

**LTS PLANNING COMMITTEE
COP VARIANCE REQUEST**

Case Manager: Jane Lanpher

Date: January 24, 2018

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: Nazareth Health and Rehabilitation Center

2. EXPECTED DURATION: Up to 90 days from the date of initial hospitalization (10/31/18)

3. PARTICIPANT INFORMATION

- Male ___ Female X Age 102 yrs. old Time on a Waiver Programs since 10/2106 Protective Placement No
- Current living arrangement: ___ home
___ AFH
X CBRF (name, size) Kindred Hearts of Cottage Grove Independent Apartment CBRF -

Health & medical problems (please use non-medical terms, include a list of their diagnoses):

Program participant's medical diagnoses include: Dementia, Chronic Kidney Disease – Stage 4, Coronary Artery Disease (CAD), Diastolic Dysfunction, Chronic Bronchitis, Pain, Overactive Bladder, Weakness, Anemia, Gout, Obstructive Sleep Apnea, Depression, Esophageal Reflux, Edema, Essential Hypertension, benign.

- Situation requiring rehabilitation and desired outcomes:

The program participant fell twice in her room at Kindred Hearts of Cottage Grove on 10/31/17. The first fall, which was out bed in the morning, resulted in a minor forearm fracture. A trip by ambulance to the ER resulted in a diagnosis with outpatient medical recommendations. Her second fall later that day was out of her lift chair. During this fall, the program participant suffered a hip fracture. Following this second transport to the ER at St. Mary's Hospital, she was hospitalized and then underwent hip surgery the following day.

After more than two weeks in the hospital, our program participant was discharged on 11/19/17 to Nazareth Health and Rehabilitation Center for a rehabilitative stay. Once at the nursing home, her medical condition and cognitive functioning deteriorated, due in part to the residual effects of an aspiration episode at the hospital and also due to a Urinary Tract Infection (UTI). Then, as she stopped eating and drinking sufficiently, dehydration set in, further compromising her health status.

With medical intervention at the nursing home, which included IV fluids and antibiotics as well as a modified diet (mechanical soft, nectar thickened), the program participant's physical condition stabilized and her memory / cognition also improved. She began making progress in daily physical therapy,

occupational therapy and speech & language therapy. Despite the gains however, the program participant did not regain mobility, she continued to require use of a mechanical lift for all transfers and a foley catheter, placed during hospitalization, was deemed necessary on a permanent basis.

After discharge from her therapies in early January 2018 and with the hope that she was ready to return home, KindredHearts staff completed an assessment of the program participant and determined that her increased care needs could be met at their facility. The CBRF routinely utilizes mechanical lifts (hoyer lifts, E-Z stands) for residents needing a high level of support with transferring and already had this equipment at the facility with staff trained in their use. Once discharge planning efforts were completed (acquisition of a wheelchair, home health services in place, etc.), the program participant returned home to KindredHearts of Cottage Grove on 1/16/18.

The program participant's transition back to the community has been going generally well thus far. In addition to the care provided by CBRF staff, she is also now receiving hospice services under her Medicare benefit. This offers additional support not only to the program participant but also to her family and the assisted living facility. Catheter care will now be provided by the hospice nurse rather than a home health agency.

Services to be funded during rehabilitation: Case Management X (17.6 hrs total = \$1793.79), Lifeline _____, other:

Dane County's portion of program participant's care and supervision costs at Kindred Hearts (the full \$1927.22 for the month of November 2017, 50% of our portion ((\$963.61)) for December 2017 and January 2018).

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

Non approval date _____; Reason _____

Consumer Name: _____