

OMA Current Living Arrangement Report

SA	X	Service Location:	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Group:	Adult	Print Date:	7/31/2008		
Client ID:	XXXXXXX	Client	XXXXXXX	Date From:	06/26/2007	Date To:	07/28/2008	Num Days:	398
Residential Type:									
Partnership Type:	Post-Partnership								
Client ID:	XXXXXXX	Client	XXXXXXX	Date From:	07/16/2006	Date To:	09/11/2007	Num Days:	423
Residential Type:	Acute Medical Hospital								
Partnership Type:	Post-Partnership								
Client ID:	XXXXXXX	Client	XXXXXXX	Date From:	02/14/2008	Date To:	07/28/2008	Num Days:	166
Residential Type:	Acute Medical Hospital								
Partnership Type:	Post-Partnership								
Client ID:	XXXXXXX	Client	XXXXXXX	Date From:	04/03/2008	Date To:	07/28/2008	Num Days:	117
Residential Type:	Acute Medical Hospital								
Partnership Type:	Post-Partnership								
Client ID:	XXXXXXX	Client	XXXXXXX	Date From:	05/14/2008	Date To:	07/28/2008	Num Days:	76
Residential Type:	Acute Medical Hospital								
Partnership Type:	Post-Partnership								
Client ID:	XXXXXXX	Client	XXXXXXX	Date From:	02/06/2008	Date To:	07/28/2008	Num Days:	174
Residential Type:	Acute Psychiatric Hospital / Psychiatric Health Facility (PHF)								
Partnership Type:	Post-Partnership								
Client ID:	XXXXXXX	Client	XXXXXXX	Date From:	04/08/2008	Date To:	07/28/2008	Num Days:	112
Residential Type:	Acute Psychiatric Hospital / Psychiatric Health Facility (PHF)								
Partnership Type:	Post-Partnership								
Client ID:	XXXXXXX	Client	XXXXXXX	Date From:	04/24/2008	Date To:	07/28/2008	Num Days:	96
Residential Type:	Acute Psychiatric Hospital / Psychiatric Health Facility (PHF)								
Partnership Type:	Post-Partnership								
Client ID:	XXXXXXX	Client	XXXXXXX	Date From:	06/29/2008	Date To:	07/28/2008	Num Days:	30
Residential Type:	Acute Psychiatric Hospital / Psychiatric Health Facility (PHF)								
Partnership Type:	Post-Partnership								

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