



Capturing Success

Project Title: FEASIBILITY OF AN INTERMEDIATE CARE UNIT

SUMMARY

IMA Consulting worked with directors and leaders to determine the feasibility of an Intermediate Care Unit to decompress the Medical Intensive Care Unit and the Emergency Department.

PROBLEM

A successful Maryland hospital experienced increased one-day stays in the Medical Intensive Care Unit (MICU) and increased high-acuity patients boarding in the Emergency Department (ED). The ED had a short-stay unit that consisted primarily of “rule-out” cardiac patients, resulting in poor financial performance. The hospital sought a financially viable means by which to address one-day stays in the MICU and short stays in the ED.

SOLUTION

IMA Consulting incorporated detailed data analyses, along with interviews with departmental stakeholders to identify the viability of an Intermediate Care Unit. Analyses of the diagnoses of proposed patients, appropriate admission criteria, patient population revenues, and operating expenses formed the basis of a business plan to launch to an Intermediate Care Unit.

RESULTS

The hospital elected not to pursue development of an Intermediate Care Unit, based upon the thorough analyses and business planning. The lack of incremental volume and concomitant revenue drove the decision. The addition of an Intermediate Care Unit would have shifted revenues, not generated new revenues. Creating the unit would have also added incremental costs. Further, with ED volumes projected to remain stable, capacity existed within the department. IMA Consulting recommended focusing attention to improving patient placement and throughput as means by which to address the issues.

THE IMA APPROACH

The openness of hospital leadership to accept the data driven analyses and business plan, rather than implement the unit spoke well of the receptivity of the team. The objectivity of the data, presented within the context of the hospital’s overall plan, made the case for not implementing the unit clearly.