



## Reducing Overhead and Minimizing Waste

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### Introduction

- The current Pyxis supply station is stocked with hundreds of items. The current process is disorganized and the labels currently in place do not accurately describe the items in clinical language. This current process delays clinical staff access to items due to difficulty in finding the items and delays patient care. Due to this delay, staff are not charging items to individual patients and are charging to unit floor which limits hospital reimbursement. Overstocking of less used items means that individual items are expiring before use.
- Organize items to streamline access during clinical need. Minimize waste by stocking in proportion to clinical use. Charge items to individual patients so the hospital can properly be reimbursed. Reprogram system so that it prompts to restock in a timely fashion to minimize disruption to patient care.

### Methods

- Itemized current inventory in Pyxis supply station.
- Reviewed 120 day trends on most used items to stock each item appropriately.
- Surveyed clinical staff for their input in renaming and relabeling each item to easily identifiable clinical language.
- Accounting for item size, categorized each item into sections by clinical function (Respiratory, Renal, Ortho, etc.). Grouped "like" sections together depending on acuity and clinical need.
- Printed out outline for clinical staff to review and modify.
- Selected low census clinical week to remodel entire system while minimizing disruptions to patient care.
- Coordinated with materials management team to reprogram Pyxis supply station.
- Added colored labels to group "like" items for quick identification by clinical staff.
- Reviewed new process with clinical staff to familiarize staff with newly organized system.

### Results

- After months of planning, interdepartmental (Nursing, Materials management, IT, and EVS), and team collaboration, we were able to successfully implement the changes to the system. The improvements were incremental but impactful. Supply chain now clearly understand exactly where supplies should be stocked. Clinical staff are able to quickly access materials needed for patient care without any delays. Team feedback has been positive to the new changes.



### Discussion

A defining element of the project was collaboration. The project team intentionally sought feedback from team members in PACU, Pre-op, EVS, and Materials before launching the initiative. The results extended beyond improved organization. The team became faster and more efficient in accessing supplies, which strengthened relationships with their stakeholders. As a result, we saw a positive gradual change in the attitude of clinical staff towards navigating clinical supplies.

### Conclusion and Future Directions

- This new process allowed us to minimize time wasted looking for items that are hard to find. Faster access to critical care supplies during emergency situations. Allowed us to accurately charge items to individual patients instead of unit floor. Allowed Materials team to proportionately stock items to minimize items that go unused and expire. Optimized restocking by materials management team.
- There is a potential to implement this new process in other departments in the organization to minimize waste.

### References

• Afriana, W., Zulyani, F., & Kurniawan, T. (2023, August 30). Application of Lean Six Sigma Method in Hospital Management Process: Performance Optimization and Waste Reduction. *ENDLESS: INTERNATIONAL JOURNAL OF FUTURE STUDIES*, 6(3), 172-184. <https://doi.org/10.54783/endlessjournal.v6i3.212>

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