|  | AGING AND LONG-TERM SUPPORT ADMINISTRATION (ALTSA)ENHANCED SERVICES FACILTY (ESF)**ESF Exit Preparation Worksheet** | Attachment L |
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| ENHANCED SERVICES FACILITY NAME | LICENCE NUMBER | ENTRANCE DATE |
| LICENSOR’S NAME | Inspection Type: [ ]  Full [ ]  Follow up [ ]  Complaint:  |
| ISSUES | RESIDENT / STAFF NUMBER | SCOPE / CONCERNS | WAC / RCW (CONSULTATION, CITATION) |
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