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.

In a residential centre of excellence there is time and expertise to see a patient over a period of time. Pain is not always present 24 hours a day, and can be brought on by certain situations. A residential centre is more likely to get to the cause of the problem.

21 OCT 2013
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?

Opinion 2 & 3 don't give the time period needed to see a patient over several days.

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.

I think a trauma unit should also be at the same place as a pain unit.
My pain has been the result of trauma that happened when I was very young. My pain is disappearing as I deal with the trauma.
It took me 25 years to get a diagnosis.
I got the diagnosis at the Glasgow Homeopathic Hospital.
They looked at many aspects of me, not just a specialist one.
When I got the PTSD diagnosis, I was referred back to my doctor. It took 6 months to start getting the treatment I need. I found that very difficult.

I suggest that a chronic pain unit and trauma unit be set up at the Glasgow Homeopathic Hospital.
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.

Any one residential centre is a problem for people travelling from a long distance away, but the remote rural nature of it has huge benefits. The Glasgow Homeopathic Hospital has a large catchment area. The Gartocharn site is already used as residential for specialist treatments such as cancer.

The ideal would be 2 or 3 residential centres throughout Scotland, but you need to start with one, and then possibly extend to other areas.
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)

Some complementary therapies should be considered for inclusion

I would suggest considering:
- Indian Head Massage
- Reflexology
- CranioSacral Therapy
- Body Massage

Support from a physiotherapist would also be included when the patient returns home, a physio that includes hands on work.

I attend a physio monthly who specialises in scar tissue release. It keeps me mobile. 
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.
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?

I have never been offered one.

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.

(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.)