

## Temple University Hospital

### 2026 HAP Achievement Award Optimal Operations Award—Large Division

#### Accountable IMCU Model for Patients with High-acuity Substance Use Disorder

##### The Goal

A rapidly changing drug supply was making inpatient substance use disorder care more complex and unpredictable. Patients were experiencing severe withdrawal that contributed to longer stays, ICU use, readmissions, and patients leaving against medical advice. The team needed a more consistent model that placed high-acuity patients in a more appropriate care setting when standard inpatient care was not enough, but ICU-level care was not always needed.

##### The Intervention

The organization redesigned inpatient substance use disorder care around a dedicated Intermediate Care Unit for patients needing structured withdrawal management. The unit gave high-acuity patients a more appropriate care setting, supported by clear admission criteria, specialized nursing education, and protocols tailored to complex withdrawal.

Care also became more coordinated. Addiction Medicine and Certified Recovery Specialists were built into daily workflows, while the broader care team worked together on treatment planning, discharge readiness, and connections to recovery support. The model also emphasized trauma-informed care, stigma reduction, and real-time outcome tracking so protocols could adapt as patient needs changed.





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## Results

The Intermediate Care Unit helped standardize care for some of the hospital's most complex substance use disorder patients. Use of medications for opioid use disorder increased, Addiction Medicine consultation became nearly universal, and Certified Recovery Specialist engagement grew. The model also supported better patient flow and engagement, with declines in length of stay and 30-day readmissions. Patients treated under the medetomidine withdrawal protocol required shorter hydromorphone infusions, and notably, none left against medical advice.