

DMHAS / Disordered Gambling Integration Manual

Mission:

To increase the capacity of substance use disorder and mental health treatment/recovery programs to address gambling and problem gambling through enhanced screening, assessment, awareness, intervention, recovery and health promotion strategies. To make gambling problems and behaviors a relevant topic of conversation within the broader substance use and mental health disorder treatment/recovery communities.

Procedure:

Welcome to the Disordered Gambling Integration initiative (DiGIn). The activities and tasks that your agency has committed to as a participant in this initiative are listed below and will also be separately described in detail.

Agency Tasks and Activities:

1. Identify and assign at least one (1) management level staff member (“DiGIn lead) to represent the Contractor on the DiGIn Guide Team. The DiGIn Guide Team is comprised of representatives from each of the DMHAS funded DiGIn programs. The Team will be managed by DMHAS staff and will be charged with overseeing implementation of the DiGIn initiative.
2. Ensure that the Contractor’s Team member(s) attend Team meetings once every two (2) months.
3. Ensure the identified DiGIn lead attends quarterly regional gambling awareness team meetings hosted by the Regional Behavioral Health Action Organization.
4. Assist the Department with development and implementation of a standardized Problem Gambling Integrated Intake and Assessment Tool.
5. Develop and implement a work plan for integrating discussion of problem gambling into clinical interventions, support services, case management and psychoeducation. The Department shall review and approve said plan prior to implementation. If plan is not approved, the Contractor shall be required to make revisions until such plan is approved.
6. Develop and implement a plan for integrating problem gambling into the Agency’s mission statement, policies, protocols and procedures. The Department shall review and approve said plan prior to implementation. If the plan is not approved, the Contractor shall be required to make revisions until such plan is approved.

7. Identify and designate at least three (3) key staff per year who will participate in DiGIn training facilitated by the Department and begin to incorporate problem gambling awareness and treatment into the Contractor's existing treatment modalities. Such staff will be designated as the Contractor's experts in provision of problem gambling treatment and will be required to successfully complete at least one (1) of the following requirements within one (1) year of designation:
 - i. Connecticut Certification Board Specialty Certificate in Problem Gambling, which includes 30 hours of Problem Gambling training, 4 hours of case consultation, and 100 direct client contact hours; or
 - ii. Department of Mental Health and Addiction Services Gambling Awareness Certificate of Competency, which includes 25 hours of Problem Gambling training and on-going quarterly attendance at a regional gambling awareness team meeting, hosted by the Regional Behavioral Health Action Organization.
8. Ensure that, in addition to the three (3) key staff identified as the Contractor's DiGIn experts, all Contractor clinical and direct care staff complete three (3) hours of DiGIn training annually. Such training shall be made available by the Department either online or in person, at the Contractor's request, and based upon availability of Department staff qualified to conduct such training.
9. In year one and year three, by the third quarter of the fiscal year of the Contract Term, complete a Department-provided DiGIn site visit evaluation. Thereafter, the Contractor shall attend quarterly DiGIn meetings facilitated by the Agency to review the Contractor's compliance on completing Agency-specific goals.

DiGIn Guide Team:

The DiGIn guide team meets once every two (2) months. The Guide Team is a group that provides oversight and direction for the initiative. Staff assigned to this group should be able to bridge the development of DiGIn protocols and policies with those of their respective agencies. Management level staff members should be assigned to this group. At least one staff member from each agency should be appointed as a Guide Team participant.

Develop Problem Gambling Integrated Intake/Assessment:

Components to the development of a Problem Gambling (PG) Integrated system of care are to comprehensively incorporate gambling and problem gambling in the agency's intake and assessment process. (See examples of ways to integrate gambling into assessments in Appendix A).

Integrate Problem Gambling into Treatment/Recovery Planning Process:

Develop PG Integrated Awareness/Educational/Treatment Materials (See examples of worksheets and curriculum by going to www.ct.gov/dmhas/pgs, click on *Resources* tab at the bottom of the homepage, and you will find information in the *Treatment Manuals and Guides* section).

Key Staff Training and Certification:

Key staff are professionals who have been selected to be the DiGIn specialists in their programs/agencies. Their commitment to the initiative is to meet the criteria for obtaining the Specialty Certificate in Problem Gambling offered through the Connecticut Certification Board (see: <http://www.ctcertboard.org/> to learn about the certification expectations) or obtain the Gambling Awareness Certificate of Competency (see: <https://gamblingawarenessct.org/clinical-workforce-development/> to learn more about the certification expectations).

Three (3) Hours of Training for Staff in DiGIn Program:

One of the ways staff can complete the initial three (3) hours of training, is to take the DiGIn web-based training on the DMHAS, Learning Management System called: *Introduction to Integrating Gambling and Problem Gambling into Substance Use and Mental Health Disorders Programs*. This is meant for all clinical and direct care staff in the participating DiGIn program. Instructions to register for this online training are listed below:

Log on to the DMHAS Learning Management System at <https://ctlms-dmhas.ct.gov>. In the catalog search field put the first few words of the title (i.e. Introduction to Integrating), then click *Enter* on your keyboard. Click on the title of the training to see a course description and CEU information. Scroll to the bottom of the screen and click on *Launch*.

If you forgot your username and/or password an email request must be sent to workforce.development@ct.gov to reset. If you do not have a username and password, go to www.ct.gov/dmhas/workforcedevelopment and click on *My Profile Information Form*. Fill out the form and e-mail to workforce.development@ct.gov.

To obtain three (3) hours of subsequent annual training, review the following websites for upcoming gambling-specific trainings: <https://ccpg.org> or www.gamblingawarenessct.org.

DiGIn Site Visit/Evaluation:

Each DiGIn program will be reviewed initially to establish a baseline, then again on year three (3) to measure the growth of DiGIn over the course of the contract period (See Appendix B for a sample of the DiGIn Fidelity Review Form). This site visit evaluation process is described below.

Process overview:

1. Observations of the milieu and physical settings.
2. Focused but open-ended interview of agency directors, clinical supervisors, clinicians, support personnel and clients.
3. Review of documentation such as medical records, program manuals, brochures, daily patient schedules, intake and assessment forms, and other materials that may seem relevant.

See below for some items to consider when arranging the site visit.

1. Advance scheduling - DiGIn Coordinator to inform DMHAS staff:
 - a. Define scope for the DiGIn program.
 - b. Clarify time allocation requirements.
 - c. Define personnel and clients to be involved.
 - d. Define materials to be available.
 - e. Time and staff to be included in feedback session.
2. Personnel to be involved (recommended):
 - a. Program director.
 - b. Program clinical leaders and supervisors.
 - c. Select clinicians.
 - d. Clients (mainly those with primary problems other than gambling).
 - e. Support staff - receptionists, clerks, billing.
3. Tour of physical site:
 - a. Waiting room,
 - b. Group rooms,
 - c. Offices.
4. Document review:
 - a. Brochures,
 - b. Medical records,
 - c. Client schedules,
 - d. Client education materials,
 - e. Manuals,

f. Policies and procedures.

Site Visit Agenda – Example

10:00 am – 11:00 am	Interview with agency management.
11:00 am – 11:30 am	Tour of physical site (include lobby, waiting areas, group rooms, counselor rooms, etc.)
11:30 am – 12:00 pm	Interview with clinicians and support staff (data management, billing, receptionists, etc.)
12:00 pm – 12:30 pm	Interview with clients.
12:30 pm – 1:00 pm	Records / materials review and conclusion.

Depending on agency schedules, various meetings can be rearranged, but time allotted should be maintained.

Three (3) charts should be provided for review. Please include a discharged client's chart.

Quarterly Agency Specific DiGIn Meetings:

The quarterly virtual, or on-site meetings, will involve the DiGIn key staff members tasked with integrating gambling at their agency. This group will focus on the status of agency specific DiGIn goals, report on successful initiatives, and problem solve obstacles/barriers to implementation.

Appendix A

Introductory Question:

In the past year, have you participated in any of the following: keno, lottery scratch offs, betting on sports, playing cards for money, going to the casino, online gambling, Off Track Betting, Daily Fantasy Sports, and purchasing loot boxes in videogames?

- None
- Less Than Monthly
- Monthly
- Weekly
- Daily

Brief Biosocial Gambling Screen (BBGS)

1. During the past 12 months, have you become restless, irritable or anxious when trying to stop/cut down on gambling?

- Yes
- No

2. During the past 12 months, have you tried to keep your family or friends from knowing how much you gambled?

- Yes
- No

3. During the past 12 months, did you have such financial trouble that you had to get help from family or friends?

- Yes
- No

Recovery Network of Programs (RNP)

1a. When not using alcohol, drugs and/or gambling, how would you describe your mental health symptoms?

1b. How would you rate the severity of your mental health symptoms? (0 no symptoms - 5 extreme symptoms)

0

1

2

3

4

5

2a. When not experiencing MH symptoms, how would you describe your alcohol, drug use and/or gambling?

2b. How would you rate the severity of your alcohol and/or drug use? (0 no use - 5 extreme use)

0

1

2

3

4

5

3a. When not using alcohol and/or drugs, how would you describe your gambling or other risky behaviors?

3b. How would you rate the severity of your gambling? (0 no use - 5 extreme use)

0

1

2

3

4

5

RECREATIONAL ACTIVITIES:

- | | | |
|---------------------------------------|---|---|
| <input type="checkbox"/> Play Sports | <input type="checkbox"/> Read Recreationally | <input type="checkbox"/> Have Time to Relax |
| <input type="checkbox"/> Have Hobbies | <input type="checkbox"/> Spend Time with Family | <input type="checkbox"/> Listen to Music |
| <input type="checkbox"/> Go to Movies | <input type="checkbox"/> Socialize with Friends | <input type="checkbox"/> Gambling |

Other:

Which activity gives you the most joy?

What do you do when feeling stressed?

Family of Origin

Name	Age	Deceased	Family Member	Addiction History	MH History	Gambling History	Relationship
<i>Mother</i>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>
<i>Father</i>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>
<i>Step-Mother</i>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>
<i>Step-Father</i>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>
<i>Sibling</i>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>
<i>Sibling</i>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>
<i>Sibling</i>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>

Nuclear Family:

Name	Age	Length in Relationship	Addiction History	MH History	Gambling History	Relationship
<i>Spouse</i>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>
<i>Ex-Spouse</i>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>	<input type="text"/> <input type="button" value="v"/>

If Yes to Addiction, MH or Gambling, Please Explain

STAGES OF CHANGE

Stage of Change Regarding Substance Use/Addiction:

Stage of Change Regarding Problem Gambling:

Stage of Change Regarding Mental Health:

INITIAL PROBLEM LIST (In order to develop initial individual recovery plan goals):

code	Description	
		<input type="checkbox"/> Active <input type="checkbox"/> Deferred
Substance Use	Substance Use	Deferred
Mental Health	Mental Health	
Medical	Medical	
Legal	Legal	Deferred
DCF	DCF	
Education	Education	
Employment	Employment	Deferred
Family	Family	
Gambling	Gambling	
Housing	Housing	Deferred

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United Community & Family Services (UCFS)

SUBSTANCE USE/GAMBLING

Alcohol and/or other Drugs

During his/her life, has the client had a problem with alcohol and/or other drugs: DURING HIS/HER LIFE, HAS THE CLIENT HAD A PROBLEM WITH ALCOHOL AND/OR OTHER DRUGS

Has the client used any (even once) of the following drugs in the past 90 days: HAS THE CLIENT USED ANY (EVEN ONCE) OF THE FOLLOWING DRUGS IN THE PAST 90 DAYS (SELECT ALL THAT APPLY)

Current use of alcohol/drugs/other substances/or gambling: IS CLIENT CURRENTLY USING ALCOHOL AND/OR DRUGS OR OTHER SUBSTANCES/OR GAMBLING .

History of Substance Use and/or Gambling (other than current use previously identified): IS THERE ANY HX OF ALCOHOL OR SUBSTANCE USE OR GAMBLING IN LIFETIME (IN ADDITION TO IDENTIFIED IN CURRENT USE)? .

Any additional comments: Yes SUBSTANCE USE/GAMBLING ADDITIONAL COMMENTS .

Betting/Gambling

Have you ever won anything: Yes . Provide Details: PROVIDE DETAILS: WHAT DID YOU WIN.

How much money did you spend placing bets for money or something of value like personal items, sneakers, etc. or to win things in the past year (e.g., cards, dice, dominos, fantasy sports, video games that you bet on or any other game you place bets with): Describe:.

Is there any history of money related arguments or confrontations: Yes Provide Details: PROVIDE DETAILS.

Does client, caregiver or clinician identify any issues or concerns related to gambling, scratch-offs, betting, etc. at this time: Yes (Opens the NODS-CLIP short problem gambling screen).

Midwestern Connecticut Council of Alcoholism (MCCA)

Substance Use and Gambling Treatment History

Alcohol / Drug Use: Do you believe that you have/had a problem with substance and/or gambling use?

Yes

No

If yes, enter below:

Have you ever been untruthful about the extent of your gambling, or hid it from others?

Yes

No

Comments:

Consequence of addiction / drug use / gambling: Which of the following do you identify as a consequence of your substance and/or gambling use?

Loss of Control

Hallucinations

Loss of Child Custody

Tolerance Change

Delirium Tremens

Problems in Relationships

Blackouts

Job Loss

Arrests

Shakes

Absenteeism

Alcohol/Drug Related Accidents/Injuries

Morning Use

Financial Problems

Evidence of Withdrawal - When Stopping or Decreasing Use

Cravings

Divorce

Unsuccessful attempts at stopping

Seizures

Biggest consequence of substance / gambling abuse? What do you believe is the biggest consequence of substance abuse and/or gambling?

Have you ever overdosed? Yes

History of Suicidal or Homocidal Ideation

Have you ever thought about intentionally hurting yourself?

- Yes
 No

Are you currently experiencing thoughts of intentionally harming yourself?

- Yes
 No

Have you ever considered suicide?

- Yes
 No

Have you ever attempted suicide?

- Yes
 No

Are you currently contemplating ending your life?

- Yes
 No

Explain: If Yes: were drugs/alcohol or gambling involved and if received treatment

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Outpatient - Danbury -
BioPsychoSocial Assessment

Have you ever seriously thought about intentionally harming another person or animal?

- Yes
 No

Are you currently experiencing thoughts or urges to hurt another person or animal?

- Yes
 No

Have you ever intentionally caused physical harm to another person or animal?

- Yes
 No

Explain: If Yes: were drugs/alcohol or gambling involved and if received treatment

FAMILY INCOME

Total Income Per Year
(In thousands):

Number Dependent on
Income:

In Debt? Yes

No

If YES, how much?

What type of Debt?

Debt due to Gambling? Is any debt due to gambling activities

Yes

No

Have you ever borrowed
money in order to
gamble or cover lost
money:

Yes

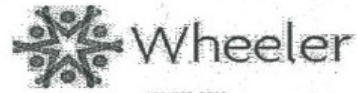
No

Comment:

Describe your
involvement with AA/
NA/GA:

What is your attitude
towards AA/NA/GA?

Wheeler Clinic



860-793-3500

Social History

Is there any history of mental illness, suicide attempts or substance abuse by parents, siblings or close relatives?

Check all that apply

Father

Verbal/Emotional Abuse
Physical Abuse/Family Violence
Substance Abuse
Suicide/Attempted Suicide
Incest/Sexual Abuse
Gambling
Mental Health
Eating Disorder

Mother

Verbal/Emotional Abuse
Physical Abuse/Family Violence
Substance Abuse
Suicide/Attempted Suicide
Incest/Sexual Abuse
Gambling
Mental Health
Eating Disorder

Sibling

Verbal/Emotional Abuse
Physical Abuse/Family Violence
Substance Abuse
Suicide/Attempted Suicide
Incest/Sexual Abuse
Gambling
Mental Health
Eating Disorder

Other

Verbal/Emotional Abuse
Physical Abuse/Family Violence
Substance Abuse
Suicide/Attempted Suicide
Incest/Sexual Abuse
Gambling
Mental Health
Eating Disorder

Community supports/leisure/recreational/religious activity

Check all that apply

12 step or other community support group	TV/Movies
Religious/Spiritual activity	Go to club
Hobbies	Gambling
Party/Drink/Get High	Go out to eat/for coffee
Talk to friends	Other
Shop	
Sports/Exercise	
Volunteer Work	

Appendix B

DiGIn Fidelity Review (rev. March 2024)

Date:	Agency:		Program:		LOC:
Reviewer:					
Review Item	0 (Non Gambling Informed Services)	1 (Met Expectation/ Acceptable)	2 (Best or Emerging Practice)	Score	Notes
1. Identify and assign at least one (1) management level staff member ("DiGIn lead) to represent the Contractor on the DiGIn Guide Team.	A management level staff member has not been identified.	A management level staff member is identified, and is overseeing the DiGIn initiative.	The DiGIn lead staff member has obtained a gambling credential.		
2. Ensure that the Contractor's Team member(s) attends Guide Team meetings once every two (2) months.	Agency does not consistently have a representative at Guide Team meetings.	Agency representatives attend at least 80% of the Guide Team meetings.	Agency representatives attend 100% of the Guide Team meetings.		
3. Ensure the identified DiGIn lead attends quarterly regional gambling awareness team meetings hosted by the Regional Behavioral Health Action Organization.	Agency does not consistently have a representative at regional gambling awareness team meetings.	Agency representatives attend at least 75% of the regional gambling awareness team meetings.	Agency representatives attend 100% of the regional gambling awareness team meetings.		
4. Development and implementation of a standardized Problem Gambling Integrated Intake and Assessment Tool (only applies to clinical programs).	Limited integration of gambling within the intake and assessment tool.	Integration of an evidenced based screening tool.	Integration of gambling within multiple areas of the intake, including an evidenced based screening tool.		
5. Develop and implement a work plan for integrating discussion of problem gambling into clinical interventions, support services, case management and psycho-education.	Limited discussions of gambling at the agency.	At least a monthly discussion on gambling at the agency.	Multiple discussions of gambling at the agency on a monthly basis.		
6. Develop and implement a plan for integrating problem gambling into the Agency's mission statement, policies, protocols and procedures.	No change in the mission statement, policies, protocols or procedures.	Integration of gambling into at least one of the following areas: mission statement, policies, protocols or procedures.	Integration of gambling into the mission statement, policies, protocols and procedures.		

Review Item	0 (Non Gambling Informed Services)	1 (Met Expectation/ Acceptable)	2 (Best or Emerging Practice)	Score	Notes
7. Identify and designate at least three (3) key staff per year who will participate in DiGIn training facilitated by the Department and begin to incorporate problem gambling awareness and treatment into the Contractor's existing treatment modalities.	Less than three (3) key staff members are identified.	Three (3) key staff are identified.	More than three (3) staff members are identified in multiple agency programs.		
8. Key staff will obtain gambling certification.	Less than three (3) key staff members have obtained the Specialty Certificate in Problem Gambling (SCPG) or the Gambling Awareness Certificate of Competency (GACC).	At least three (3) key staff members have obtained the Specialty Certificate in Problem Gambling (SCPG) or the Gambling Awareness Certificate of Competency (GACC).	At least three (3) key staff members have obtained required certification, and at least one (1) staff member has the International Certified Gambling Counselor (ICGC) credential.		
9. Ensure that, in addition to the three (3) key staff identified as the Contractor's DiGIn experts, all Contractor clinical and direct care staff complete three (3) hours of DiGIn training annually.	All staff in the identified DiGIn program have not taken a three (3) hour training.	All staff in the identified DiGIn program have taken a three (3) hour training.	All staff in the agency have taken a three (3) hour training.		

Identified Agency Goals:

- 1)
- 2)
- 3)