

Assessment of the safety & financial impact of **Doselock** devices in **East Midlands Cancer Network**

AIMS

1. To explore the use of **Doselock** to rationalise the range/number of prefilled syringes outsourced and dispensed when dose-banding cyclophosphamide.
2. To assess staff acceptability of **Doselock**.
3. To assess the financial impact of introducing **Doselock**.

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METHOD

1. Following a risk assessment, all pharmacy and nursing staff were provided documented training in the use of the **Doselock** device
2. Revised tables were developed detailing the size of syringe(s) required.
3. All oncology patients treated with cyclophosphamide in a 6-week period were supplied using a **Doselock** device attached to either a 50ml or 30ml syringe.
4. Nursing staff were asked to complete an assessment form for each patient.
5. Pharmacy staff were asked for their feedback.
6. Savings were calculated based on the number of syringes which would have been supplied before the pilot.

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RESULTS

1. 75 patients were treated using the **Doselock** device.
2. 2 syringe sizes dispensed reduced from 10 to 2.
3. The average number of syringes for the 75 patients fell from 1.9 prior to the pilot to 1.3.
4. The nursing feedback was positive.
5. The annual saving was estimated as £5,900.
6. A saving of approx 2.4 hours was made on reduced releasing of additional products lines from the bond store.
7. There was a reduction in storage space of 60% and improved product segregation.
8. An unexpected finding was a notable reduction in dispensing time due to ease of product selection.
9. No product selection errors were noted.

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DISCUSSION

The completion of the pilot study has led to the roll out of the **Doselock** device at UHL.

Other trusts in EMCN are exploring the potential for use, including smaller units where demand currently prevents outsourcing.

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CONCLUSION

Doselock appears to be safe, acceptable to staff and realises additional financial & efficiency savings.