

OCTOBER 31, 2025



Gambling Resources and Support Program (GRASP) for Opioid Treatment Programs:

First Year Progress

Overview of our project logic, goals, plans, and achievements



Project Objectives

Supporting Opioid Treatment Programs through GRASP Implementation



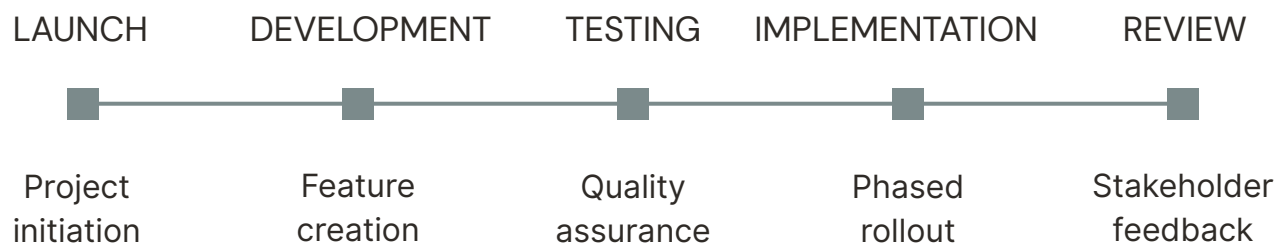
Research completed within Opioid Treatment Programs (OTPs) has demonstrated there is a high rate of co-occurring gambling problems among OTP patients, however, gambling behaviors are rarely addressed in OTPs leading to undesirable outcomes.

The Gambling Resources and Support Program (GRASP) addresses this critical shortcoming by integrating gambling support within opioid treatment settings, aiming to enhance patient outcomes and reduce gambling-related harm. By leveraging diverse partnerships and tools, GRASP fosters effective interventions tailored for individuals in treatment for opioid use disorder.

Through strategic collaboration between Nevada's Opioid Treatment Programs (OTPs) and GRASP Support Team partners from the Nevada Division of Public and Behavioral Health (DPBH), the UNLV International Gaming Institute, EVIVE Digital Health, Problem Gambling Solutions, Inc., and the Nevada Council on Problem Gambling, GRASP focuses on integrating standardized gambling screening and support resources into OTPs. This program aims to empower OTPs to effectively address gambling behaviors and improve overall treatment success for patients.

Milestones

Key milestones achieved in the first year project



The first year of the project has been a journey of **significant development** and learning. We successfully launched the project, marking the beginning of our innovation journey.

The **launch** included assembling a GRASP Support Team through contracts executed and monitored by the Nevada Division of Public and Behavioral Health with three organizations: Problem Gambling Solutions, Inc. for overall project coordination and development of OTP workforce trainings and tools; Nevada Council on Problem Gambling for providing OTP patient education and sub-contracting with Evive, a leading digital health platform addressing problem gambling, and; University of Nevada Las Vegas, International Gaming Institute, for program evaluation.

Following the launch, the **development** phase saw our team create essential features that align with our project's vision. This included the development of GRASP specific pathways, lessons, and provider portals on the Evive digital health platform. The Evive digital health platform supports an app-based intervention that reinforces the use and understanding of basic recovery skills, education about links between gambling and substance use recovery, and offers robust problem gambling interventions. The platform also includes a web-based portal for OTP providers to access program materials including Evive lessons that can be printed and used as patient handouts.



Other vital components of program development that took place was creating project implementation plans and supporting documents including a training curriculum for OTP staff on how and why to integrate the topic of gambling into their clinical processes. Training materials were accompanied by written manuals, one on program implementation developed for OTP administrators and another on clinical implementation for use by OTP clinical staff. Program brochures, posters, and other program collateral were created and posted on the Evive provider portal for ease of access by partnering OTPs. The UNLV evaluation team developed an evaluation plan along with evaluation tools including programming patient surveys onto computer tablets provided to OTPs.

Testing followed, where we focused on maintaining high-quality standards through rigorous quality assurance processes. Some of this testing involved recruiting counselors and peer mentors working within participating OTPs to review and provide feedback on Evive GRASP lessons, training materials, and tablet usage. Internal testing on the Evive app was extensive as was testing of the evaluation tablet's programming and functionality in reliably transmitting data to UNLV's secure data management system.

The **implementation** phase allowed us to deploy our solutions using a phased roll-out approach. DPBH developed contracts with OTPs one at a time rather than all at once. This allowed the GRASP Support Team to learn from early adopters and adjust as needed. The first OTP GRASP contract was executed in the fourth quarter of the first year of the SOR4 grant and by the end of the first year, six OTPs had GRASP contracts in place with all six implementing GRASP by the end of the first year (September 30, 2025)

Finally, we entered the **review** stage, gathering constructive feedback to refine our approach. As we assess our progress, we remain committed to adapting and enhancing our strategies for future success, ensuring our project not only meets but exceeds expectations. This timeline reflects our dedication and determination to achieve our objectives while navigating challenges along the way.

Achievements: Celebrating Success

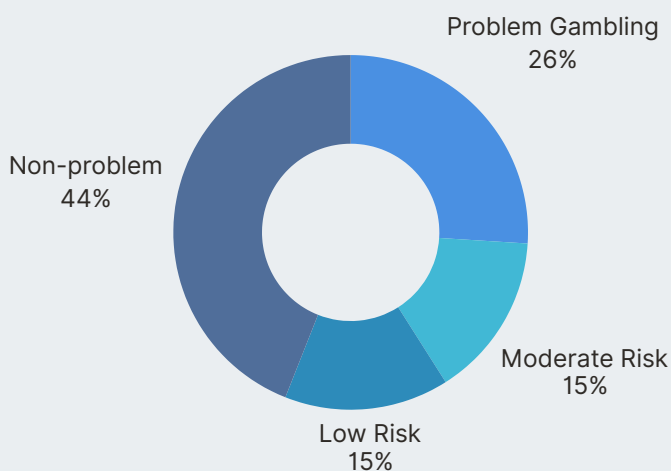
Clinician Training Seminar Evaluation



- 84.6% found the training curriculum was effective
- 84.6% found the training helpful
- 82% would recommend it to others in the field
- 84.6% strongly agreed the instructors were effective

OTP Patient Screening Results Problem Gambling Severity Index

N = 356



This first year of GRASP for OTPs marked significant **milestones and achievements** for our project team. The bulk of our achievements were previously reported in the discussion of our project's milestones. The first year of the 3-year project concluded with 6 of Nevada's 14 OTPs actively participating in GRASP, 43 of their staff having been trained on how to integrate the topic of gambling into their clinical processes, and 79% of OTP patients invited into GRASP consenting to participate in GRASP evaluation efforts. The team embraced challenges, demonstrating resilience and adaptability, particularly during phases that required innovative solutions. Our initiatives led to improved processes that we will implement in year 2 of the project, reflecting our commitment to excellence. We've organized a GRASP Support Team first year program review meeting to celebrate our successes and implement program learnings. As we move forward, we will build on these successes while addressing challenges to ensure continued progress and innovation. Our journey has just begun, and we are excited about what lies ahead!

Challenges Encountered



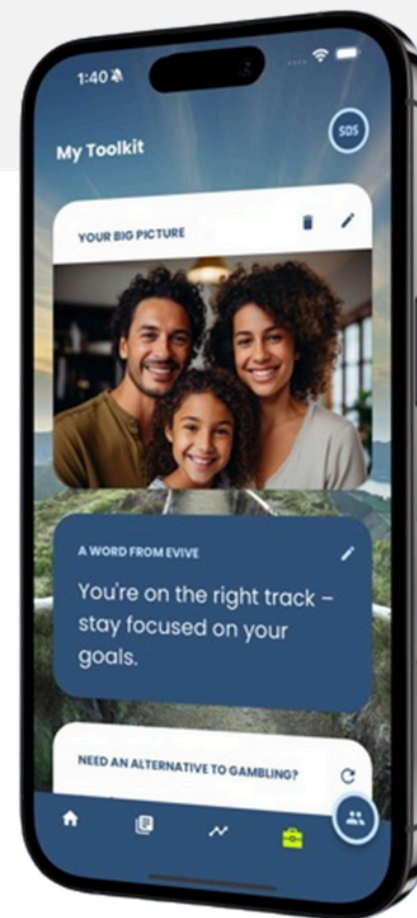
Throughout the course of our first-year project, we encountered several significant challenges that required innovative thinking and teamwork to overcome. One constraint involved contract delays, which is not an unusual occurrence in the first year of a multi-year project. The final GRASP Support Team contract was executed eight months into the first year of the grant cycle and contracts with the first group of OTPs were executed in the fourth quarter. These delays disrupted our initial project timeline although provided valuable extra program development time.

Other challenges were faced in areas of technology, logistics, and implementation. For example, OTPs are historically under-resourced and highly regulated. Launching a new program in a system that is strained needs to be responsive and adaptable to the needs of each OTP participating in the project. Fortunately, the administration and staff of the OTPs who were early adopters of this project understood the value of the project and carved out time to collaborate and problem solve with the GRASP Support Team. Our team held multiple brainstorming sessions where all ideas were welcomed, resulting in creative solutions to meet project challenges. Communication amongst team members proved vital, as we implemented regular check-ins to monitor progress and address concerns promptly. Additionally, adapting to unforeseen circumstances, such as the OTP's challenges in stabilizing their GRASP Coordinator position and fewer patients than expected with smart phones, pushed us to re-evaluate our strategies and prioritize tasks effectively. These experiences, while challenging, fostered a stronger team dynamic and enhanced our problem-solving capabilities, preparing us for future challenges. We believe that overcoming these obstacles has strengthened our resolve and equipped us with valuable lessons that will contribute to our overall project success.

Evive Feedback from OTP Staff

"I thought that the GRASP training was useful and relevant for our patients at TLCC. The presenters correctly pointed out that patients addicted to opiates are more likely than the general population to develop Problem Gambling Disorder and therefore present a suitable target audience for their gambling management/gambling cessation programs. I think the Evive app shows great promise. Like other addiction management or habit management apps, this app appears to provide virtual accountability that the user always has nearby, along with tips and suggestions to manage and modify disordered gambling habits. It's like a counselor in their pocket or purse. I particularly like the way it has users check in regularly to report their activity and their mindset from day to day. Developing this kind of profile over time makes it easier for the patient and the counselor to see patterns and how those patterns change over time."

-Michael Boyd (Counselor @ The Life Change Center)



"This Evive app is easy to use and navigate and it has a simple layout. I really like the affirmations, and I feel like those should be the first thing you see when you open the app. The Immediate Help link right at the top of the screen is a great idea and eliminates having to search for those important resources. The advice in the lessons is tailored to this target audience. Those of us that live in Nevada have unique challenges and that is addressed. It is personable and speaks to the user using relatable verbiage. The guided meditations were just the right length and calming. There were a plethora of Alternate Activities making it easy to find something that would pique your interests. I feel like this app can be a powerful tool when combined with counselor visits to share and celebrate progress."

-Robb Koperski - (Peer Specialist @ The Life Change Center)

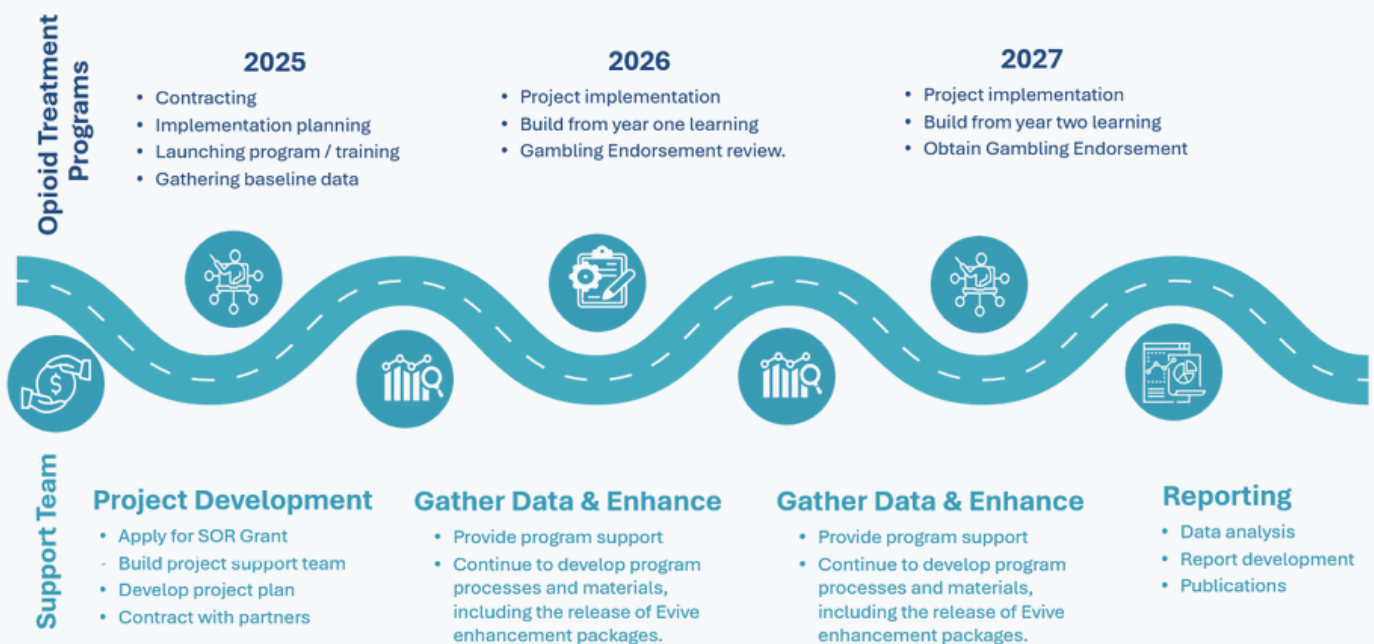
"I absolutely love how many resources are available through this app and how focused it is for NV! I've done about 4 lessons now and a couple of the meditations and have found every lesson and meditation to be extremely easy to navigate and also keep my interest, which isn't always that easy to do so yay! The RIDE method in one of the lessons is an amazing tool that I was actually able to suggest to a patient right after learning through the app. The suggestions and tools are easy to understand and the verbiage on the app sounds like talking to / talking with a human VS some text book copy and paste. The content is relatable and practical and easy to remember. None of the "Assignments" or lessons feel like homework. As someone in recovery from substances and problem gambling I feel this app has a lot to offer to those struggling with addictions / addictive behaviors. Thank you so much for the training and the opportunity to help get this program up and running."

-Kaitlyn Sofos @ The Life Change Center

Next Steps

Charting the Course Forward for Our Project

As we look ahead, our **logic model** and **evaluation plan** will guide the success of our project. Our next steps involve meeting as a team to review the lessons learned from the first year to refine our approach and align our objectives with stakeholder expectations. We will conduct comprehensive reviews of our key milestones to evaluate progress and identify areas for improvement. Engaging with the OTPs will play a crucial role in this phase; their feedback will help us adjust our strategies effectively. With our refined approach we will engage the eight remaining Nevada OTPs. Once GRASP contracts with the remaining OTPs are developed, we plan to rapidly onboard them into the project, train their staff, and begin full program implementation. This includes regularly scheduled meeting, onsite monitoring, and ongoing consultation. Our team is committed to fostering collaboration and open communication, ensuring that everyone is aligned with our vision. With a proactive mindset, we are confident that these next steps will guide our project towards its ultimate goals, paving the way for impactful outcomes and sustainable growth.



The Gambling Resources And Support Program Logic Model

Supporting Opioid Treatment Programs through GRASP Implementation



Problem Statement: Research has demonstrated that as many as 46% of patients in Opioid Treatment Programs (OTPs) met criteria for a past-year gambling disorder. Gambling behaviors are rarely addressed in OTPs, and patients with co-occurring gambling problems are more likely to have undesirable treatment outcomes.

OUR GOAL

To improve Opioid Treatment Program outcomes by addressing co-occurring gambling-related issues.

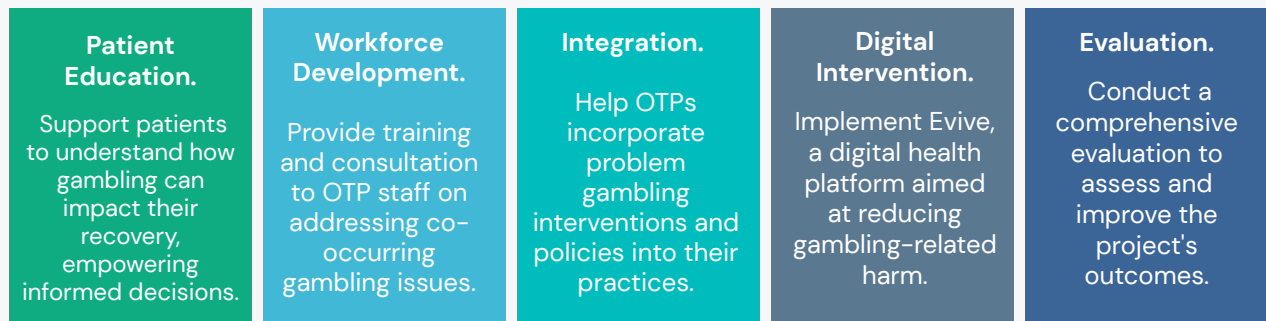
Inputs

Key resources include the SOR Grant, enabling the development of strategic organizational partnerships.



Activities

Empowering clinicians and patients through strategic activities.



Short-Term Outcomes

Opioid treatment is enhanced with **standard gambling screening, increased patient and clinician knowledge** about gambling-related risks to opioid treatment success, and **improved clinician confidence** in addressing co-occurring gambling issues.


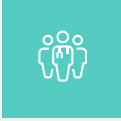



Data gathered during the 3-year project will continually inform **program improvements** and scaling efforts statewide.

Long-Term Outcomes

Project activities and the effects of short-term impacts will lead to seamlessly integrated support strategies and expanded OTP capacity to address co-occurring gambling issues, resulting in **improvements in opioid treatment retention** and **lower rates of opioid overdose deaths**.

Improved OTP outcomes will lead to enhanced quality of life for patients and **healthier communities**.

GRASP Evaluation Plan

GRASP Components	Research Questions	Key Indicators	Data Sources	Data Collection Methods
 <p>PATIENT EDUCATION</p>	Does GRASP increase OTP patients' knowledge and awareness of how gambling behaviors can impact their OUD treatment?	<ul style="list-style-type: none"> • Patient awareness of the risks gambling behaviors can have on their recovery from OUD • Patient knowledge of resources available to address gambling issues 	<ul style="list-style-type: none"> • OTP Patients • GRASP Tablet data 	<ul style="list-style-type: none"> • Intake tablet screenings • Monthly tablet surveys • Patient interviews (at 30, 90, 180, 365 days)
 <p>WORKFORCE DEVELOPMENT</p>	Does the GRASP program improve counselor and staff comfort, capability, and agency culture around addressing co-occurring gambling issues?	<ul style="list-style-type: none"> • Number of OTP counselors and staff trained • Staff competence and confidence • Gambling addressed in treatment plans • Gambling-specific referrals documented 	<ul style="list-style-type: none"> • OTP Counselors and Staff 	<ul style="list-style-type: none"> • OTP counselor and staff interviews (at 6 months) • Patient file review • Training evaluation (pre- and post-surveys)
 <p>INTEGRATION</p>	Does addressing co-occurring gambling issues among patients in OTPs, through the GRASP program, lead to improved OTP outcomes?	<ul style="list-style-type: none"> • Urinalysis results / substance use • Compliance with OTP treatment • Opioid cravings • OTP retention rates • Quality of life improvement 	<ul style="list-style-type: none"> • OTP historical data on treatment length of stay and UA results • OTP data on "tickets" indicating program rule infractions • OTP patient clinical files • OTP patients 	<ul style="list-style-type: none"> • OTP data review • Patient interviews (at 30, 90, 180, 365 days) • OTP patient file review
 <p>DIGITAL INTERVENTION</p>	How does the digital intervention (Evide) support program outcomes, and what role do demographic variables play?	<ul style="list-style-type: none"> • Number of Evide downloads • Weekly logins & usage data • Staff utilization of platform resources • Engagement barriers (digital literacy, smartphone access) • Patient and staff self-evaluation 	<ul style="list-style-type: none"> • Evide App • Evide GRASP web-portal • OTP Patients • OTP Counselor and staff 	<ul style="list-style-type: none"> • Evide metrics and analytics • Monthly tablet surveys • Patient interviews (at 30, 90, 180, 365 days) • OTP staff interviews • Patient file review
 <p>CONTINUOUS IMPROVEMENT</p>	What are the key factors that contribute to successful implementation and what obstacles must be addressed?	<ul style="list-style-type: none"> • OTP staff interviews • OTP patient interviews • Tablet use process data • Follow-up and interview compliance, demographic and covariate factors (e.g., SES, housing stability) 	<ul style="list-style-type: none"> • OTP Patients • OTP Counselors and staff • Evide • GRASP Tablets • GRASP Support Team 	<ul style="list-style-type: none"> • Systematic review and analyze of all collected evaluation data (every 6 months) • Program review and improvement meetings with all organizations involved in GRASP (quarterly)

GRASP Support Team Contacts



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