

Consultation response

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)

None.

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.

I think that for the most part, local services are able to adequately manage chronic pain (between primary & secondary care). Remote tertiary services may not add to this greatly – particularly if specialist non-pharmacological interventions are required (e.g. nerve block procedures) – since these cannot be done over a video link. Given that I therefore support a face-to-face approach, an out-reach service would be desirable, since many of the chronic pain cohort will not necessarily be fit to travel (e.g. advanced MS, post CVA, etc). I do accept however, that travel time considerably diminishes the availability of said specialists in their proposed role.

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?

N/A

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.

Additional training for frontline staff may reduce demand for specialist input, thus making options 1 or 3 more accessible.

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.

All of the above – plus as I've already indicated, not all patients are fit to travel (and air-ambulance transfers are often inappropriate or prohibitively expensive).

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 | <input checked="" type="checkbox"/> |
| Supported one to one sessions to teach coping skills | <input checked="" type="checkbox"/> |
| Group sessions | <input type="checkbox"/> |
| Residential accommodation | <input type="checkbox"/> |
| Opportunity for immediate carer/support provider to accompany patient | <input checked="" type="checkbox"/> |
| Peer support | <input type="checkbox"/> |
| Tailored exercise programme | <input type="checkbox"/> |
| Medication assessment | <input checked="" type="checkbox"/> |
| Other (please tell us in the comments box below) | <input type="checkbox"/> |

Group sessions are cited as being 'off putting' for a significant minority. Tailored exercise programs – I would imagine that this can be undertaken by existing physiotherapy services (perhaps with a little extra support).

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.

N/A

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?

N/A

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.

Whilst I've no objection to the Bath service per se, I would worry that this is only suitable for a selective minority.