PROBLEM GAMBLING TREATMENT FOLLOW-UP PROJECT PARTICIPANT RECRUITMENT PROCESS

Follow these steps each time you onboard a new client



IDENTIFY POTENTIAL PARTICIPANT

Eligible participants include:

- Outpatient and residential problem gambling clients
- Gaming disorder clients
- Concerned others

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NTRODUCE THE PROJECT

Let clients know that their feedback helps improve gambling treatment in Oregon and that their participation is valued.

<u>TIP</u>: Use the recruitment video and brochures.

INFORMATIONAL VIDEO ABOUT THE PROJECT





REVIEW THE CONSENT FORM

Every client should review the consent form and decide if they'd like to take participate.

TIP: Provide them with our video (scan the QR code) for a simplified overview of the study.

TIP: ENCOURAGE SAVING
OUR NUMBER IN THEIR
PHONE.
(SCAN FOR EASY CONTACT INFO)



THEY WILL BE CONTACTED

Participants will be contacted for brief telephone interviews:

- 30, 90, 180, and 365 days from starting treatment.
- When they leave treatment.
- 180 and 365 days after leaving treatment.



REVIEW & SUBMIT

Submit a consent form for each problem gambling client (even if they declined to participate).

Confirm form is complete, accurate, and legible. Then email or fax the completed form to PGS Inc.

CONFIDENTIAL PHONE: 503-270-3902 (CALL OR TEXT)

EMAIL: PG_TX_EVALUATION@PROBLEMGAMBLINGSOLUTIONS.COM

FAX: 503-270-3980