

Procedure for the issue of 'Just In Case' (JIC) bags on discharge from Derriford.

Palliative Care / medical team:

- Identify 'End of Life' patient with the potential to deteriorate and are suitable for a 'Just-in-Case' Bag (JICB). (please see information on reverse)



Prescribing Doctor:

- Ensure that the hospital palliative care team agree that JIC bags are appropriate.
- Notify pharmacy discharge co-ordinator (bleep 85580) of patients name and ward.
- Select drug pack on e-discharge (details not to be changed) in addition to any other items required.
- Sign printed copy of e-discharge.
- Set e-discharge as ready for dispensing.
- Send drug chart and signed copy of e-discharge to Pharmacy.

For advice on prescribing for patients with renal failure (eGFR<30) please contact the Specialist Palliative Care Team on ext. 36744.



Pharmacy discharge co-ordinator:

- Indicate JIC on chart (or printed e-discharge if already screened).
- Screen e-discharge.
- Dispense JIC bag contents and checked as per existing SOPs.

CD store technician/assistant:

- Assemble JIC bag contents in small TTA bag with reminder label on bag.
- Issue JIC padded bag + information sheets to complete TTA.
- Add patients name and DOB to JIC bag label.
- Record name of patient and the ward that JIC bag is being delivered to on distribution list.

TTA delivered to / collected by ward



Ward nurse:

- Store JIC meds in CD cupboard.
- Record in patient's own CD register.



Ward doctor

- If JIC padded bag not present then access via the palliative care team level 8
- Complete the **community prescription sheet** found in the JIC bag. (The district nurse team will not be able to administer the JIC medication without this being completed.)
- Review **TEP** form (in the context of treatment escalation decisions at home) and communicate this with the patient if appropriate.
- Ensure **TEP form goes with patient** on discharge



Ward nurse at discharge:

- JIC medication rationale explained to patient (and /or carer)
- Information leaflet (from the JIC bag) given to patient/carers.
- JIC meds sealed in bag after being signed for by patient or on patient's behalf on discharge.
- Ensure TEP form goes home with the patient.

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Background to 'Just-In-Case' Bags.

Patients with a terminal illness often experience new or worsening symptoms for which they require urgent medication. It is essential that these patients and the healthcare professionals looking after them have easy access to the medicines that can help them immediately if their condition deteriorates or symptoms occur suddenly at any time of the day or night, as is common in terminal illness.

Just in Case Bags (JICB, anticipatory medication), should be considered on discharge from Derriford Hospital where the patient's condition has been assessed as having the potential to deteriorate or become unstable. The JICB (anticipatory medications) are intended for use when there is a sudden or unexpected deterioration in the patient's health, and must be followed with a review of the patient and their medication within 24 hours by the patients GP.

JICBs have been used in Devon within the primary care setting since 2015 and have been successful in preventing unnecessary admissions as well as better access to symptom control at home.

When to consider prescribing 'Just in case' medication

JICB are aimed at supporting patients

- Who are likely to have unanticipated symptoms but are not routinely requiring subcutaneous medication.
- Where a Treatment Escalation Plan (TEP) has been discussed with the family and the focus of care is to remain at home.
- From Plymouth or Devon. Currently this is not available for patients from Cornwall.

If a patient is being discharged home with a syringe driver then anticipatory medication needs to be made available using the appropriate community prescription sheets rather than JIC bags

Who to inform

If a patient is being discharged with JICB, they need to have the appropriate support at home. Patients should only be provided with JICB on discharge from Derriford Hospital if they are known or are being referred to the community specialist palliative care team.

- Discuss with the hospital palliative care team the appropriate role of JIC bag. Provide the patients name, the ward and date of planned discharge.
- Please ensure the TEP form and JIC bag has been discussed with the patient/family including DNAR and decision not for hospital admission.
- Please inform GP via the discharge summary that JIC medications are in place and request that this information placed on EPACCS (electronic palliative care coordination system).

Any questions please contact the hospital palliative care team ext 36744