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.

I think it would be more efficient to have one flagship centre with a full team.
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?

Two sounds a bit vague. How will anyone know if their local place would be as good a service as other areas of Scotland? One centre would mean everyone gets the best service.

Three sounds a bit hit or miss.

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.
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.

Obviously it would be better if a centre was in Scotland because family could visit our patient and a patient would not have such a long tedious journey to somewhere in England.
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)
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?

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.

An elderly relative suffers extreme pain for years but no GP in Fife has mentioned pain clinics exist. Why aren't patients told about N.H.S. pain services in Fife? Have you ever asked about them? I found out only by chance. Is it disgraceful that patients have been sent to England for years? If it is disgraceful that has been allowed to go on.

(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.)