

**LTS PLANNING COMMITTEE
COP VARIANCE REQUEST**

Case Manager: Tara Miller

Date: 11/28/16

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

The purpose of this variance is to maintain a client'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 clients.

1. INSTITUTION NAME: Belmont Nursing home

2. EXPECTED DURATION: Admitted 10/14/16 anticipated discharge date 12/2/16 (49 days)

3. PARTICIPANT INFORMATION

- Male ☐ Female ☒ Age 67
- Time on COP/Waiver programs 13 years
- Protective Placement _____
- Current living arrangement: ☒ Home
☐ AFH
☐ CBRF (name, size) _____
☐ NH (name) _____
- Health & medical problems (please use non-medical terms): NA
- Situation requiring rehabilitation and desired outcomes: Client was admitted to the hospital on Oct. 14th with a fractured foot. Client was taken to Belmont Nursing Home for rehab and to work with Physical Therapy and Occupational Therapy to regain strength when transferring. Upon discharge client will be getting Physical Therapy at home to continue to gain more strength and stability to be successful living at home independently.
- Services to be funded during rehabilitation: ☒ Case Management ☒ Lifeline ☐ Other: _____

LTS Committee action: Chair approval date _____ Full committee approval date _____

Non approval date _____ Reason _____

Client Name: _____