

1. True or False

1. Only the Community Health Nurses can use the Just in Case Box.

True

False

2. The patient must be known to the Specialist Palliative Care Service to receive a Just in Case Box.

True

False

3. A Just in Case Box cannot be prescribed for a patient in a Residential Aged Care Facility.

True

False

4. The Specialist Palliative Care Service are required to prescribe the Just in Case Box.

True

False

5. The medications are dispensed from a community pharmacy, not the hospital pharmacy.

True

False

6. If the patient has requested a home death in their Medical Goals of Care, they must not be transferred to hospital for any reason.

True

False

7. A syringe driver is not included in the Just in Case Box contents.

True

False

8. When giving medications, the family/carers must contact 1800HOSPICE with every symptom change.

True

False

9. Everyone with a preference to die at home is eligible to receive a Just in Case Box.

True

False

10. For an RN to give the medications, it must be ordered on a medication chart.

True

False

11. The family/carer do not need to complete the Caring Safely at Home education to give medications.

True

False

12. The Just in Case Box needs to be kept in a locked cupboard.

True

False

13. All After hours calls are shared with Participants of Care.

True

False

14. The patients own pharmacy is a participant in care for the Just in Case Box initiative.

True

False

15. Using the Caring Safely at Home resources, a medication that has a blue label is for pain management.

True

False

16. Just in Case Boxes are not used in any other state/territory or country.

True

False

17. The patient is expected to pay for all medications and consumables.

True

False

18. A study in 2013 from South Australia found that 13% of community pharmacies stock no end of life medications.

True

False

19. ANZSPM stands for 'Australian and New Zealand Specialist Palliative Medications'

True

False

2. Multiple Choice

20. The Just in Case Box is designed for:

- Level 1 patients only
- Level 1 and some Level 2 patients
- Level 3 and some Level 4 patients
- None of the above

21. According to the Tasmanian Palliative Care Service Delivery Model, Level 1 patients are those who;

- have complex needs requiring Specialist Palliative Care
- can be managed by their primary care provider
- are in the terminal stage
- must be cared for on the first level of the hospital.

22. For the Just in Case Box initiative the patient indicates a preference to die at home on;

- the progress notes
- the fridge
- the Medical Goals of Care
- their will.

23. The Just in Case Box is prescribed by;

- hospice@HOME
- Specialist Palliative Care Service
- the patients GP
- Community Health Nurse

24. The Just in Case Box can be collected from the pharmacy by

- Specialist Palliative Care Service
- the family and/or carer
- Community Health Nurse
- the hospice@HOME CNM only

25. If an RN suspects misuse of the Just in Case Box, they must:

- ignore it
- Report it immediately to hospice@HOME via 1800HOSPICE
- Report it immediately to the police
- None of the above

26. If a family/carer contacts you requesting activation of the Just in Case Box, you should;

- decide what medication to give and instruct the family/carer how to give it.
- ask them to call for an ambulance to assess the patient.
- Contact a GP following the instructions on the Request Form.
- tell them you have no idea what a Just in Case Box is.

27. The Just in Case Box can be activated when:

- the patient has cardiac sounding chest pain.
- the patient is terminal and the symptoms can no longer be managed by the medications already accessible to them in their home.
- The patient falls and breaks their femur.
- None of the above

28. The purpose of Caring Safely at Home is:

- to provide wrap around packages of care
- enhance the capacity and confidence of family/carers to safely and competently deliver subcutaneous end of life medications.
- make sure people die in their own homes
- provide RNs with the skills to insert a Saf-T-Intima

29. An RN knows that a patient has a Just in Case Box in place because;

- hospice@HOME contact all Participants in Care to inform of the placement of a Just in Case Box
- a list of patients with a Just in Case Box is kept on the website
- there is a sticker in the shared home file
- there is a fridge magnet on their fridge that says "This patient has a Just in Case Box"

30. According to the Caring Safely at Home Guidelines, narcotics should be labelled with a _____ coloured label.

- Red
- Orange
- Blue
- Salmon

31. According to the Caring Safely at Home Competency Checklist, which of the following IS NOT a competency?

- is able to attach a needle to a syringe
- is able to record accurately the medication that was given
- understands how to insert a Saf-T-Intima
- understand why it is necessary to wash and dry hands

32. How many 5ml luer lock syringes are there in each Just in Case Box?

- 100
- 50
- 25
- 5

33. Which of the following IS NOT an eligibility criteria?

- the patient is aged over 18 years old
- the patient is known and admitted to hospice@HOME
- A Medical Goals of Care documenting the patients preference to die at home is written under 'specific instructions'
- They must have less than 6 months to live

34. For patients with a Just in Case Box their GP can be contacted;

- at any time day or night
- only during the times they state on the Request Form
- never, all Just in Case Box patients must be transferred to Specialist Palliative Care
- during office hours only

35. Only one regional pharmacy is being used in the Just in Case Box initiative because;

- It was advised by the Tasmanian Chief Pharmacist
- hospice@HOME have a financial interest in the sales from those pharmacies
- They are the only pharmacies in Tasmania that stock end of life medications
- they are part of the Better Access to Palliative Care project

36. If a patient and/or family change their mind and request transfer to hospital or hospice to die they....

- can do so, there is no pressure placed on patients and/or families to die at home if they change their mind.
- must die at home as they wrote it in their Medical Goals of Care.
- must be talked out of the decision
- told to arrange their own transfer as they are no longer part of the Just in Case Box initiative.

37. The family/carer calls you and it sounds like a patient is now terminal and in pain. You remember that this person has a Just in Case Box in their home. Do you.....

- Call the Specialist Palliative Care Team to find out what to do
- call the GP (as indicated on the Request Form) to do an assessment and advise
- Call an ambulance to assess
- advise they give morphine 1mg/ml every hour until pain settles

38. The family/carer call you and the patient hasn't had their bowels opened for 1 week. The caller advises that they are ambulant, are eating and drinking and have no nausea. You remember that this patient has a Just in Case Box in their home. What do you do?

- Call the Specialist Palliative Care Team to find out what to do
- Call the GP (as advised on the Just in Case Box request form) to assess and advise
- Call an ambulance to assess
- tell them to call back in hours and to only call for urgent issues.

3. Short answer questions

39. A Community Health Nurse (CHN) calls 1800HOSPICE. The CHN has just arrived at a patients home and they look like they are terminal, are vomiting and are in pain. The CHN asks what the process is about accessing the medications and consumables in the Just in Case Box. What do you tell her?

40. You get a call from a General Practitioner who has heard from a colleague about Just in Case Boxes. The GP wants to know what they need to do to order one for their patient. What do you tell them?

41. A lay carer of a patient who has a Just in Case Box calls. They tell you that they have given 5ml of the blue syringe instead of the salmon one and they think the person has died. What actions do you take.

42. An RN from Independent Health calls you and says that they are worried a relative of the patient may be stealing some of the medications from the Just in Case Box. What should you do?

43. You get a call at 5am from a distraught relative saying that the Saf-T-Intima has blocked, the patient has had a very loose bowel motion and is starting to become quite agitated. They don't want to look after them at home any longer and want the patient to be admitted to hospital. Explain what you would do with a rationale.

44. You get a call from a General Practitioner who is in the process of ordering a Just in Case Box however, they are asking for some prescribing advice. How would you respond?

45. Specialist Palliative Care Nurse calls you at 10pm on Saturday evening and tell you that a patient who has a Just in Case Box in place is now a Level 3 patient and has been admitted to hospital. What is your course of action?

46. A lay carer calls you at 3am on Thursday morning and tells you that they cannot give breakthrough because the Saf-T-Intima looked to have tissue. What are your options and explain your rationale?

47. The patient has food poisoning and the lay carer wants to give them s/c Metoclopramide from the Just in Case Box to make them comfortable. How would you respond?

4.

48. Address

Name

Company

Email Address

Phone Number