#### LTS PLANNING COMMITTEE COP VARIANCE REQUEST

# Case Manager:Eleanor Heeringa-OwenDate:March 9, 2017FUND COP SERVICES FOR PARTICIPANT RECEIVING RECUPERATIVE SERVICES IN ANINSTITUTION (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: \_\_\_\_Waunakee Manor\_\_\_

## 2. EXPECTED DURATION: <u>Up to 90 days</u>

### PARTICIPANT INFORMATION

- Male \_\_\_ Female \_X \_\_ Age \_99 \_\_ Time on a Waiver Programs \_9 years \_\_\_ Protective Placement \_\_\_ No\_\_\_
- Current living arrangement: <u>X</u> home

- \_\_\_\_CBRF (name, size) \_\_\_\_\_
- Health & medical problems (please use non-medical terms, include a list of their diagnoses):

Participant's health and medical problems include: **Neuropathy** which is a problem with peripheral nerves, **Sciatica**, which is pain radiating from the lower back through the hips and buttocks, **Anxiety** or worry, **Depressive disorder**, **Degenerative joint disease** – a type of arthritis, **Osteoporosis**, which causes brittle and fragile bones

• Situation requiring rehabilitation and desired outcomes:

Participant fell in her home when her legs gave out on November 27<sup>th</sup>, 2016. She was transported by ambulance to the ER, and was admitted to the hospital. Participant was diagnosed with a urinary tract infection, and an ischemic stroke, which is blockage of blood and oxygen to the heart. Participant was transferred from the hospital, to the Waunakee Manor on December 1, 2016<sup>t</sup>, for strengthening and rehabilitation. At that time, participant was having right sided weakness, required assistance for transfers, and had difficulties in her speech, and memory. It was the desired outcome, that the participant could return home.

While in therapies at the Nursing Home, it was recommended that the participant move to assisted living, where help would be available for all meals, medication management, money management, and most of all supervision. The desired outcome is for the participant to remain healthy, and in her community. Participant moved to assisted living, Artisan – DeForest, on January 5, 2017, just a couple blocks from her apartment.

Services to be funded during rehabilitation: Case Management X, Lifeline X (**\$25/mo**), other

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

Client Name: \_\_\_\_\_

\_\_\_\_ AFH