communication regarding ResPECT and shared resources e.g., Top tips newsletters. Future ongoing work focusses on improving the quality of ResPECT forms and education surrounding the ongoing review of ResPECT forms during acute admissions and at significant milestones in a patient’s condition.

**Aims** To introduce a ward-based system for accessing and managing syringe drivers and to develop a tracking system to prevent syringe driver misplacement, improve timely availability and staff wellbeing through self-measured stress levels.

**Introduction** Between September 2021-August 2022 ten clinical incidents were identified relating to syringe driver access across the trust, and inaccessibility had been cited as a significant source of stress for staff. This represents a large financial risk with the cumulative cost of syringe drivers in the trust reaching almost £100,000.

**Method** A pilot ward was given ownership of four syringe drivers to be kept on their ward. Ward staff kept a daily checklist of the location of the pumps and this was reviewed weekly, whilst also surveying how difficult access had been both in and out of hours and number of clinical incidents. Staff were also asked to self-report stress levels that they experienced while accessing syringe drivers. The outcomes each week were used to develop protocols for different scenarios, for example relocation of patients to hospices, or faulty pumps.

**Results** Compared to baseline figures after the first cycle there was a self-reported 66% reduction in both stress and difficulty levels accessing pumps for staff in-hours. Similarly, when reviewing out-of-hours data there was a 75% reduction. Comprehensive roll-out of the tracking system on the ward ensured that 100% of syringe driver locations were tracked through cycles 2–5 with no losses reported. Notably, after cycle 5 there was a significant increase in stress levels related to pumps being lent out to other wards not involved in the pilot, and the financial risk of this.

**Conclusion** A ward-based tracking system for syringe pumps can improve access, reduce stress and protect from financial loss. However, further adoption across the trust is awaited to ensure consistency and optimise ward-based tracking systems.

**INTRODUCING WARD-BASED ACCESS TO SUBCUTANEOUS SYRINGE DRIVERS AT A TERTIARY CANCER HOSPITAL**

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