

**Case Manager:** Renee Knoble **Date:** 2/15/17

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:** Oregon Manor

**2. EXPECTED DURATION:** Up to 90 Days

- Male \_\_\_ Female X Age \_\_\_\_\_ Time on COP/Waiver programs 4/3/2014 Protective Placement \_\_\_ No \_\_\_
- Current living arrangement: \_\_\_ home  
 \_\_\_ AFH  
X CBRF (name, size) \_\_\_\_\_ Main Street Quarters [20 beds] \_\_\_\_\_  
 \_\_\_ NH (name) \_\_\_\_\_
- Health & medical problems (please use non-medical terms): Client was hospitalized at Meriter Hospital from 1/26/17 to 1/30/17 to treat an infection on her toes with oral antibiotics. Client also has a diagnosis of Multiple Sclerosis [MS] which is a disease that affects the brain and spinal cord and can cause muscle spasms, weakness in legs, balance problems and loss of coordination. Due to client's MS and infection in her toes client had some declines in her ability to transfer (get up and down from seated position) after having been in the hospital and therefore it was felt that she would benefit from a short term stay at Oregon Manor to receive rehabilitative services (physical and occupational therapy) in hopes that she could regain her ability to transfer with minimal physical assistance. Currently client requires a lift and two people to assist with transferring to maintain her safety. Additional diagnoses include: hypertension [high blood pressure], urinary incontinence, edema [swelling due to fluid build up in the body tissue], peripheral neuropathy [nerve damage], history of deep vein thrombosis/DVT [blood clot], and dyslipidemia [abnormal amount of fat and cholesterol in the blood].
- Situation requiring rehabilitation and desired outcomes:  
Prior to her admission to the hospital, client he had been living at Main Street Quarters which is licensed as a Community Based Residential Facility. Due to recent changes in her functioning due to an infection on her toes and inability to transfer even with the help of another person, she was admitted to Oregon Manor to receive physical and occupational therapy services. Per Main Street Quarters, client will not be able to return unless she is able to demonstrate in therapies that she can transfer and pivot with the assistance of one person when toileting and when transferring from her bed to her wheel chair. Currently, client is a two person assist with transferring using a mechanical lift (EZ Stand). Client would like to continue receiving physical therapy as she would like to be re-admitted to Main Street Quarters once she is finished with her rehabilitative services.

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- Services to be funded during rehabilitation:

Case Management   X   [.70 units Jan \$77.31; 2 units Feb \$220.88; 1 unit Mar \$110.44] \_\_\_\_\_

Lifeline \_\_\_\_\_

Other (identify other)   CBRF care & supervision 1-26 through 2-25 100% \$2,025.05 and 2-26 through 3-7 50% \$385.17   \_\_\_\_\_

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

Non approval date \_\_\_\_\_; Reason \_\_\_\_\_

Consumer Name: \_\_\_\_\_

**Update:** Client returned to Main Street Quarters on 3-8-17.