**Evaluation of Social Services can impact Hospital Avoidable days**

1. There are no human subjects in this study. Existing data will be evaluated and trended to determine if the Department of Social Services can impact and decrease the delays to patient discharges that cause avoidable days in a hospital stay. This will be a quantitative study that is meant to help improve quality issues.
2. There are no human subjects. Therefore, no recruitment procedures or consents will be identified or used.
3. This study will be using existing data to evaluate and trend causes in delays in hospital discharges of patients. This data will be collected from the current electronic documentation programs used by the hospital’s case management/utilization review and social services departments. This information has been an issue for the hospital because of the shortage of beds, increase of costs and decrease of patient satisfaction scores. The hope is to determine what interventions can be implemented to help decrease the number of delays to help decrease the number of avoidable days to hospital discharges; to help improved patient satisfaction, help the hospital decrease costs, and to help address the shortage of hospital beds.
4. There are no foreseen potentials of risks at this time.
5. No human subjects will used. NO risks known at this time. Therefore, no procedures were identified to reduce risks.
6. The potential benefits of this evaluation can help the hospital decrease avoidable days and delays in discharges. Therefore saving money by decreasing hospital overhead and insuring full payment for payor sources; save time by not having to appeal denies from payors or save time by limiting the number of hours patients stay in the emergency room or holding area; and protect resources of nursing staff, supplies, beds, or reserved revenue . This ultimately can benefit and improve patient’s care and satisfaction.
7. No human subjects will be used. No compensation will be offered.
8. There are no risks in relation to the anticipated benefits identified or known at this time.
9. This project’s site is University Medical Center in Lubbock, Texas. UMC is a county hospital. Director of Social Services, Sylvia Stice, LMMS, ACM; gave verbal approval for this project, as this is something that UMC is trying to address and feel this would be a benefit to them. Verbal approval has also been given by the Director of Case Management, Joyce Timmons as well as field supervisor Kathy Le, LBSW-MSW. No formal written approval was given due to the project not including human subjects and therefore does not need to be presented in front of the committee for review.
10. I am a social work intern completing my field practicum at UMC. My field supervisor is Kathy Le, LBSW-MSW. I am also working with Director of Social Services-Sylvia Stice, LMSW, ACM. My program director is Dave Henton.
11. N/A- Director of Social Services Sylvia Stice, LMSW, ACM provided verbal consent on the evaluation. Field supervisor Kathy Le, LBSW-MSW has also gave consent on the evaluation.
12. This evolution has not been approved by another IRB.
13. University Medical Center Social Services Department and Case Management Department will have access to this completed study/evaluation and the results.