

Palliative Care Just in Case (JIC) Service Guidance

Introduction

Despite the fact that 90% of all palliative care occurs in a patient's own home environment and the majority of patients and their carers wish for a home death, most people suffering from a terminal illness die in an institution. Breakthrough symptom control and a lack of anticipatory palliative care are contributory factors to high hospital death rates and patients being unable to die at home or at a place of their choosing.

This service aims to support anticipatory prescribing and give access to medicines commonly prescribed in palliative care, by ensuring that emergency medication has been prescribed and is in place, in the form of a Just in Case pack, which is kept in the patient's home.

The Just in Case packs are targeted at people who are reaching the terminal phase of their illness and should promote effective and cohesive team working between doctors, nurses and pharmacists both in and out of normal working hours.

The Just in Case packs for use in an emergency are available from many community pharmacies **and seven local community pharmacies also hold an extended list of drugs for Just in Case purposes.** Details of the pharmacies holding an extended list can be found on the CCG website: <https://www.shropshiretelfordandwrekinccg.nhs.uk/> and on the Severn Hospice website.

Adult patients requiring palliative care support in their home should be identified by their GP, Community Nurse or Hospice Community Nurse Specialist. If it is anticipated that the patient's medical condition may soon deteriorate into the terminal phase of illness and with the verbal consent of the patient and/or family and carers (as appropriate), the prescriber may initiate and prescribe a palliative care Just in Case pack for emergency use, within the patient's home. The Medical Practice should ensure that a prescription is produced to enable the medication for the Just in Case pack to be dispensed to the patient. They should also supply the End of Life Authorisation to Administer Forms for both a Syringe Driver and for "As Required Medication". The End of Life Authorisation to Administer Forms need to be completed with the prescribed doses and directions and signed and dated but they should not be completed unless it is likely that administration will commence within the next week. Just in Case medication should not be administered unless the End of Life Authorisation to Administer Forms have been completed, signed and dated.

The usual contents of the Just in Case pack are listed below.

Medicine	Strength	Quantity
Morphine Sulphate Injection	10mg/1ml	10 x 1ml ampoules
Hyoscine Butylbromide Injection	20mg/ml	10 x 1ml ampoules
Levomepromazine Injection	25mg/ml	10 x 1ml ampoules
Midazolam Injections	10mg/2ml	10 x 2ml ampoules
Water for Injection BP		5 x 10ml ampoules

The Process

Patient Suitability

A patient can be identified as appropriate for a Just in Case pack by a doctor or specialist nurse. Patients will have a terminal diagnosis for a condition, which makes it likely that at a future date they will require the range of drugs contained within the JIC pack and will have been appropriate for a DS1500 i.e. a prognosis of 6 months or less. Usually the Just in Case pack is initiated within the last 2-3 months of life. Some patients may be unwell and in the last few weeks of life but others may be relatively well at the time of initiating the Just in Case pack.

Consent

The provision of a Just in Case pack must be discussed with the patient and where appropriate the patient's family and/or carer in order to explain its function and acceptability.

In cases where the patient is found not to be able to give consent to receive a Just in Case pack a capacity assessment will need to be completed. Following this a best interest decision will be required to ensure that the issue of the Just in Case pack is appropriate. The patient's relatives, carer or friends may be best placed to advise on the individual's preferences.

Communication

The patient must be referred to the community nursing team for assessment and the introduction of community nursing notes into the home if this is not already in place. The provision of a palliative care, Just in Case pack should be identified on the flagging notice for the Out of Hours team.

Prescription Requirements

FP10 prescriptions should be generated for the medicines contained in the Just in Case pack, these should be signed by the GP caring for the patient. The correct quantities and directions must be specified and the prescription for and controlled substances e.g. morphine must meet controlled drugs prescription requirements. The CCG has provided practices with an Emis protocol, which generates the necessary prescriptions and entry within the patient record. It also automatically prints the required End of Life Authorisation to Administer Forms.

A dosage instruction of 'as directed' or 'as required' is not acceptable for a controlled drug prescription but 'one to be taken as directed' is acceptable. Prescriptions for morphine and midazolam therefore should contain the following dosage instructions: Morphine Sulphate 10mg/1ml injection one ampoule to be used s/c for pain relief in accordance with Authorisation to Administer Form (for Just in Case pack) and Midazolam 10mg/2ml injection one ampoule to be used s/c for agitation in accordance with Authorisation to Administer Form (for Just in Case pack).

Just in Case Pack Delivery or Collection Arrangements

The GP is responsible for issuing the prescriptions for the Just in Case pack along with the associated End of Life Authorisation to Administer Forms. These should be given to the patient or a family member and/or carer (as appropriate) or sent to the appropriate Community Pharmacy, to be included with the Just in Case pack. The completed Just in Case pack should be collected from the Community Pharmacy by the patient or their nominated representative. Alternatively the pack can be delivered to the patient's home using a pharmacy delivery service, where this is available. When

dispensing the Just in Case pack the Community Pharmacy should include with the medicines: a Patient Information leaflet describing the purpose and nature of the Just in Case pack and a set of Responding to Symptoms Pathways. These pathways are available to download from the Severn Hospice and the CCG websites. For patients who are registered with a Dispensing Practice, Just in Case packs can also be supplied as described above by the dispensary based at the GP Practice.

Authorisation and Administration of Medicines from the Just in Case Pack

The Just in Case pack is sealed to prevent tampering and this seal should only be broken by a health professional when the medicine is required, the seal should not be broken by a nurse/doctor/carer in order to check the contents.

Medicines from the pack can be administered by a doctor or by a qualified member of the community nursing team, once the End of Life Authorisation to Administer Forms have been completed and signed. This should only be done if it is likely that the medication is going to be required within the next week.

Prior to administration the name of the medicine, the batch number and expiry dates should be checked in the usual way.

Using and Replacing Items from the Just in Case Pack

Only a trained healthcare professional should open and use the contents of the Just in Case pack while caring for the patient. Once the pack has been opened, prescriptions for further supplies of medication should be supplied by the health professional caring for the patient or requested by them, from the patient's GP. This should be in the form of ordinary FP10s. Further Just in Case packs should not be requested. The health professional caring for the patient should also check that appropriate arrangements are in place for the prescription items to be collected from or delivered by the appropriate Community Pharmacy or Dispensing Practice.

If an item within the Just in Case pack is accidentally broken or expires prior to the pack being opened, it should be replaced. A prescription for the broken/expired item should be requested from the patient's GP and the Just in Case pack should be returned to a Community Pharmacy or Dispensing Practice, as appropriate, so that the item can be replaced.

If a Just in Case pack is found to be Open

If a pack is found to be open, by a community nurse or doctor, every effort should be made to establish who opened the pack and the reason for the seal being broken. The contents of the pack and the patient's notes should be checked. If items have been administered appropriately, a prescription should be provided or requested for any additional medication, which may be required. If the reason for the bag being opened cannot be found, then the GP should be consulted and advice should be sought regarding removal of the Just in Case pack from the patient's home, if tampering is suspected.

The CCG Medicines Management Team Role

The CCG's Medicines Management team will provide Community Pharmacies and Dispensing Practices with empty designated Just in Case packs with tamper evident seals and Patient Information Leaflets. The CCG will monitor usage of stock items used for filling Just in Case bags, particularly those items on the extended list, to ensure stock expiry dates are maximised.

Quality and Safety of the Just in Case Pack

Each medicine contained in the Just in Case pack should be clearly labelled with the following details:

Patient's name

Pharmacy details

Date of dispensing

Expiry date

Batch number

Name of medicine

Quantity of medicine

Directions for usage

Keep out of the reach of children

Loose ampoules should be well wrapped to prevent accidental breakage and the outside of the box should be labelled as above.

The labelled boxes should be placed inside the Just in Case pack together with: a set of Symptom Control Guidelines; Patient Information Leaflets for all the drugs enclosed and a Just in Case Patient Information Leaflet and this should be securely sealed. It should then be clearly marked "this pack expires on....." using the expiry of the shortest dated medicine as the expiry date for the pack. The contact name and address of the pharmacy supplying the pack should also be clearly marked on the outside of the pack.

Record Keeping

Any Controlled Drugs which are dispensed as part of a Just in Case pack should be recorded in the Controlled Drugs register in the usual way. A record of Just in Case packs supplied, together with their expiry dates should be maintained, to enable monitoring of the service and for the return and/or replacement of packs which have expired without having been used. All details should be kept securely and confidentially.

Pack no Longer Required.

The GP, Community Nurse or Hospice Community Nurse Specialist is responsible for informing the pharmacy that a patient no longer requires their Just in Case pack. The pack should be returned to any Community Pharmacy at the earliest convenient time, by either using a delivery/collection service or by a patient's carer or representative delivering the pack to a Community Pharmacy.

Patient Complaints

Community Pharmacies and Medical Practices should follow their in house complaints procedures.

Alternatively contact Shropshire, Telford and Wrekin CCG Patient Services:

Tel 01952 580407

e-mail stwccg.patientservices@nhs.net

or in writing at the following address:

Patient Services Team,

NHS Shropshire, Telford and Wrekin CCG,

Halesfield 6,

Telford, TF7 4BF