

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*)

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 THE SYSTEM CURRENTLY USED IN BATH SEEMS TO WORK EXTREMELY WELL, SURELY IT MAKES SENSE TO COPY IT. ALSO, IF RELATIVES OF PATIENTS HAVE ACCOMMODATION TOO (ESP. YOUNG PEOPLE + SEVERELY DISABLED) THIS WOULD BE A BONUS AND WOULD STOP PEOPLE REFUSING TO GO AWAY FROM HOME FOR TREATMENT.

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?

DISAGREE WITH OPTION 2 AS IT SEEMS TO INVOLVE
A LOT OF TECHNOLOGY = NOT EVERYONE, ESPECIALLY
OLDER PEOPLE, HAVE ACCESS TO IT.

DISAGREE WITH OPTION 3 AS IT HADN'T YET
BEEN TESTED IN SCOTLAND, WHEREAS THE BARR
MODEL IS TRIED AND TESTED.

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.

MY IDEA WOULD BE THAT A SPECIALIST
RESIDENTIAL SERVICE IN SCOTLAND IS
IMPLEMENTED ASAP AS IT'S PATENTLY
OBVIOUS THAT THIS IS DESPERATELY
REQUIRED AND SEEMS TO BE TAKING
FOREVER (YEARS)

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.

I DO FEEL THAT THE BARRIERS MENTIONED ABOVE COULD BE EASILY OVERCOME, AS SURELY ANY SYSTEM (ESP. OSPITAL) HAS TO BE FAR BETTER THAN SENDING PATIENTS TO BATH.

DISTANCE AWAY FROM FAMILY WORK ETC, WOULD STILL BE NEARER THAN BATH.

PATIENTS CURRENTLY HAVING TO PAY APPROX £1,000 TRAVEL EXPENSES TO BATH AND HAVING TO WAIT TO HAVE SAID MONEY REFUNDED.

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)*

A RESIDENTIAL SPECIALIST SERVICE IN
SCOTLAND FOR SCOTTISH PATIENTS.

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.



