
NORTHERN IRELAND ASSEMBLY ALL PARTY GROUP ON REDUCING HARM RELATED TO GAMBLING

Response to the Department of Health Consultation on NICE Clinical Guideline
NG248 - Gambling-related harms: identification, assessment and management

10 March 2025

The Northern Ireland Assembly All-Party Group on Reducing Harm Related to Gambling welcomes the opportunity to respond to the Department of Health consultation on the NICE Clinical Guideline NG248 - Gambling-related harms: identification, assessment and management.

The APG strongly supports the full implementation of the NICE guideline in Northern Ireland. The guideline provides much needed information to commissioners, providers, healthcare professionals and social care practitioners on how to identify, assess, support and treat people experiencing gambling-related harms, their families and affected others.

Recommendations 1.1.2 – 1.1.7 state that healthcare professionals and social care practitioners in all settings ask people about gambling, “even if they have no obvious risk factors for gambling-related harm,” and provides advice on how best to ask about gambling. This aligns with one of the recommendations of the APG’s recent inquiry report,¹ that screening programmes be introduced across all health and social care services in NI to help identify and assist those who are experiencing gambling-related harms but are reluctant to seek support.

Recommendation 1.3 states that “Gambling treatment services will be commissioned by the NHS but may be provided by a range of providers, including the NHS or voluntary sector organisations”. There are currently no commissioned gambling treatment services in NI. The APG recommends that the Department of Health commissions statutory services specifically for gambling-related harm, in line with the NICE guideline, to address the unmet need in our healthcare system.

¹ APG on Reducing Harm Related to Gambling (2024): [Inquiry Report: Public Health Approaches to Gambling-Related Harms in NI](#)

The APG acknowledges the role of the community and voluntary sector in providing information, support and services. Addressing gambling harms requires a tiered approach, ranging from signposting and providing guidance to families and affected others, to counselling those at risk and treatments such as CBT.

There are several community and voluntary organisations providing excellent services in NI, including [Extern Problem Gambling](#), [Dunlewey Addiction Services](#), [Cuan Mhuire, Chapter One](#), and [Gamblers Anonymous](#), which the Department can commission, as outlined in Recommendations 1.3.1 and 1.3.2.

Recommendation 1.3.7 states that “Commissioners and providers should ensure that the workforce delivering support and treatment services for people experiencing gambling-related harms is trained and competent to do so.” The APG has recommended that training should be available to all health and social care professionals to allow them to effectively identify, assess and treat patients presenting with gambling-related harms. We urge the Department to ensure this training is provided, and is informed by the NICE guidelines, is delivered independent of industry-influence, is evidence-based, has been evaluated and involves people with lived experience of gambling harms.

The APG has heard evidence on multiple occasions that there is a shortage of psychologists and psychiatrists working in addiction services across NI. In order to provide the recommended level of support and treatment to all those who need it, the Department must address the ongoing workforce crisis in addiction and mental health services in NI.

Recommendation 1.5.1 recognises that multidisciplinary teams (MDTs) are important to providing “holistic care” to people experiencing gambling-related harms. In February this year, the APG heard evidence from healthcare professionals who said that MDTs have been an effective model for delivering care for other forms of addiction and suggested that treatment for gambling addiction could adopt a similar approach.² The Department of Health is currently rolling out Primary Care MDTs across NI, with an additional £61m to expand the programme announced last week.³ The APG welcomes this announcement, and asks the Department to ensure that those working as part of MDTs are appropriately trained to provide care to people experiencing gambling-related harms. It also recommends that, where necessary, MDTs include people working in the criminal justice system and voluntary sector organisations, in line with Recommendation 1.5.1. This should also include those with lived experience in peer

² APG on Reducing Harm Related to Gambling, 26 February 2025, “[APG hears from senior healthcare professionals on treatment services](#)”

³ Department of Health, 4 March 2024, “[Nesbitt welcomes MDT funding](#)”

support roles. Recommendation 1.5.11 states that peer support should be offered as “an integral part of the support and treatment for gambling-related harms”.

The Rationale and Impact section of the guideline notes that implementing many of these recommendations “will increase” the number of people being directed to sources of support and treatment, thus increasing resource use for the NHS. However, the guideline also points out that “effective early identification and treatment may reduce the number of people experiencing longer term or more serious harm from gambling, which may lead to savings for the NHS, and the wider public sector, including the criminal justice system.”

In a recent NI Assembly debate on supporting a public health approach to tackling gambling related harms,⁴ Health Minister Mike Nesbitt emphasised that the “mental health and addiction services are already challenged by the adequacy of the resources.” Therefore, the APG is concerned that the NICE guideline will not be fully implemented because services are already understaffed and underfunded.

The Minister stated that “funding for gambling harm services should be clearly seen as new or additional funding that does not, in any way, disadvantage core mental health and addiction services and their service users.” Additional funding can be provided through the introduction of an industry levy on gambling operators, as provided for under the Betting, Gaming, Lotteries and Amusements (Amendment) Act (Northern Ireland) 2022.⁵ The Executive Ministers for Health, Communities and Education have also written to the UK Government asking that NI receives a share of the statutory levy on gambling operators.⁶

As discussed in the APG’s inquiry report on the future of gambling regulation in NI,⁷ in New Zealand, the Ministry of Health has a say in the size of an industry levy. The APG suggests that the Department of Health here works with the Department of Communities to ensure that the industry levy is brought forward as soon as possible to enable the full implementation of the NICE guideline, and that the Department of Health has a say in setting the level of the levy based on the additional resource need.

⁴ Northern Ireland Assembly [Official Report](#), 28 January 2025

⁵ Betting, Gaming, Lotteries and Amusements (Amendment) Act (Northern Ireland) 2022, [Section 15](#)

⁶ [AQW 21246/22-27](#)

⁷ APG on Reducing Harm Related to Gambling (2021): [Inquiry Report: The Future Regulation of Gambling in Northern Ireland](#)