

Consultation response: the provision of specialist residential chronic pain services in Scotland

Question 1: We would like to know in what context you are responding. Please choose one of the following:

I am responding as:

- a) an individual who experiences chronic pain
- b) a family member or carer of someone who experiences chronic pain
- c) a health professional
- d) an organisation representing people who experience chronic pain
- e) other stakeholder (please tell us in the comments box below)

Question 2: Please choose your preferred option (Chapter 2 provides details).

- Option 1 – a centre of excellence in a single location
- Option 2 – a service delivered by local chronic pain clinicians
(supported by other clinical advisors in another part of the country)
- Option 3 – a service delivered in different locations
(by a team of chronic pain specialists – an outreach or roving service)

Please tell us why this is your preferred option in the comments box below. The factors listed in Chapter 2 of the consultation paper may help you.

We need whole team in one location,
that would help to recruit staff and could
be assessed by government and patients.

Question 3: Are there any of the options you disagree with? (If No, move straight to Question 4.)

If yes, please tell us which one(s) in the comments box, and why?

2 and 3 at present. I think you would have to get one center work well and then spread out to other areas later, option 3 is mark not tested.

Question 4: If you have other ideas that have not been covered, please tell us about these in the comments box below. You may want to include the advantages and disadvantages of each.

We need to have been in one location that would help to prevent staff and cover the rest of the government and business.

Question 5: What do you think the barriers are to accessing a residential pain management service? (For example, distance away from family, work or family commitments, upfront travel costs.)

Please list as many as you wish in the comments box below and include any others that are important to you.

The barriers so far have been going as far as Bath. A Center in Scotland would help many more patients and their families, why has this study to Bath been allowed to go on for so long? When we should have had our own center years ago.

Question 6: Please choose from the list below which aspects of residential pain management services should be included in a Scottish service.

(choose as many as apply)

- A chronic pain assessment
- Supported one-to-one sessions to teach coping skills
- Group sessions
- Residential accommodation
- Opportunity for immediate carer/support provider to accompany patient
- Peer support
- Tailored exercise programme
- Medication assessment
- Other (please tell us in the comments box below)



pain psychologist, must be included as
patient with pain can ~~reach~~ reach emotional lows
that can lead to suicidal thoughts.

Question 7: Irrespective of the final service model selected, should access to the current service provided in Bath (or elsewhere in the UK) be retained for occasional use?

Yes No Don't Know

Question 8: Have you previously attended, or supported someone attending a residential service outside Scotland?

Yes (please answer Question 9)

No (please move straight to Question 10)

Question 9: If you have attended, or supported someone attending a residential service outside Scotland, please tell us about any advantages and disadvantages of the experience.

[Faint, illegible handwritten text is visible within the text box area.]

Question 10: If you, or someone close to you, has been offered but declined a residential service outside Scotland what were the reasons for this?

A friend was offered but could not stand
the long journey.

Question 11: If you wish to add any further comments on issues raised in the consultation paper or current chronic pain services in Scotland, please use the comments box below.

for 29 year I have suffered with chronic pain
but never been offer a day service.
GP's are not enchoraged to refer patients
and was not until the Scottish Parliament
started that my condition was recognised
through Parhment Campaignes. Services are
still poor and much more is still badly
needed. No use pretending day services are
ok.

(End of questions. If you require more space to write answers, you may submit as many additional pages as you wish. If doing so, please clearly state the question numbers that your answers relate to.)