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)

South Lanarkshire Council has a population of approximately 314'000 spread across a wide and diverse significant rural and urban geographical area. Social Work Resources works with vulnerable service user groups, many of whom may/will suffer from Chronic Pain.

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.

As outlined in Chapter 2 we would opt for a centre for excellence for chronic pain that can provide, bring together and support:

- patients with similar characteristics
- peer support, during and after treatment is complete.
- range of clinical staff.
- range of treatments and tailored programmes.
- consistency of staff retention.
- train and support other healthcare professionals
- research work.
- Use technology to improve access

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?

All of the benefits associated with a centre for excellence could be lost, or diluted in the other two options.

The Scottish based residential model could lead to an individual’s self-confidence, self-management and cope skills improving supported by others (peers) in a similar position. This could not be delivered on an outreach basis with limited contact with others in similar position.

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.

Given that it is estimated that 800,000 people in Scotland live with chronic pain, the site for a central for excellence needs to accessible to the majority of these people. Their carers and families also need accessible services and supports, which would need to be considered with this model of care.

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.

Barriers to accessing a residential pain management service would include:
- Travel distance – regardless of Scottish location this will be a challenge
- Transports services – rural areas, which lack frequent transports services
- Costs of transport – upfront costs a problem
- Benefits and low income – can you afford the transport
- In employment – can you afford the time off, or will your employer let you
- Family support – all of the above relevant
- Child care arrangements –
- Pain thresholds and ability to cope with travel.
- Local GP referrals
- Cost of residential place
- Duration of treatment term

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)

Carer support and education regarding chronic pain condition. Clear pathways and links back to their local communities, and knowledge of services available.

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) – SLC residential care home places outwith Scotland

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.

Disadvantages:
- Funding arrangements in other areas can be different
- Identifying placements for individuals choice, can also be limited
- Some residential service can be prohibitive cost wise
Advantage:
- Service user choice to be nearer family
- If the Scotland model for chronic pain becomes reality, do we then have a selection of places nationally where people can opt to attend if places available.

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.

How many of the people with chronic pain attend other national clinics? Although a high level of satisfaction is recorded for Bath, no patient numbers evident. The demand for places and number of places that would be created in a new Scottish residential service is not clear.