SYRINGE DRIVERS IN RESIDENTIAL AGED CARE FACILITIES FOR PALLIATIVE PATIENTS

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Keywords

Palliative Care, Syringe Driver (SD), Residential Aged Care Facilities (RACFs).

Executive Summary

Residential Aged Care Facilities (RACFs) often lack adequate staff education and confidence in the use of syringe drivers for palliative residents with complex chronic illnesses and life-limiting conditions, which may limit access to effective symptom management (Thomas & Barclay, 2015). Continuous subcutaneous infusion (CSCI) via SD is an established and effective method of administering medications when oral or other routes are no longer feasible, enabling consistent symptom management and improving comfort at the end of life (Costello et al., 2008; Thomas & Barclay, 2015; Bright, 2022). In 2023, only 3% of RACF residents across the 15 facilities in the Prince of Wales catchment were using SDs. This project aimed to increase SD use to 50% by the end of 2025 through targeted education. Following 28 training sessions, SD use increased by 97%, with improved clinician confidence and enhanced quality of palliative and end-of-life care in RACFs.

Introduction

Residential aged care facilities (RACFs) are increasingly providing palliative and end-of-life care for residents as they remain in care for longer with complex health needs (McBain, 2024). However, significant challenges remain in delivering consistent, high-quality palliative care, particularly access to specialist support, and symptom management resources, including the use of syringe drivers (West, 2014; Bowers et al., 2021). CSCI delivered via SDs allows continuous administration of medications and effective symptom control when oral medications are no longer tolerated or appropriate (Costello et al., 2008; Thomas & Barclay, 2015; Bright, 2022). Despite this, a 2023 review by the Prince of Wales Hospital Community Palliative Care Team (CPCT) identified that only 3% of palliative residents across 16 RACFs received CSCI via SD. Improving SD utilisation within RACFs has the potential to enhance consistency of symptom management and improve the quality of end-of-life care (Bright, 2022).

Highlights

- SD use in RACFs was low, with only 3% of palliative residents receiving CSCI in 2023.

- Targeted SD education was delivered across 15 RACFs through 28 training sessions.
- SD use increased by 97% following RACF staff education and training.
- Over two-thirds of RACFs successfully implemented SD use.
- Nursing staff and GPs reported improved confidence in SD use and prescribing.

Methodology / Process

• Nurse-led syringe driver education delivered across 15 Residential Aged Care Facilities
• 28 training sessions conducted during 2024–2025.
• Participants included RNs, Nurse Educators, Clinical Care Managers, Facility Managers, General Practitioners, and Nurse Practitioners.
• Informal and formal feedback collected alongside syringe driver utilisation data.
- Collection of data on SD use from 2023 to 2025.

Results / Outcomes

- Following implementation of the education program, SD use among eligible palliative residents increased from 3% in 2023 to 97% in 2025.
- Nursing staff reported increased confidence in initiating and managing SDs for palliative residents.
- 11 Residential Aged care Facilities successfully implemented syringe driver use
- General practitioners and Nurse Practitioners reported greater confidence in prescribing SD medications and adjusting doses in response to clinical needs.

Conclusion

This Community Palliative Care nurse-led initiative demonstrates that sustainable syringe driver (SD) use in RACFs depends on ongoing education, competency support, and clearly defined local processes. Strong collaboration between RACF staff, general practitioners, and Community Palliative Care Teams is essential to embed consistent and timely SD initiation and management. Building this capability enhances access to continuous subcutaneous infusions, supporting optimal symptom control, resident comfort, and high-quality end-of-life care within RACF settings.

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Syringe Driver (SD) Use in RACFs

Figure: Increase in syringe driver (SD) use among palliative residents in RACFs following targeted education and training.

