

**LTS PLANNING COMMITTEE
COP VARIANCE REQUEST**

Case Manager: Cortney Doescher-Hino
Date: 9/22/16

FUND COP SERVICES FOR PARTICIPANT RECEIVING RECUPERATIVE SERVICES IN AN INSTITUTION (UP TO 90 DAYS).

The purpose of this variance is to maintain a participant's support network during relatively brief institutional stays. No variance is needed for recuperative stays of 30 days or less. When a recuperative stay exceeds 30 days a variance is necessary to allow the use of COP funds to continue to pay for noninstitutional community service expenses for up to 90 days for current COP recipients.

1. INSTITUTION NAME: Oak Park Place

2. EXPECTED DURATION: 90 days until 11/27/16

3. PARTICIPANT INFORMATION

- Male X Female Age 79 Time on COP/Waiver programs 6/1/16 Protective Placement No
- Current living arrangement: X home
- Health & medical problems (please use non-medical terms): Consumer has been diagnosed with chronic obstructive pulmonary disease, and his recent hospitalization on 8/27/16 was due to a flare up of this. He was found to have pneumonia as well and put on oxygen. He was also hospitalized for two days on 8/22/16 due to extreme back pain. This is a chronic condition he has and is managed by medication.
- Situation requiring rehabilitation and desired outcomes:
Consumer was hospitalized and then went into a nursing home on 9/2/16. He will continue with physical and occupational therapy. Due to his severe back pain, physical therapy will work with him on safe transfers and walking up and down stairs. He lives in his own apartment on the second floor, so rehab will work with him on this. Case Manager will monitor his living situation and safety in preparation for his return home. If he is unable to return home case manager will look at alternative living arrangements. He was also prescribed oxygen, yet he is unable to carry a portable unit up and down stairs, therefore rehab will focus on either weaning him off of this or increasing his strength and stamina.

Services to be funded during rehabilitation: Case Management x, Lifeline , other

LTS Committee action: Chair approval date ; Full committee approval date ;
Non approval date ; Reason

Consumer Name: