activities related to improving understanding of gambling-related harm and minimising it, by working with organisations such as the Gambling Commission, Safeguarding Board and Welsh government and the University of South Wales.

### Locations of activities

The project was initially commissioned only for South-East Wales and many of the project’s training events were delivered locally.

In practice, the project reached well beyond Newport: to locations across Wales, into Wiltshire and the north of England. A number of its strategic activities were carried out at a national level.

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\(^1\) Training was offered to the second target group – professionals and services working with vulnerable individuals - only.
EXECUTIVE SUMMARY

- This harm-minimisation project, funded by GambleAware (formerly the Responsible Gambling Trust), was delivered by Newport Citizens Advice between January 2016 and June 2018.

- The project comprised education, awareness-training and training activities; support for individuals and system-level work, focusing on enabling staff across the national Citizens Advice network to identify and support clients at risk or experiencing gambling-related harm.

- The project achieved or exceeded its targets. Specifically:
  - Between 2016-17, Newport Citizens Advice had a presence at or attended 157 information stalls, exhibitions, conferences and meetings, against a target of 80 for the two years. Nearly 12,000 people were reached through these events.
  - A total of 1,825 participants attended 97 training events and workshops from the start of the project in 2016 to June 2018. This summary does not take into account the participant figures for more than 40 presentations that have been delivered.
  - 81 clients were referred (or self-referred) to Newport CAB for brief intervention from the start of the project in 2016 to June 2018.
  - The delivery provider offered 596 instances of brief advice to the public, including people concerned about their gambling habits and behaviour.
  - The project team also offered bespoke support to 254 professionals.
  - The delivery provider developed an e-learning training module about gambling related harm, which is available to all Citizens Advice staff across its 350-branches-strong network.
  - In partnership with National Citizens Advice and the Gambling Commission, the project team introduced a new advice issue code, to enable systematic screening for gambling-related harm issues amongst Citizens Advice clients.
  - In addition to the above, Newport CAB prepared and published multiple articles, blogs and case studies, some of them in partnership with strategic partners such as
the Gambling Commission. The delivery provider also prepared resources aimed at services, organisations and professionals working with people at risk or affected by gambling related-harm, which are openly available to download and use.

- The quality of the inputs, processes and systems has been high throughout the project and feedback from stakeholders about the project activities has been highly positive.

- Very positive outcomes were achieved within the education, awareness-raising and training and support strands of the project. Specifically:
  
  o *Almost all* workshop and training participants reported improvements in their awareness of gambling-related harm. Frontline professionals also noted improvements in their ability to identify problem gambling and offer information, brief advice and other forms of support to clients.
  
  o The clients who have had interventions with the service and completed them have shown reduced levels of problem gambling and psychological distress, as measured by the relevant assessment tools, such as PGSI and Core 10.

- Without wishing to detract from the impressive achievements of the project, the evaluation highlighted some aspects where, if further or similar work were to be commissioned, the project and its outcomes could be strengthened.
  
  o Increasing front-line professionals’ knowledge and understanding of gambling-related harm, as well as giving them confidence to initiate conversations with potential problem gamblers and help them on the way to finding support does not necessarily equate to changes in capacity for an organisation. Staff may be knowledgeable and trained but may be constrained by the systems within which they operate, the resources available locally, and the priorities set by their organisation. Therefore, additional, strategic level work is needed to complement the front-line training provided by this project. Some of this was carried out but it was not consistently implemented everywhere.
  
  o The outcomes of the brief intervention support for clients were very positive. However, despite there being a noticeable proportion of clients, particularly in the early stages of the project, who disengaged and did not complete their treatment, this was not explored in the Service Report, prepared by the delivery provider. In

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our view it is worth investigating this further and ensuring it is appropriately covered in future evidence gathering and reporting.

- Overall, the project proposal responded well to the programme requirements outlined in the specification and was clear, specific and realistic about most of its activity strands and their outcomes. Yet, there were some instances where greater clarity and specificity, both in the commissioning documentation and in reporting, would have been helpful and is something for GambleAware and Newport CAB to consider in the future. Specifically, this was concerned with:
  - Education and awareness raising activities for non-professionals, including groups at risk such as young people or inmates – no specific targets were set or breakdowns in reach and outputs related to these groups reported.
  - Social media – this was perhaps the least defined element of the project. In the future it might be useful to be clear about who exactly messages are trying to reach and whether this is effective.
  - Limited evidence, beyond outputs, was also gathered for the other ‘light touch but high reach’ activities, such as open events.
  - Activities described in the Addendum lacked the same level of specificity which was visible in the original proposal.

- This project also demonstrated that:
  - Even where a delivery team is clear about outcomes and how they will be achieved, a theory of change, logic model or a similar framework is useful in checking clarity and consistency. It also enables greater precision in developing appropriate and robust evaluation and monitoring tools.
  - A formative evaluation can play a powerful role in ensuring that a project would produce an evidence set, demonstrating impact of the funded activity, that would be consistent with GambleAware requirements.

**Recommendations**

**GambleAware**

- When commissioning future workforce development activities, GambleAware should consider encouraging bidders to adopt an approach that focuses on organisational change, i.e. invite bidders to work strategically with relevant services and organisations, by helping them put in place the necessary systems and mechanisms as well as offering training to their front-line staff. This would ensure that front-line workers can apply their learning and skills acquired during the training sessions, that they initiate the conversations they got trained to carry out, given the
resources to do so, and that any unnecessary barriers or discouragements are removed or negotiated. Small changes, such as adding the signs of problem gambling to a checklist of issues to be vigilant about, could make a difference to the organisation’s ability to address gambling-related harm.

- With regards to evidencing impact, GambleAware should require that:
  
  o Where relevant, outcomes of awareness-raising, training and professional support activities are tracked at organisational as well as individual level.
  
  o For individuals taking part in training and similar sessions, evidence gathering activities include mechanisms which explore intermediate and where possible long-term, as well as immediate (captured straight after a training session or a workshop) outcomes.
  
  o Evidence related to effectiveness and outcomes is captured for all activities, including the less intensive ones, but this is done appropriately, so that it does not have negative impacts on client and professional experiences.
  
  o Delivery providers offering brief interventions and similar support to clients at risk or experiencing gambling-related harm explicitly report on instances of disengagement from support.

- GambleAware should consider requesting potential delivery providers to demonstrate in their proposals that their project design is outcomes-focused in all its aspects and that the most effective and efficient activities have been chosen to achieve the intended outcomes. A theory of change, a logic model, or a similar framework might be a useful way of achieving and expressing clarity about and focus on outcomes.

- Where no formal external evaluator is commissioned or they are brought in during the final stages of the project, GambleAware should make sure that an expert assessment of the project processes and evidence-gathering mechanisms is carried out in the beginning of any project and that delivery providers act on the findings of such assessments.

- When commissioning additional activity, on top of a formal proposal, GambleAware should require a clear outline of targets or outcomes that will be achieved and timescales for doing so.

**Newport Citizens Advice**

The delivery provider should:

- Consider ways of ensuring that front-line professionals who get trained by Newport Citizens Advice can and do apply their learning. This is likely to require only small changes to the delivery provider’s existing approach of working with senior stakeholders in the relevant organisations and helping them put necessary systems and mechanisms in place.
• Gather evidence of effectiveness and impact for all its activities and report on it.

• Be more explicit in reporting about instances of client disengagement from support.
1 INTRODUCTION, PROJECT DESCRIPTION AND EVALUATION OVERVIEW

1.1 Background to the project and its specification

GambleAware (formerly the Responsible Gambling Trust) is an independent charity that commissions and funds research, prevention and treatment services to help reduce gambling-related harm in Great Britain. It works in partnership with the Responsible Gambling Strategy Board and the Gambling Commission.

In June 2015, GambleAware invited applications for funding, as part of its two-year Harm Minimisation programme. The aim of the programme was to ‘develop evidenced approaches to reduce the impact of gambling-related harm, particularly on vulnerable populations such as young people’ (Harm Minimisation ITT). It was positioned within Tier 1 of the charity’s commissioning framework, meaning that any project work was expected to be delivered within non-problem gambling specific services and include interventions such as screening, brief intervention, referral and self-help provision. According to the ITT, GambleAware was looking for educational, sign-posting and other harm minimisation approaches that would be evidence-based, target population groups that might be at particular risk and be practical in their delivery approaches and have a national focus or some clear potential for national roll-out.

One of the projects that was commissioned during the tendering process was delivered by Newport Citizens Advice.

1.2 Description of the project as outlined in the proposal

1.2.1 The problem that the project was trying to address

In their proposal, the delivery team identified the following as the key issue they were hoping to address through their work.

Newport CAB noted that at risk and problem gambling is difficult to detect meaning that very often people who are affected by gambling-related harm do not seek or receive help until their problems become severe. The delivery provider highlighted that many professionals working with individuals
who might be at risk, lack understanding of problem gambling, skills to identify the relevant signs and awareness of harm-minimisation help and support available. Referring to research publications and own practice, Newport CAB, identified debt advisors as one of the groups of professionals which are in a unique position to spot signs of gambling-related harm. Unlike many other manifestations of harm which can differ between individuals, debt and money problems appear to be a common issue reported by people affected by gambling-related harm.

The delivery provider also highlighted a lack of a support service for people at risk or experiencing gambling related harm in the Newport area and the need for improving understanding of gambling-related harm amongst at risk groups, for example young people.

1.2.2 The proposed model

In order to address the issues highlighted above, the delivery provider suggested a model which comprised the following two strands:

- Education, awareness-raising and training work aimed at two target groups:
  - Young people and other vulnerable groups
  - Agencies, services and statutory bodies who offer help and support to these groups. Examples of these included: debt advisers, partners working with young people (e.g. support and youth workers), social housing officers, public health practitioners.

- Support for
  - Clients at risk or experiencing gambling-related harm
  - Professionals

Within each strand, there were multiple delivery mechanisms, of varying intensity and reach. For example, the education, awareness-raising and training activities involved two different types of events - open events (brief engagements with large numbers of participants, for example during conferences focusing on multiple issues) and session events (these were delivered to a smaller audience and over a longer time period of time, e.g. a few hours). In addition to open events, use of social media was also intended as a way of reaching large audiences with brief awareness raising messages.

Similarly, when offering support to clients at risk or experiencing gambling-related harm, the delivery provider offered multiple mechanisms that could be selected according to individual needs. These ranged from ‘teachable moments’ (instances of providing information and brief advice) to brief intervention support packages, including an initial assessment followed by up to six weekly or fortnightly sessions.
### 1.2.3 Intended outcomes for the target groups

Newport CAB clearly distinguished between the groups of people they were planning to involve in their project activities, with outcomes for each explicitly identified. These included:

- For public audiences (general population and groups known to be at greater risk within it, e.g. young people) – improved awareness of problem gambling and responsible gambling behaviours, knowledge of support available
- For professional audiences (services and bodies working with at risk groups) – as per the previous group plus improved ability to identify signs of problem gambling, offer support, sign-posting and brief intervention
- Clients at risk or experiencing problem gambling who access the support service – positive changes in gambling behaviour and improved wellbeing.

It is important to note that the outcomes listed above were identified for the more intensive delivery mechanisms, such as 3-4-hour session events or brief interventions with clients. For the mechanisms that were considerably more brief and light touch in their nature (e.g. open events, social media or ‘teachable moments’) no specific outcomes were identified. In addition, there was a degree of ambiguity and inconsistency in the proposal about whether intended improvements in the ability of professionals and their bodies to identify signs of problem gambling, offer support, sign-posting and brief intervention should be viewed as immediate (short-term) or long-term training outcomes.

### 1.2.4 Project timings

The project was due to be delivered over the course of two years, between January 2016 and December 2017.

### 1.2.5 Expected project reach and targets

The project was due to be delivered in South East Wales.

The following service targets, for the entire duration of the project, i.e. two years, were included in the proposal:

<table>
<thead>
<tr>
<th>Strand of delivery</th>
<th>Type of delivery mechanisms</th>
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</thead>
<tbody>
<tr>
<td>Greater reach, ‘light touch’</td>
<td>More intensive</td>
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</table>
### 1.2.6 Changes to the original proposal

At GambleAware’s request, an addendum was added to Newport CAB’s original proposal. The addendum outlined the proposed approach to disseminate gambling-related harm-minimisation training to the Citizens Advice national network. The network comprises over 350 bureaux in approximately 3,500 locations across England and Wales.

The aims of this additional activity were to:

- Raise awareness amongst debt advisers that some individuals with debt problems may be experiencing or are at risk of developing a gambling problem
- Enable them to identify problem gambling amongst clients and offer brief intervention or sign-posting advice.

To achieve these additional aims, Newport CAB proposed to:

- Develop, in partnership with GambleAware and National Citizens Advice, a bespoke learning module and upload it onto the central training resource used by all staff across the Citizens Advice network, called CABLink
- Take part in national conferences and events held by Citizens Advice
- Extend training for debt advisors in the South East Wales area (as per the original proposal) to Citizens Advice bureaux in other parts of the country where there are clear pathways of support for problem gamblers, e.g. via Gamare.

Unlike the original proposal, the addendum was less specific on outcomes. Exact outputs or timescales were not defined.
1.3 Project evaluation

During the early stages of the project, in 2016, GambleAware commissioned its formative evaluation which was carried out by Prof. D. Parsons. A logic model for the project was produced as a result of this evaluation and evidence collection mechanisms and tools were reviewed and refined, in collaboration with the delivery team.

An evaluation strategy for the project was also put in place, outlining types of data to be captured with regards to every type of the project activity and ways in which this would be done. For more intensive inputs and support (such as training and client support), data capture was focused on outcomes as well as outputs. Specifically, client data was recorded on the Citizens Advice internal casebook and on a spreadsheet containing client details, client number, PGSI and Core10 scores, client engagement and treatment status. Most records are paper-based and the data is transferred to electronic files. Similarly, a log for training data (event type and date, participant numbers and participant feedback) was maintained electronically from paper records.

For ‘lighter touch’ activities, for example, stands or short presentations at conferences, the focus was on capturing outputs (number of events, numbers and types of participants, etc).

Chrysalis Research was given access to the evidence gathered by the project team and has used these in its analysis and verification of data presented in the sections that follow.

1.3.1 This evaluation and its aims

Once the project was completed, GambleAware commissioned Chrysalis Research to carry out an independent evaluation of the project. The evaluation data collection and analysis activities were carried out between July and November 2018.

The aims of the external evaluation were to:

- Assess the relevance, appropriateness, effectiveness, efficiency, impact and sustainability of the project, its activities and interventions
- Identify key lessons learned
- Provide evidence-based recommendations moving forward.

1.3.2 Methods and evidence base for this report

Prior to the beginning of the main evaluation data collection and analysis activities, the evaluation team:
• Carried out scoping activities, which included initial interviews with the delivery provider and analysis of some of the key project documents
• Discussed the evaluation and expectations for it with GambleAware. To clarify the latter and ensure the evaluation was focused and comprehensive, a series of research questions was agreed to enable the evaluation team to assess relevance, appropriateness, effectiveness, efficiency, impact and sustainability of the project and its activities. The research questions are provided in Appendix 1.

To achieve the evaluation aims stated above, Chrysalis Research carried out a review of all the data collected by the delivery provider and other project documents and evidence, as well as some primary data collection.

Review of the evidence collected by the delivery provider and generated as part of the project (secondary evidence)

Evidence and data gathered by the delivery provider was one of the key sources of evidence for this report. Such evidence included project specification and tender documents, progress and final reports, evidence related to processes and outcomes which was gathered as part of the project activities. Further detail is provided in Appendix 2.

Primary evidence gathered by the evaluation team

The evaluation team also carried out some primary data collection activities which included depth interviews with:

• The project team
• The commissioner (GambleAware)
• Representatives from four strategic partner organisations
• Eight participants in training sessions delivered by Newport Citizens Advice. Most of them were frontline staff working with vulnerable individuals and representing different organisations. The interviews focused on capturing their feedback about the sessions and exploring short and longer-term impact.

1.3.3 Evaluation challenges and limitations

There are two challenges that we would like to highlight:

• With the evaluation taking place after the project was completed, it was not possible for the evaluation team to carry out data gathering (e.g. observations, participant interviews) during training and other project activities in order to offer an independent assessment of these.
Nonetheless, given that processes as well as outcomes data was systematically captured by the project team, we feel that this challenge had only minor implications on the strengths of dataset and our ability to make conclusions about relevance, effectiveness and impact of the project.

• Despite multiple attempts by the project delivery team to encourage partner organisations to take part in the external evaluation, the number of those who chose to do so was slightly lower than anticipated. Nonetheless, the resulting sample span all types of partner organisations outlined on p iii. For service user organisations, responses from staff in strategic roles were triangulated with those given by the people in frontline roles from the same organisation who had attended the training delivered by Newport CAB. Taking all this into account, we feel that a slightly smaller number of partner interviews did not negatively affect the quality of the evaluation dataset.
2 KEY EVALUATION FINDINGS

2.1 Relevance and appropriateness

2.1.1 Prior relevant experience and expertise of the delivery team

Newport Citizens Advice has been working to address gambling-related harm for a number of years through strategic policy, partnership work, and interventions, such as the delivery of Gambling Risk and Harm Minimisation Pilot (GRaHM).

The motivation for the current project, according to the Newport Citizens Advice tender, included wanting to develop a response for the many clients who presented with issues related to gambling, such as debt and depression, which highlighted the role they could play in offering early intervention. The delivery manager reiterated this point in the interview and highlighted that there was little identification of gambling related harm in the area, even though Citizens Advice worked with organisations dealing with potential markers of gambling related harm (debt, housing issues), such as housing officers, money advisers, councils and the safeguarding board.

Newport Citizens Advice’s work with clients included people at-risk of harm, people close to or affected by those at risk (affected others) and gambling relapse prevention. Previous experience in this field, coupled with evidence from numerous sources – including The Responsible Gambling Strategy Board, Alcohol Concern Cymru and the Royal College of Psychiatrists, and the local public health Wales team – about the impact of gambling on debt, health and the role of relevant agencies, provided the impetus for Newport Citizens Advice to try and engage with ‘those people who are most vulnerable and their service providers’.

2.1.2 Project fit with the needs and priorities of the target group(s) and relevant stakeholders

As already mentioned, the proposal and the project design were based on the experiences, learning and successes from the GRaHM project and other work undertaken by core members of the delivery team. This first-hand experience, as well as involvement in strategic work and research activities led by GambleAware, the Gambling Commission and other bodies and organisations, enabled the delivery provider to develop good understanding of the specific issues that needed be tackled as well as the needs of each of the target groups.
The delivery team identified a lack of systems helping to identify gambling-related harm, within the citizens advice network as well as other bodies and services in the Newport area as a problem. This observation was later supported by a report from the University of South Wales report\(^3\) which states that most organisations do not screen for problem gambling, indicating accuracy of the insight gathered by the project team.

In identifying people and groups at risk, Newport CAB focused on organisations dealing with potential markers of gambling-related harm, such as debt or housing issues, and made contact with housing officers, money advisers, local councils and the local safeguarding board as potential audiences for the training.

The work with clients was designed to target those at-risk, affected others (such as family and friends) and those at risk of gambling relapse. They found a large number of self-referrals at the start of project from clients who had major upheaval due to gambling, such as the end of a relationship or loss of housing.

### 2.1.3 The project design and parties involved in it

Given that the current project was based on the previous pilot and related experiences, many of its design elements were not only clearly defined but also tested and refined, in partnership with local and national stakeholder and partners, prior to the beginning of the current contract. The project became established quickly because much of the activity was already in place in Newport, so it was easier to widen out the scope and adapt the training to different audiences, rather than starting from scratch. As the contract manager at GambleAware said, “the teething had already been done…”.

In particular, the brief intervention element of the model had been developed into a focused and structured package of support. It included up to six sessions of brief intervention over 2 months. The interventions focused on practical solutions, such as self-exclusion, blocking software, debt advice and time management. If further support was required, then clients were referred to counselling or other suitable services. Clients were also referred to relevant support services for underlying issues such as alcohol abuse. Follow-up sessions were offered if clients relapsed or if there was a risk of relapse due to difficulties or changes in clients’ lives.

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\(^3\) An investigation of the social impact of problem gambling in Wales: John, Holloway, Davies, May, Buhociu, and Roderique-Davies (University of South Wales, 2017).
Despite many aspects of the project design being relatively defined and ready to be implemented, a considerable amount of development work needed to be carried out, to reflect the fact that the new project was different in its scope and more ambitious and comprehensive in its delivery approach.

The delivery team reported that four full time staff at Newport Citizens Advice gambling support service, including a gaming expert, were involved in the project design. They recruited staff to carry out the training based on their ability to present and previous experience of working with vulnerable people – experience of gambling was not a criterion for appointing the trainers.

Newport Citizens Advice put two training packages together, for three-hour and one-hour workshops, and also designed a toolkit which was made available online. The training packages were adapted for each particular audience and, in the early stages of the project, the packages were changed frequently, in response to feedback from participants and senior stakeholders within service user organisations as well as delivery team’s observations of the levels of engagement, relevance of activities to specific groups, etc. The delivery team reported that as the project became more established the training packages needed to be changed less often, although small changes were still made. In particular, sessions have continued to be adapted to the different audiences, for example a housing or debt advice team would have slightly different training - more focused to those issues.

2.1.4 Consistency of the project and its interventions with the objectives stated in the ITT

The provider organisation admitted that responding to the project specification was a challenging task, since there was no template or format specified. Indeed, we found that the ITT was deliberately non-specific in defining the required activities in order to encourage innovative bids. Nevertheless, the Newport Citizens Advice tender and the subsequent project activities did incorporate each of the main themes.
The project also echoed the examples provided in the tender which covered:

- education/prevention programmes, activities, materials, approaches and/or policies around gambling and problem gambling for young people
- the use of technology (including social media) to reduce the impact of gambling related harm amongst young adults
- services and interventions with vulnerable populations
- collaboration with the public and charity sectors.

GambleAware believed that Newport’s experience in reducing gambling related harm, and the detailed way that the project was specified in the bid, were key factors in their bid being successful. GambleAware hoped that the Newport project would reach a large number of individuals and organisations and provide good value for money.
2.1.5 Clarity of the logical framework underpinning the project

Despite there being no logic model or a similar framework in place at the beginning of the project, our analysis of the project proposal suggests that, for the majority of the project activities comprising the delivery model, the team was really clear and specific about what it was hoping to achieve and how.

Nonetheless, there were some aspects of the project where such clarity was lacking. For example, the description of the social media work in the proposal appears to be focused on inputs rather than outcomes. The ‘outcomes’ for this aspect of the project are defined as ‘social media activity generated’ – suggesting that the social media activity is an end in itself, rather than being created to achieve changes in behaviour. In addition, the description of the social media work lists the delivery team’s experience of using it for a very different purpose (such as to keep up to date with the gambling industry and problem gambling service providers). Precise strategies to be used, and most importantly what they would achieve and for which target group, are unclear. No specific targets for this area of work were identified.

A theory of change, logical framework or a similar approach is a commonly used mechanism which helps spot instances like the example above, where clarity about outcomes and how to achieve them in project delivery might be lacking.

An absence of a theory of change was noticed very early in the project, as part of the formal evaluation commissioned by GambleAware and undertaken by Professor Parsons⁴. His review also identified some other shortcomings in the monitoring and evaluation systems and capacity, as well as the specific instruments which had been developed by that stage.

As it stands there may be a risk that the project will be sound on evaluating activity (process) but provide RGT with little on the extent to which different events/activity has consequential effects on harm minimisation (public participants) or on professional capacity building. This would be a significant limitation to any external evaluation (to be commissioned by RGT) and a flaw in the evidence that the [project]process was effective and made a difference

From David Parsons note, April 2016

Professor Parsons then worked with the delivery provider to help the team rectify the gaps and shortcomings highlighted by the initial review.

A logic model for the project (see Appendix 3) was developed in May 2016. The logic model offered a useful overview of the aims of and activities within the project and helped make the project

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⁴ Professor David Parsons was commissioned to provide consultancy on this and another project. The aim of the consultancy was ‘to help [the project] to establish more robust foundations to demonstrate harm minimisation impacts and effects.’
outcomes clear. It rectified the ambiguities which were visible in the original design of the project approach, such as the one about the social media work, highlighted above. Further detail would have been helpful, in particular to quantify the inputs and outcomes, and to detail the aims. Similarly, some of the outcomes, particularly those that fall into the ‘intermediate’ category, needed further thought as they can be more accurately described as inputs. Equally, some genuine outcomes that can be expected in the intermediate and longer term, for example, around service user organisations implementing new systems as a result of the training and support they have received, are not included. We note also that there are a number of typographical errors, which suggest that the logic model was not subject to detailed scrutiny or given sufficient time. The absence of detail within the logic model generally reinforces this impression.

Overall, however, we feel that the logic model differentiated well between inputs, outputs and outcomes and gave a reasonable level of detail for the areas that the outputs and outcomes would cover. This helped the evidence collection mechanisms to be more focused and precise. To further strengthen the latter, an evaluation strategy for the project was also developed at this stage. Data and evidence collection instruments refined or developed.

As a result of the above activity carried out by the team under Prof Parsons’ guidance, his second review of the project systems was positive, noting that by October 2016 the issues noted in his initial review had largely been addressed.

*It is now underpinned by a competent logic chart, clear expectations of rationale, and a useful (but incomplete) evaluation strategy. The project is now close to having a proportionate and fit for purpose self-evaluation approach with useful tie up between the logic chart – strategy – monitoring and evaluation tools, but some important gaps and opportunities remain to be addressed (or their absence explained).*

From David Parsons End of Consultancy Review, November 2016

The progress that was made between the two assessments is striking and it is likely that the academic’s involvement was highly beneficial in steering the project’s data collection processes and ultimately enabling better measurement of outcomes. Equally important to notice is the delivery team’s responsiveness to feedback and commitment to improvement and putting robust evidence systems in place.

Several learning points can be drawn from this aspect of the project implementation:

- Even where a delivery team is clear about outcomes and how they will be achieved, a theory of change, logic model or a similar framework is useful in checking clarity and consistency. It also enables greater precision in developing appropriate and robust evaluation and monitoring tools.
• Developing a theory of change or a similar framework is often a challenging thing to do for delivery teams, so drawing on external expertise is usually highly beneficial and sometimes essential.

• In the instances where delivery teams (rather than for example an external evaluator) are the main party responsible for evidencing project outcomes, a formative evaluation, early on in the project delivery, is highly important. It reassures both the commissioner and the delivery team that solid evidence collection mechanisms are in place. The review carried out by Prof Parsons for this project offers a good example of what to look for and to expect. Important to note that GambleAware might be in a position to perform such assessment using their internal expertise, if there is capacity to do this.

2.1.6 Extent to which desired outcomes were realistic

Overall, all intended outcomes which were outlined by the delivery team in their proposal were realistic and consistent with the wider evidence about similar approaches (such as training and awareness raising sessions) and interventions. The only exception was the outcome about improving the ability of professionals and their bodies and organisations to identify signs of problem gambling, offer support, sign-posting and brief intervention. In some parts of the proposal this was presented as an immediate, post-training outcome. In other sections it was described as a longer-term outcome, which is more realistic, particularly where impact for organisations rather than individuals is concerned.

2.1.7 Consistency of the project activities with the intended outcomes and their appropriateness to the context of delivery

All available evidence suggests that the project activities were consistent with the intended outcomes and were an appropriate choice for achieving them in the context within which they were implemented.

2.2 Effectiveness and efficiency

2.2.1 Completion of activities in accordance with the project plan

Project activities were carried out in accordance with the project plan and where targets were set these were all achieved and often exceeded by the end of the third quarter in 2017, i.e. three months prior to the end of the original funding period. Below we offer some specific points related to both strands of the activity – education, awareness and training work and support activities.
2.2.1.1 Education, awareness and training work

Sessions

According to the Service Report, which covers the original project timescales (2016-2017), in the period to January 2018, 69 workshops and training sessions were held, reaching 941 participants. Further detail (see Figure 1) shows that the targets for sessions were exceeded.

Figure 1: Sessions
Source: Service Report January 2016 to January 2018
Event type: Awareness raising workshops (public and professional) and training sessions (professional)
(annual target from Newport Citizens Advice tender, 30 sessions, 300 participants)

We have reviewed the raw data for the training records which show that 595 participants attended 56 training sessions in 2016-17. For this period, we do not have raw data for workshops or presentations. Overall, based on the evidence reviewed, we can conclude that the information reported in the Service Report is accurate, although some of the figures are reported in ways that can be viewed as confusing. Specifically, different types of sessions (training, workshops and presentations) and their participants are added up in various combinations in different sections of the Service Report making it difficult to follow.

Between January and June 2018, further 493 people attended 28 training sessions and workshops.

Adding data for 2018 to the figures presented in the Service Report shows that a total of 1,825 participants attended 97 training events and workshops from the start of the project in 2016 to June 2018. This summary excludes figures for presentations because we could not reliably verify them.
Open events

According to the Service Report, between 2016-17, Newport Citizens Advice had a presence at or attended 157 information stalls, exhibitions, conferences and meetings, against a target of 80 for the two years. Nearly 12,000 people were reached through these events. We do not have raw data to verify these figures nor are we able to provide further information for January-June 2018.

Figure 2: Open events
Source: Service Report January 2016 to January 2018
Event type: Open days, community events, Freshers Fairs (public); Conferences, forums, network events (professional)
(annual target from Newport Citizens Advice tender, 40 events, no target set for participants)

58 info stalls and exhibitions
18 conferences
81 meetings and focus groups
11,943 people reached

The figures presented in the Service Report suggest that the targets for open events have been achieved.

Social media

The Service Report shows that Newport Citizens Advice’s Gambling Support Service was active on social media during the period of the project, using Twitter to broadcast latest news and information, resources and helpful advice and information about its services. It shows data from the first three months of 2016 (11,364 impressions on social media) and the last three months of 2017 (35,666 impressions). This would appear to be a significant increase in exposure built up over the two years of the project, but we are unable to ascertain from this whether the growth was steady over the period or connected to the project. Similarly, no data was available about which type of information broadcast by the delivery provider was ‘responsible’ for the increase in exposure.

No targets were set for this activity in the project proposal so we are unable to make a conclusion about whether the activity was carried out as expected.
2.2.1.2 Support

Clients

Figure 3 shows that the service targets were achieved for client support of different levels of intensity, from offering information and signposting (brief advice, ‘teachable moments’) to more in-depth support (brief interventions).

Figure 3: Client interventions
Source: Service Report January 2016 to January 2018
Targets from Newport Citizens Advice tender

We have reviewed Newport Citizens Advice’s data for client interventions. This shows that 64 clients were seen for brief interventions, as shown in the Service Report. It is important to highlight that not all of these clients successfully completed a brief intervention course with Newport CAB or indeed commenced the intervention per se, which is explored in detail later on in the report.

We found that 175 individual sessions were held. The Service Report cites 184, which may include records from those that were either cancelled in advance (four sessions) or when the client did not attend (seven instances).

Between January and June 2018, a further 17 clients were seen as part of the brief intervention strand of work. Adding data for 2018 to the figures presented in the Service Report shows that a total of 81 clients were referred (or self-referred) to Newport CAB for brief intervention from the start of the project in 2016 to June 2018.

We are unable to comment on the brief advice activities (teachable moments) beyond the information presented in the Service Report, because we do not have raw data related to this activity.
Professionals

According to the Service Report, the project offered bespoke support to 254 professionals, against the target of 100.

We do not have the raw data or further information to verify these reported figures.

2.2.1.3 Other activity

As already mentioned earlier in this report, there was a degree of ambiguity with regards to the additional activity that was described in the Addendum, as no specific targets were set. As a result, we are not able to confirm for example whether individual instances of the delivery team’s attendance at national Citizens Advice conferences or training to Citizens Advice teams were carried out as part of the original proposal or the addendum, or both. Whilst we have no doubts that Newport CAB delivered education, awareness raising and training events in line with its commitments in both documents, not least because all the targets reported above had been exceeded by a large margin, greater clarity and specificity would have been helpful.

What did emerge very clearly in the primary evidence and the reported data, was Newport CAB’s achievements in putting in place systems within the national Citizens Advice network, fulfilling and exceeding its commitments described in the proposal addendum. The delivery provider:

- Developed an e-learning training module about gambling related harm, which is available to all Citizens Advice staff across more than its 350 branches-strong network
- In partnership with National Citizens Advice and the Gambling Commission, introduced a new advice issue code, which would enable systematic screening for gambling-related harm issues amongst clients and related data gathering.

These achievements are highly impressive as they mean putting in place sustainable mechanisms for identifying and minimising gambling-related harm at a national level.

In addition to the above, in line with its commitment to developing better understanding of gambling related harm and raising-awareness about it in different parts of society, Newport CAB prepared and published multiple articles, blogs and case studies, some of them in partnership with strategic partners such as the Gambling Commission. The delivery provider also prepared resources\(^5\) aimed at services, organisations and professionals working with people at risk or affected by

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gambling related-harm, which are openly available to download and use. As far as we can interpret, none of these were specifically required in accordance with either the original proposal or the addendum and were examples of Newport CAB delivering above and beyond what was described in the project contract.

Overall, Newport CAB delivered all project activities in accordance with the project plan and targets. Many of them were significantly exceeded and additional activities were delivered.

At the same time, there were some instances where greater clarity and specificity, both in the commissioning documentation and in reporting, would have been helpful and is something for GambleAware and Newport CAB to consider in the future. Specifically, this was concerned with:

- Education and awareness raising activities for non-professionals, including groups at risk such as young people or inmates – no specific targets were set or breakdowns in reach and outputs related to these groups reported.
- Social media – this was perhaps least defined element of the project. In the future it might be useful to be clear about who exactly messages are trying to reach and whether this is effective.
- Activities described in the Addendum lacked the same level of specificity which was visible in the core proposal. In future, GambleAware should be consistent in its requirements for the work it commissions, regardless of whether it related to formally procured or additional work and contract extensions.

### 2.2.2 Effectiveness of the delivery mechanisms

All primary and secondary evidence indicates that the work carried out by the delivery provider was of consistently high quality, with various stakeholders being extremely positive about it.

#### 2.2.2.1 Education, awareness and training work

**Sessions**

Education, awareness-raising and training event participants were asked to complete feedback forms following their events. In addition, eight interviews with training participants were carried out, as part of this evaluation, by Chrysalis Research. The feedback from participants was extremely positive both from the feedback forms and the telephone interviews.

A total of 750 participants completed the feedback forms in the period from May 2016 to June 2018. Those up to January 2018 are recorded in the Service Report. We have verified these figures against the raw data and identified an error on Page 6 – the first pie chart shows the figures for “The training improved my knowledge of gambling and gambling related harm” and not “The training has
improved my ability to identify problem gambling and gambling related harm” as stated. Apart from this typographical error the figures reflect the very positive feedback received.

We have reviewed the questions on the training feedback form and are satisfied that the questions are balanced, with two positive and two negative response options. Some of the questions do not explicitly link the training to the response, however. In particular, it could be argued that ‘I am aware of what support is available...’ relates only to the participants’ awareness irrespective of the training. However, this is a pedantic point and we are satisfied that, within the context of the training feedback forms, the questions are fit for purpose.

The feedback on the process elements of the training was extremely positive, as shown in Figure 4. All participants agreed or strongly agreed that the trainer was knowledgeable, and 99 per cent agreed that they were encouraged to participate and interact during the sessions. Only a handful of participants disagreed with any of the statements, which related to time and the room facilities (the question on facilities was not asked in 2018).

**Figure 4: Feedback from training participants**

Source: Newport Citizens Advice training log raw data May 2016 to June 2018 (base = 750 except where stated)

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The trainer was knowledgeable about the training topics</td>
<td>83%</td>
<td></td>
<td>17%</td>
<td></td>
</tr>
<tr>
<td>Participation and interaction were encouraged</td>
<td>70%</td>
<td></td>
<td>29%</td>
<td></td>
</tr>
<tr>
<td>The time allotted for the training was sufficient</td>
<td>63%</td>
<td></td>
<td>33%</td>
<td></td>
</tr>
<tr>
<td>The meeting room and facilities were adequate and comfortable</td>
<td>64%</td>
<td></td>
<td>32%</td>
<td></td>
</tr>
</tbody>
</table>

Training participants were interviewed as part of the evaluation and the interviews strongly supported the positive feedback from the feedback forms.

Participants had either been asked to go by their managers, or had taken the opportunity to participate when the training had been offered. All had willingly taken part in the training and saw that it was pertinent to their role. All of them rated the training highly, saying that it was useful and interesting, relevant to their work, and delivered by competent trainers.

Most participants reported that the sessions lasted around three hours and only one participated in the one-hour session. The sessions largely comprised a PowerPoint presentation, including video, with the input from the trainer mixed in with discussions and, in some cases, practical tasks. One
participant said this was a long time just to sit and listen, and another felt that a more interactive session, including role play for example, would have been helpful. All other participants were happy with the way the training was delivered. They felt that they needed information so they were happy that the session was presenter-led with the opportunity to discuss and ask questions and most did not express a desire for more practical activities. Overall participants were satisfied with the content, length and format of the training.

* I think there was that interactive aspect, but also you had plenty of chance to answer questions so it wasn’t just being lectured at and then you not having any say...I think the communication of the people delivering it was good. It was open but kept a focus and stayed on time.*

*Training participant, peer mentor*

Some participants made suggestions to improve the training. In addition to role-play or similar approaches that would enable participants to apply their learning to own practice, mentioned above, one participant felt that it would have been useful to highlight local services that could provide support, while another called for a follow-up session to allow participants to discuss whether and how they had been able to put the training into practice and to further develop their skills and knowledge.

**Other aspects of the strand**

Limited evidence related to effectiveness of other elements of this strand was available to the evaluation team. It appeared that feedback related to open events was understandably more ad hoc and dependent on the organisations hosting them. Nonetheless, all the instances that we were able to review were highly positive, with expertise of the delivery team and their flexibility in recognising specific contexts in which these activities were delivered consistently highlighted.

No evidence related to effectiveness of processes was available for social media activities, although one might argue that the noticeable growth in exposure can be viewed as an indirect indicator of that.

**2.2.2.2 Support**

**Clients**

Where feedback from clients who accessed support from Newport CAB for advice and signposting (‘teachable moments’) or brief interventions was available, it was very positive. It important to note however that we unable to review feedback from all or the majority of clients, only individual comments.
When considering effectiveness of client support, and specifically brief interventions, it is important to highlight that the numbers of clients who disengaged from the service were relatively high (see Table 1 below). With the exception of one client, all those who dropped out or declined treatment were problem gamblers. It is interesting to note that the majority of drop-outs happened in the early stages of the project, with the drop-out rate reducing dramatically towards the final months. The reasons behind this are however unclear.

Table 1 Client support, brief intervention – summary by client status

Source: Newport CAB client data for brief interventions, bases indicated in the bottom row of the table.

<table>
<thead>
<tr>
<th>Status</th>
<th>2016-17</th>
<th>Jan-June 2018</th>
<th>Total, 2016 – 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completed scheduled treatment</td>
<td>31</td>
<td>15</td>
<td>46</td>
</tr>
<tr>
<td>Discharged by mutual agreement following advice and support</td>
<td>9</td>
<td></td>
<td>9</td>
</tr>
<tr>
<td>Dropped out of treatment (unscheduled discontinuation)</td>
<td>18</td>
<td>1</td>
<td>19</td>
</tr>
<tr>
<td>Suitable for service, but patient declined treatment that was offered</td>
<td>1</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Not suitable for service - signposted elsewhere with mutual agreement of patient</td>
<td>2</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Referred to other service</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Unknown</td>
<td>2</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td><strong>Total for the period</strong></td>
<td><strong>64</strong></td>
<td><strong>17</strong></td>
<td><strong>81</strong></td>
</tr>
</tbody>
</table>

Whilst disengagement from treatment and support is not uncommon in practice related to minimising gambling-related harm, or indeed treating any addictive behaviour and similar issues, in our view it is worth investigating this further and ensuring it is appropriately covered in future evidence gathering and reporting.

**Professionals**

Limited evidence related to effectiveness of this activity was available to the evaluation team, however, all evidence that was available to review was positive.
2.2.3 Adaptations to changing need/circumstances/recommendations

All available evidence (reports and other documents, commissioner and partner interview data) suggests that the delivery provider was highly responsive to suggestions from partners regarding adaptations needed to make its delivery more suitable and relevant to various organisations and stakeholders. Positive way in which Newport CAB responded to the feedback from Prof D Parsons was perhaps the best illustration of the delivery provider’s ways of working and acting on feedback.

Another important point to note is that throughout the project Newport CAB was actively seeking feedback from participants in its workshops, training and other sessions, as well as different types of partners, so that it could continue refining and improving its offer.

2.2.4 Use of evidence in project monitoring and reporting and communications with the commissioner

Another aspect that enabled the delivery provider to be highly effective in implementing activities, adapting them when change was needed and developing new offer, was its strengths in gathering and using evidence in project management, monitoring and evaluation as well as good partnership-working skills, particularly visible in its exchanges with GambleAware.

2.2.4.1 Monitoring and evaluation

Citizens Advice is an established charity, well known for its attention to evidence and data. The data collection instruments and processes that were analysed by the evaluator were all of high quality, with virtually no adaptations related to capturing short term outcomes or processes necessary. From the analysis of the project documents and interviews with the delivery team, we know that some of the refinements were put in place as a result of the team working with Prof Parsons, but secure foundations and the relevant skills within the delivery provider team had been in place prior to that.

2.2.4.2 Reporting and communication during the project

The GambleAware contract manager felt that communication with the Newport Citizens Advice team was very good. They were engaged with the contracts team and provided regular (monthly and quarterly) update reports and regular telephone calls.

The regular reports comprised a mix of quantitative and qualitative data. Monthly reports were typically more discursive, highlighting the key events that had taken place that month, exposure on social media and any strategic developments. A template was used which had eleven headings, but not all of these were used each month if there was no activity.
The quarterly reports also followed a regular format. They comprised a table, showing performance data against the targets, with comments alongside providing more detail and making references to the monthly reports. The 2018 quarterly reports contained more descriptive detail.

The positive comments from GambleAware suggest that this was a good model for regular reporting, supplemented by telephone and email contact. There was no suggestion from either the Newport or GambleAware teams that the reports were onerous to deliver or comprised too much or too little information. We would conclude from this that the reports served their purpose well.

It is important to note that the delivery provider was proactive in its approach to progress reporting and communications with GambleAware and carried these out on its own initiative. Within the harm-minimisation programme, there were no specific requirement for delivery providers to update the commissioner in this or other ways. Given how helpful GambleAware found the progress reporting arrangements within the project, it might consider formalising these for future projects of similar nature and size, so that it was not dependent on the good will and working practices within delivery organisations.

GambleAware was pleased with the working relationship with the provider and described it as a ‘partnership’ rather than a commissioning relationship. This strong relationship ensured that the project ran well and gave both parties confidence to be open and ensure that the maximum value was gleaned from the work.

This strong relationship provides a good model for future commissioning. While GambleAware cannot assume that all relationships are the same, it can articulate what it values and expects from its delivery providers and ensure that this is reflected in tenders and funding bids.

2.2.5 Efficiency

As far as we are aware, there was no overspend on the project and it has fully achieved its set targets.

The project proposal was reassuring on providing evidence of high-quality systems in place for monitoring resourcing and expenditure, including:

- Full documentation and continuous monitoring of expenditure
- Independent auditing of accounts
- Review and scrutiny of financial management accounts by specialist staff within Citizens Advice, overseen by the Trustee board.
Detailed financial reports outlining expenditure were not provided to the evaluation team, making it impossible for the evaluation team to carry out assessments of efficiency.

Taking the above into account there is only one observation that we can make related to efficiency. The project budgets, outlined in the proposal and the addendum documents, specified the number of salaried staff and other (e.g. office) costs required to deliver the entire project, rather than estimating the resource needed to carry out each specific activity in order to achieve the precise desired outcomes, which would be consistent with systematically using an outcomes-focused approach in all aspects of the project. Identifying the resource required to achieve specific changes for beneficiary individuals, organisations, and so on, might be useful in identifying the most efficient and effective ways of achieving outcomes.

### 2.3 Impact and sustainability

#### 2.3.1 Project outcomes

#### 2.3.2.1 Education, awareness and training work

**Sessions**

The feedback from workshop and training participants about the training outcomes was extremely positive (Figure 5). All but one of the participants agreed or strongly agreed that they are aware of the support available and 99 per cent agreed with other statements (note that figures in the chart are rounded to the nearest whole per cent).
Participants in the telephone interviews reinforced the positive responses from the feedback forms. They felt that the training was effective, improved their awareness and confidence about raising issues about problem gambling, and gave them tools that they could use in their roles, such as different approaches to ask the right questions and also the knowledge to be able to signpost effectively. Across the interviews it was apparent that many front-line workers were not sufficiently aware of the prevalence of problem gambling, the ways that they might identify signs of problem gamblers among their service users nor the services, including the GambleAware hotline, to which they might refer or signpost. Some said that it had ‘opened their eyes’ to people’s experiences and given them suggestions about how to open up a discussion with clients about problem gambling and direct them to support.

The feedback forms were unable to give any indication of the impact of the training on the participants’ interactions with problem gamblers, although 99 per cent of participants felt more confident as a result of the training. Participants in the phone interviews were asked about the impact of the training on their work, but few had been able to put it into practice, either because they are not frontline or because situation hasn’t arisen. Some participants said that they discussed statistics about gambling and received handouts – leaflets, references to literature and weblinks – to which they were able to refer following the course.

I haven’t actually referred anybody yet, but I feel more confident in asking people about gambling, I’d definitely say that, that I feel more confident just asking, saying, ‘Do you gamble?’ or, ‘Do you bet on the horses?’ rather than it being like a taboo around it. I feel more confident that if they say yes I can help them or signpost them to certain agencies, or if they’re saying, ‘Well, no, but,’ and then we go through the behaviours of how often maybe that they...
do it, then we can say, ‘Hey, well, I think that this might be an issue, we did this training,’ so I think it’s just more confidence in my knowledge of it really, that I can tackle the issue with them.

Training participant, Tenancy support officer

Two participants had, since the training, encountered people at risk of problem gambling and had been able to signpost to services.

So yes, we referred somebody to the GambleAware service, and also gave them information about what steps they could take, and I think they did actually get themselves to as many gambling organisations as they could, so that even when they had the temptation to go and spend money on that, it actually physically stopped them, so that helped them cut it back a bit. I don’t think they managed to give it up completely before they left our service, but they were actually managing to manage their budget to fit it in, and not sacrifice their housing and their food to fit it in, so that was quite nice.

Training participant, support worker

Training - longer term and organisation-level impact

Interviews with staff in strategic roles from partner organisations and training participant feedback all suggest that training frontline staff through a one-off session appears to be beneficial in increasing participants’ knowledge and understanding of gambling-related harm, as well as giving them confidence to initiate conversations with potential problem gamblers and help them on the way to finding support. This is a positive finding and a strength of the project.

However, it was also clear from the same evidence that this does not necessarily equate to changes in capacity for an organisation. Staff may be knowledgeable and trained, but may be constrained by the systems within which they operate, the resources available locally, and the priorities set by their organisation. Therefore, additional, strategic level work is needed to complement the front-line training provided by this project.

The work need not be extensive, for example by discussing existing systems with an organisation, one might identify opportunities for small changes in the procedures that would enable staff to make use of their learning about gambling related harm. The commissioner and delivery partner could build on the success of this project, working with organisations involved in the training to ensure that staff are enabled to implement their training.

Other aspects of this strand - open events and social media

Although the reach of the open events or social media is impressive, with thousands of participants exposed to inputs from project staff, we have no evidence about the outcomes or impact of these events, so it is not possible to say whether this is having any effect.
Evaluating the impact of an input at a conference, for example, is extremely difficult, particularly where a session delivered by the delivery team is one of many, and they have little control over the organisational elements, such as use of post-session evaluation forms. It is however worth making an extra effort because without such evidence GambleAware is unable to say whether its resources are having any effect when they are used to deliver sessions at large conferences. One possible way of doing this would be to incorporate a very small number of questions into the sessions delivered by the project team at conferences or similar events. Ideally, participants would be able to respond to these questions using their phones or dedicated hand-held audience participation technology (we know that Newport CAB were looking into using this), so that a short session remained engaging rather than being turned into an extensive paper-filling data collection exercise.

Similarly, Newport Citizens Advice should explore means of understanding the potential impacts of its social media communications, possibly starting with developing a better idea of the audiences for different types of messages.

Given that the purpose and effects of presenting at large scale conferences and communicating through social media might be very similar, it might be worth gathering evidence which would enable the delivery team to determine which is more effective and efficient. Or, if they reach different audiences and/or have different effects, this would enable Newport CAB to establish the role of and the place in the project design for both of these methods.

### 2.3.2.2 Support

**Clients - brief interventions**

The Service Report records the outcomes for clients who participated in brief interventions up to January 2018. We have reviewed the raw data to verify the figures in the report.

A total of 64 clients were recorded on the client log up to January 2018. Of these,

- Five were recorded as ‘at risk of developing problem gambling’
- Eight were ‘affected others’.

**PGSI outcomes**

The raw data for brief interventions carried out between 2016-17 shows that at least one PGSI score was available for 51 clients and 33 had two scores. Not all were recorded at both the first and last appointment, presumably due to some clients disengaging from the support service, however the scores do provide an effective pre-intervention and post-intervention rating of the degree to which their gambling is problematic and, as a result, any changes in their problem gambling over at least some of the treatment period.
• Of the 51 for whom at least one PGSI score was available, all but two (96 per cent) scored above 7 on their first PGSI, which signifies problem gambling with negative consequences and possible loss of control. The Service Report states 98 per cent, which may include one client who scored 7.

• Of the 34 with two PGSI scores, 32 (94 per cent) had a lower final PGSI score than their first and one further client reduced their score during their treatment, although their last score was higher than the first. The Service Report therefore accurately states that 97 per cent (33 out of 34) of clients saw a reduction on their PGSI score.

• Of the 34 with two PGSI scores, ten (29 per cent) finished with a PGSI score of zero, non-problem gambling (the Service Report states 34 per cent).

Core-10
Of the 64 clients, all but one had at least one Core-10 assessment and 42 had at least two scores. As with the PGSI, not all were recorded at both the first and final appointment. A score of above 10 indicates moderate to severe psychological distress.

• 43 out of 51 (84 per cent) scored above 10 on their first measure (the Service Report states 80 per cent).

• 36 had two Core-10 scores (of whom 34 were those with two PGSI scores) of whom 29 (81 per cent) showed an improvement and 21 (58 per cent) scored below 10 on their second score (the Service Report states 82 per cent of those showed an improvement and 65 per cent scored below ten, using a base of 34)

The client outcomes were extremely positive. While they align with those reported in the Service Report we were unable to replicate the precise figures. This may have been due to different interpretations of the data (for example the bases used) or small errors in the calculations. We would recommend that greater quality assurance in the calculation of these figures, or greater clarity in their expression in the Service Report, would alleviate these minor issues.

We believe that the small discrepancies we found should not in any way undermine the achievements of the project. The records undoubtedly show reductions in the clients’ levels of problem gambling behaviour and in their psychological distress.

Clients - brief advice and signposting (teachable moments)
We have no data on the outcomes of the brief advice and signposting activities. As with other, less intensive aspects of its work, such as open event or using social media, Newport Citizens Advice should explore whether it might be possible to start developing a better understanding of the outcomes of this element of their project design. Some small-scale qualitative investigations might
be a good way to get this started. Any future systematic, at-scale, evaluation activities of this less intensive support offer could be firmed up using the findings from the qualitative investigations and should be appropriate. For example, data could be captured by asking clients to respond to no more than 1-2 questions focused on outcomes.

**Professionals**

Bespoke support to professionals was another area where limited evidence of impact was available and is something that Newport CAB might consider developing going forward. Rather than formalising the existing ad hoc, informal feedback mechanisms, where relevant, we recommend viewing bespoke support to professionals in strategic roles alongside the training events delivered to frontline staff from the same organisations, so that Newport CAB can start capturing impact data at organisational level and offer support accordingly.

**2.3.2 Sustainability**

**Identifying and minimising gambling related harm through the National Citizens Advice**

The main way in which the project and its achievements will remain sustainable after the end of the funding period will be through the National Citizens Advice, its systems and mechanisms, including those developed and put in place by Newport Citizens advice as part of this project. Specifically, as detailed in section 2.2.1.3, Newport Citizens Advice:

- Developed an e-learning training module about gambling related harm, which is available to all Citizens Advice staff across its more than 350 branches-strong network
- In partnership with National Citizens Advice and the Gambling Commission, worked to introduce a new advice issue code, to enable systematic screening for gambling-related harm issues amongst clients and related data gathering.

Citizens Advice is not a treatment provider, so a new model, starting in September 2018 will clarify the pathways for Citizens Advice clients to get support. This will help GambleAware in its aim to increase the number of people seeking support from two per cent of those with problem gambling to six per cent.

The Citizens Advice delivery centre will only offer two sessions and refer them to local services, such as counselling. The model will only be implemented in large cities where such support is available. Screening models will include GAST tools, carried out by anyone in Citizens Advice or by a project worker.

In addition to the increased screening for gambling related harm, the main focus of Citizens Advice delivery centres will be on the training of local frontline workers, raising awareness and education
about gambling-related harm. Given the reported benefits of training participants in the Newport Citizens Advice model, the training is likely to increase the confidence of frontline workers to engage in conversations with their clients about problem gambling and identify any gambling related harm.

**Issues that might need to be considered to ensure sustainability and further development**

In interviews with the evaluator, the delivery team at Newport articulated some of the issues they thought may need to be addressed in future projects. These included:

- The amount of face-to-face support available for clients in the Newport area
- Support available to people at risk in the locations of the training, to enable effective signposting and support
- More linking up for harm-minimisation projects across the country, to help front-line public services link with organisations that have expertise in identifying and addressing gambling-related harm
- Developing appropriate terminology: some in the delivery team were concerned that terminology like 'gambling' and 'addiction' was ineffective with people and could lead them to disengage.
3 CONCLUSIONS AND RECOMMENDATIONS

3.1 Project successes

The Newport Citizens Advice Gambling Support service has successfully implemented the harm-minimisation project, funded by GambleAware. The project has met and exceeded all its set targets for awareness raising, training and client support. Most importantly, by working with its partners and the commissioner, the delivery provider was able to achieve changes to systems at a national level, by putting in place new systems of identifying gambling-related harm by within the Citizens Advice network and mechanisms for improving staff awareness and skills across all centres.

Chrysalis Research has reviewed the available evidence and gathered views from the commissioner, provider and training participants as well as a range of partner organisations and we are satisfied that the Service Report is a good reflection of the project’s activities and achievements.

The levels of engagement and the quality of the inputs have been high and it is reasonable to conclude that this should lead to better identification and ultimately a reduction in gambling-related harm, both in the Newport area and in the areas of Wales and England where the project has delivered good quality training of front-line, public-facing staff. In particular, the clients who have had interventions with the service and completed them have shown reduced levels of problem gambling and psychological distress, as measured by relevant assessment tools, such as PGSI and Core 10.

The evaluation team would also like to highlight the strengths of the delivery provider in working with partners; project management, monitoring and review; commitment to evidence gathering and its use in improving delivery, as well as the team’s proactive and positive attitude and their willingness to go ‘the extra mile’. According to the commissioner and partner organisations, these were highly important to the success of the project.

3.2 Summary of key lessons learnt

The evaluation team has identified several aspects of the project and its implementation, from which learning points can be drawn.

- The project proposal responded well to the programme requirements outlined in the specification and was clear, specific and realistic about most of its activity strands and their
outcomes. Yet, there were some instances where greater clarity and specificity, both in the commissioning documentation and in reporting, would have been helpful and is something for GambleAware and Newport CAB to consider in the future. Specifically, this was concerned with:

- Education and awareness raising activities for non-professionals, including groups at risk such as young people or inmates – no specific targets were set or breakdowns in reach and outputs related to these groups reported.
- Social media – this was perhaps the least defined element of the project. In the future it might be useful to be clear about who exactly messages are trying to reach and whether this is effective.
- Limited evidence, beyond outputs, was also gathered for other ‘less intensive but high reach’ activities, such as open events.
- Activities described in the Addendum lacked the same level of specificity which was visible in the core proposal. In future, GambleAware should be consistent in its requirements for the work it commissions, regardless of whether it related to formally procured or additional work and contract extensions.

- This project demonstrated that:
  - Even where a delivery team is clear about outcomes and how they will be achieved, a theory of change, logic model or a similar framework is useful in checking clarity and consistency. It also enables greater precision in developing appropriate and robust evaluation and monitoring tools.
  - A formative evaluation can play a powerful role in ensuring that a project would produce an evidence set, demonstrating impact of the funded activity, that would be consistent with GambleAware requirements.

- Interviews with staff in strategic roles from partner organisations and training participant feedback all suggest that training frontline staff through a one-off session appears to be beneficial in increasing participants’ knowledge and understanding of gambling-related harm, as well as giving them confidence to initiate conversations with potential problem gamblers and help them on the way to finding support. At the same time, it was also clear from the same evidence that this does not necessarily equate to changes in capacity for an organisation. Staff may be knowledgeable and trained, but may be constrained by the systems within which they operate, the resources available locally, and the priorities set by their organisation. Therefore, additional, strategic level work is needed to complement the front-line training provided by this project.

- The outcomes of the brief intervention support for clients were very positive. However, despite there being a noticeable proportion of clients, particularly in the early stages of the project,
who disengaged and did not complete their treatment, this was not covered in the Service Report. Whilst disengagement from treatment and support is not uncommon in practice related to minimising gambling-related harm, or indeed treating any addictive behaviour and similar issues, in our view it is worth investigating this further and ensuring it is appropriately covered in future evidence gathering and reporting.

3.3 Recommendations

GambleAware

- When commissioning future workforce development activities, GambleAware should consider encouraging bidders to adopt an approach that focuses on organisational change, i.e. invite bidders to work strategically with relevant services and organisations, by helping them put in place the necessary systems and mechanisms as well as offering training to their front-line staff. This would ensure that front-line workers can apply their learning and skills acquired during the training sessions, that they initiate the conversations they got trained to carry out, given the resources to do so, and that any unnecessary barriers or discouragements are removed or negotiated. Small changes, such as adding the signs of problem gambling to a checklist of issues to be vigilant about, could make a difference to the organisation’s ability to address gambling-related harm.

- With regards to evidencing impact, GambleAware should require that:
  - Where relevant, outcomes of awareness-raising, training and professional support activities are tracked at organisational as well as individual level.
  - For individuals taking part in training and similar sessions, evidence gathering activities include mechanisms which explore intermediate and where possible long-term, as well as immediate (captured straight after a training session or a workshop) outcomes.
  - Evidence related to effectiveness and outcomes is captured for all activities, including the less intensive ones, but this is done appropriately, so that it does not have negative impacts on client and professional experiences.
  - Delivery providers offering brief interventions and similar support to clients at risk or experiencing gambling-related harm explicitly report on instances of disengagement from support.

- GambleAware should consider requesting potential delivery providers to demonstrate in their proposals that their project design is outcomes-focused in all its aspects and that the most effective and efficient activities have been chosen to achieve the intended outcomes. A theory
of change, a logic model, or a similar framework might be a useful way of achieving and expressing clarity about and focus on outcomes.

- Where no formal external evaluator is commissioned or they are brought in during the final stages of the project, GambleAware should make sure that an expert assessment of the project processes and evidence-gathering mechanisms is carried out in the beginning of any project and that delivery providers act on the findings of such assessments.

- When commissioning additional activity, on top of a formally accepted proposal, GambleAware should require a clear outline of targets or outcomes that will be achieved and timescales for doing so.

**Newport Citizens Advice**

The delivery provider should:

- Consider ways of ensuring that front-line professionals who get trained by Newport Citizens Advice can and do apply their learning. This is likely to require only small changes to the delivery provider’s existing approach of working with senior stakeholders in the relevant organisations and helping them put necessary systems and mechanisms in place.

- Gather evidence of effectiveness and impact for all its activities and report on it.

- Be more explicit in reporting about instances of client disengagement from support.
APPENDIX 1 RESEARCH QUESTIONS

The first evaluation aim (see introduction) was broken down into a series of research questions:

Relevance

- To what extent do the interventions fit with the needs and priorities of the target group and all relevant stakeholders(s)?
- To what extent did the interventions fit with the objectives of the original Invitation to Tender?
- Who was involved in the design of the project?
- Is there a clear logical framework associated with the project, clearly outlining objective, outcomes, indicators of achievement, means of verification?
- Were the expected results/desired outcomes realistic?

Appropriateness

- Were the interventions/activities consistent with the intended outcomes?

Effectiveness

- To what extent was the choice of the interventions and delivery mechanisms appropriate, in the context of the delivery?
- To what extent did the interventions adapt to changing need or circumstances/were responsive to recommendations?
- To what extent were the planned activities carried out to plan (and as per the agreement on which the grant was awarded) and within the timeframe set? Where they weren’t, why not?
- To what extent were the delivery mechanism effective and which of their aspects were linked with improved outcomes for target groups and stakeholders

Efficiency
• To what extent was there overspend/ underspend on the budget? Is the financial report consistent with the status of implemented activities, activities that were delayed/ cancelled?

Impact

• What were the positive (and negative) changes that have occurred- preferably measured against a set of realistic “desired outcomes”?
• To what extent did the intervention make a real difference to the lives of those it was intending to improve?

Sustainability

• To what extent will the intervention continue if funding ceases?
• What needs to be put in place for the interventions to continue and be further built on?
APPENDIX 2 DOCUMENTS REVIEWED AS PART OF THIS EVALUATION

To prepare this report, the evaluation team reviewed the following types of documents:

- **Formal documents**
  - Project specification
  - Project proposal
  - Monthly and quarterly project progress reports for the period of between January 2016 to June 2018
  - Outputs from assessments and review activities carried out by Prof D. Parsons
  - The Service Report

- **Training materials and resources developed by the delivery provider for awareness raising and training purposes**

- **Raw data** related to workshops and training and brief intervention support activities carried out between 2016-2018

- **Documents related to evaluating project outcomes:**
  - The logic model
  - Evaluation strategy
  - Data collection tools for various strands and activities

- **Evidence shared by partner organisations**, including reports and articles to which the delivery provider contributed, new policies and systems introduced within service user organisations

- **Press articles and media coverage**
APPENDIX 3: PROJECT LOGIC MODEL AND ANALYSIS

**Situation**
Limited understanding of gambling related harm and its impact.
- Gambling Related Harm goes wider than the problem gambler. If affects families, their employers, communities and wider society

**Priorities**
* Reduce and mitigate GRH.
* Increase awareness of GRH and harm prevention work with vulnerable groups and young people.
* Increase identification of GRH with front line advice agencies.
* Improve access to early intervention

**INPUTS**
Funders (RGT)
Sufficient Trained Staff
Time
Advertising
Literature - access to research
Appropriate facilities (outreach venues)
Equipment & Technology
Internal resources
Partner agencies
Build Reporting Framework

**OUTPUTS**

<table>
<thead>
<tr>
<th>Activities</th>
<th>Audience</th>
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</thead>
<tbody>
<tr>
<td><strong>CLIENT ENGAGEMENT</strong></td>
<td></td>
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<tr>
<td>• Information &amp; Advice &quot;teachable moments&quot;</td>
<td></td>
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<tr>
<td>• Structured Brief Intervention face-to-face or telephone (1-6 sessions)</td>
<td></td>
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<tr>
<td>• Holistic Support</td>
<td></td>
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<tr>
<td>- Internal referral/signposting (ie. debt/benefits)</td>
<td></td>
</tr>
<tr>
<td>- External referral/signposting (Mind, GamCare etc.)</td>
<td></td>
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<tr>
<td>• Professional Support</td>
<td></td>
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<tr>
<td><strong>CLIENT ENGAGEMENT</strong></td>
<td></td>
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<tr>
<td>• Problem Gamblers</td>
<td></td>
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<tr>
<td>• Affected Other</td>
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<tr>
<td>• At Risk Groups</td>
<td></td>
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<td>• Partner Agencies</td>
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</tbody>
</table>
**EVENTS**

- Community/Public Engagement
  - Open events: exhibitions, open days, freshers fayres
  - Closed events: presentations, workshops, schools
- Professional Engagement
  - Open events: conferences, networking, exhibitions
  - Closed events: forums, presentations, meetings

**TRAINING**

- Community/Public Training (exhibitions, open days, freshers fayre presentations, workshops, schools)
- Professional Training (conferences, networking, exhibitions forums, presentations, meeting)
- Front Line Debt Advice agencies Training (Presentations, eLearning, national conferences, workshops, face to face training)

**MEDIA CAMPAIGNING**

- Local Press
- Community Directories
- Social Media
- Citizens Advice Network

**MONITORING & EVALUATING**

- Research and evaluation priorities identified
- Client data collection (RGT DRF, PGSI, Core10)
- Feedback (Client & Training)

**EVENTS & TRAINING**

- Vulnerable Groups
- Young People
- Partner Agencies in South Wales
- Staff & Volunteer support workers ie.
  - Citizens Advice Network
  - Health professionals
  - Social Groups
  - Housing Associations
  - Criminal Justice

- Addiction Agencies
- Sports teams & clubs
- Employment & Education Services
- Voluntary Organisations
- Local authority
- Debt agencies
- Public Areas Services
<table>
<thead>
<tr>
<th>OUTCOMES</th>
<th>SHORT TERM (2 year point)</th>
<th>INTERMEDIATE</th>
<th>LONG TERM</th>
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</thead>
<tbody>
<tr>
<td><strong>CLIENT ENGAGEMENT</strong></td>
<td>- Accessible, appropriate advice &amp; support</td>
<td>Project sustainably</td>
<td>Investment in S Wales Gambling Support</td>
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<td></td>
<td>- Knowledge of responsible gambling and risks of GRH</td>
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<td></td>
<td>- Behaviour Change</td>
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<td></td>
<td>- Improved health &amp; well-being</td>
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<td>- Improved relationships</td>
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<td></td>
<td>- Understanding of GRH and its measurements</td>
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<tr>
<td><strong>EVENTS</strong></td>
<td>- Vulnerable communities are identified</td>
<td>Reduce Gambling</td>
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<td>- Increased knowledge of risk of GRH</td>
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<td>- Improved Awareness of gambling support services</td>
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<td>- Community and agency involvement</td>
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<td>- Increased enquiries and referrals</td>
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<td></td>
<td>- Community participation</td>
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<tr>
<td><strong>TRAINING</strong></td>
<td>- Improved knowledge of GRH</td>
<td>Wider dissemination of brief intervention model as effective harm minimisation</td>
<td>Engagement from public sector bodies</td>
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<td></td>
<td>- Ability to identify problem gambling and GRH</td>
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<td></td>
<td>- Increased confidence to offer info &amp; brief advice</td>
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<tr>
<td><strong>MEDIA CAMPAIGNING</strong></td>
<td>- Raise awareness of service externally</td>
<td>Improved national coverage to build capacity for clients to access local support</td>
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<tr>
<td></td>
<td>- Raise awareness of service within Citizens Advice</td>
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<td></td>
<td>- Create national profile with stakeholders</td>
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<tr>
<td><strong>KNOWLEDGE</strong></td>
<td>Evaluation and findings put into practice Greater understanding of GRH</td>
<td>Improved access to education and training</td>
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</table>
Situation and priorities

The model begins with the ‘situation’ and the ‘priorities’. These sections are very brief summaries, but usefully outline the main objectives for the project and the context within which it operates.

It would be valuable to have more detailed objectives set out either within the logic model or within a separate document that is explicitly referenced in the logic model. The ‘situation’ summary is helpful, but is rather generic. It omits any explicit mention of debt as an identifier of problem gambling, which is one of the main drivers for the involvement of Citizens Advice and directly relevant to its clientele. Furthermore, this section references ‘limited understanding of gambling related harm’, and ‘limited research into effective treatment’, yet these issues are not addressed through the objectives or the project. It is therefore unclear what the purpose of this section is. More specific context related to issues affecting the Newport area, the role and function of Citizens Advice in general and the specific expertise that Newport Citizens Advice has in this area would make this section more pertinent.

The priorities cited in the logic model neatly summarise the purpose of the project activity. Again, reference to a fuller set of aims and objectives would be of value here. It would also be useful to state that the project was not limited to the Newport area but would be working across the UK and in partnership with other organisations.

Inputs

This section is quite brief and does not contain detail. For example, it includes ‘Sufficient Trained Staff’, ‘Time’ and ‘Advertising’ but does not quantify any of these. Nor does it suggest what internal resources are required or name any partner agencies. Unlike the outcomes and outputs section, the inputs section contains only headings with no further detail or examples beneath. Costs, specific resources, named agencies and other details would have been useful inclusions here.

Outputs

While much more detailed, this section similarly does not quantify the outputs. Here it would have been useful to include some of the targets set out in the Citizens Advice tender, which show the number of events and participants for each of the activities.

Most of the sections are broken down under the headings, which provides valuable detail, and the distinction between activities and audience is useful. Events and training are particularly detailed and the examples make clear the activities and expected audiences. However, the media campaigning section is rather broad-brush. It may have been useful to illustrate here some of the
campaign themes to illustrate a connection between the training and awareness raising activity and the media campaign.

**Outcomes**

There is a good distinction between outputs and outcomes, and the three tiers of outcomes (short, intermediate and longer term) are useful. The short-term outcomes are time-bound (up to two years) and it would be useful to also delineate intermediate and longer-term outcomes. The long-term outcomes are very broad and ought to be better defined, e.g. to an audience or region, or quantified. We might also expect and hope to see a reduction in gambling related harm among project participants within the intermediate outcomes, given that the short-term outcomes are defined as up to two years.

There are good links between outputs and outcomes and the headings are useful in enabling the reader to connect the process. There are no outcomes listed under ‘monitoring and evaluation’ however.
GambleAware’s response to the evaluation of Newport Citizens Advice Gambling Support Service.

Published March 2020

GambleAware commissioned Chrysalis Research to undertake an independent evaluation of the activity delivered under the grant provided to Newport CAB from 2015 to 2018 (please refer to the main report for full details of the grant). The recommendations made for GambleAware are summarised in the table below, alongside GambleAware’s actions with regards to future commissioning.

Newport CAB were given the opportunity to respond to the recommendations for their organisation arising from the evaluation, however as they are no longer delivering the service locally, they have declined to do so due to issues related to organisational capacity.

<table>
<thead>
<tr>
<th>Evaluation recommendations and GambleAware response</th>
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<tr>
<td>When commissioning future workforce development activities, GambleAware should consider encouraging bidders to adopt an approach that focuses on organisational change, i.e. invite bidders to work strategically with relevant services and organisations, by helping them put in place the necessary systems and mechanisms as well as offering training to their front-line staff. This would ensure that front-line workers can apply their learning and skills acquired during the training sessions, that they initiate the conversations they got trained to carry out, given the resources to do so, and that any unnecessary barriers or discouragements are removed or negotiated. Small changes, such as adding the signs of problem gambling to a checklist of issues to be vigilant about, could make a difference to</td>
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<td>This has been built into the delivery requirements of the new Citizens Advice (E&amp;W) programme which has been running since October 2018 and has been a key focus of discussions with Citizens Advice (Scotland) which begins delivery in April 2020. This key learning has also been taken into account in the development of GambleAware’s strategic partnerships with, for example, the Royal Society for Public Health, the PSHE Association and Personal Finance Research Centre, whereby the role of the project partner in leveraging strategic opportunities is clearly defined and regularly revisited during the course of project delivery.</td>
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the organisation’s ability to address gambling-related harm.

*With regards to evidencing impact, GambleAware should require that:*  

| Where relevant, outcomes of awareness-raising, training and professional support activities are tracked at organisational as well as individual level. | This has been fed into programme design with CA (E&W) |
| For individuals taking part in training and similar sessions, evidence gathering activities include mechanisms which explore intermediate and where possible long-term, as well as immediate (captured straight after a training session or a workshop) outcomes. | This has been fed into programme design with CA (E&W) |
| Evidence related to effectiveness and outcomes is captured for all activities, including the less intensive ones, but this is done appropriately, so that it does not have negative impacts on client and professional experiences. | This has been fed into programme design with CA (E&W) |
| Delivery providers offering brief interventions and similar support to clients at risk or experiencing gambling-related harm explicitly report on instances of disengagement from support. | This has been fed into programme design with CA (E&W) |
| GambleAware should consider requesting potential delivery providers to demonstrate in their proposals that their project design is outcomes-focused in all its aspects and that the most effective and efficient activities have been chosen to achieve the intended outcomes. A theory of change, a logic model, or a similar framework might be a useful way of achieving and expressing clarity about and focus on outcomes. | All projects now have clear and articulated theory of change and agreed KPIs and reporting protocols prior to contracting. |
| Where no formal external evaluator is commissioned or they are brought in during the final stages of the project, GambleAware | New projects will have evaluation considered prior to contracting as part of project set up. |
should make sure that an expert assessment of the project processes and evidence-gathering mechanisms is carried out in the beginning of any project and that delivery providers act on the findings of such assessments.

Where needed external expertise will be sought.

Evaluation across the portfolio is being commissioned by GambleAware’s Research and Evaluation team.

When commissioning additional activity, on top of a formal proposal, GambleAware should require a clear outline of targets or outcomes that will be achieved and timescales for doing so.

All projects now have clear and articulated theory of change and agreed KPIs and reporting protocols prior to contracting.