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)

Comments (box expands with text input - there is no word limit)

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.

FIFE HAS A VARIED EXCELLENT MDT SKILL MIX WHICH COULD BE UTILISED TO PROVIDE THIS SERVICE. PERHAPS LOOKING AT WHAT IS AVAILABLE TO START WITH AND BUILD ON FROM THERE. LONG TERM CONDITIONS HAVE TO BE SELF MANAGED WITH SUPPORT AND EDUCATION

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?

Comments (box expands with text input - there is no word limit)
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.

As part of my work I follow up patients post stroke and visit once discharged home from hospital. The feedback we get as an organisation specific to stroke, the patients tell us they feel valued and not abandoned and they can contact us if they have any questions. Some of the comments today highlighted the need for ongoing support for the people who have chronic pain. If there was a similar service the patient can contact the specialist and most of the time it is just for advice and reassurance it is obvious that there is a need for this type of service. A lot of this is self management with support/education as required. Comments (box expands with text input - there is no word limit)

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.

Distance, chronic pain often inhibits people because the journey can be traumatic to their condition, finances it is not exhaustive barriers will always be present. Comments (box expands with text input - there is no word limit)

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
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 ☐ X

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

Yes ☐ (please answer Question 9)

No ☐ X ☐ (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.

Comments (box expands with text input - there is no word limit)

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.

FOLLOWING YESTERDAYS COMMENTS THERE IS AN OBVIOUS NEED FOR SUPPORT AND EDUCATION THERE WAS A BIT OF LOW MORALE AND SELF ESTEEM AMONGST THE GROUP ABOUT HOW THEIR PERCEPTION IS THAT THE NHS IS FAILING THESE PATIENTS THAT HAVE CHRONIC PAIN. THIS NEEDS TO BE TACKLED AS A PRIORITY ALSO HIGHLIGHTED IS A NEED FOR SPECIALIST SERVICES FOR CHILDREN AND PERHAPS MAKING 18 YRS A CUT OFF AGE. Comments (box expands with text input - there is no word limit)