



Washington State Patrol
Fire Protection Bureau
Phone: (360) 596-3900

Business Name	Garden Courte Alzheimer Community	Provider Number	001111
Address	626 LILLY RD NE,	Approval Status	Approved
City, State, Zip	Olympia, WA 98506	Facility Type	Residential Care

On 09/06/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

All violations noted during previous related inspection(s) have been corrected.

Owner or Owner's Representative



Signature

Keenan Olsen - maintenance director

Print Name and Title

Deputy State Fire Marshal Raul Murcia
PO BOX 42642
Olympia WA 98504
(360) 819-0067



Signature

Right of appeal. Any person may appeal any decision made by the Fire Protection Bureau in accordance with WAC 212-12.



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Business Name	Garden Courte Alzheimer Community	Provider Number	001111
Address	626 LILLY RD NE,	Approval Status	Disapproved
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On 06/05/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Contents

Fire safety, evacuation and lockdown plan contents shall be in accordance with Sections 404.2.1 through 404.2.3.2.

(IFC 404.2 2018)

Findings during the inspection were:

Facility's fire evacuation plan is missing the following elements;

1. Actions to be taken by the person discovering the fire (WAC 212-12-040(1)).

2. Method for sounding the alarm on the premises (WAC 212-12-040(2)).

2 Power Supply

Extension cords shall be plugged directly into an approved receptacle, power tap or multiplug adapter and, except for approved multiplug extension cords, shall serve only one portable appliance.

(IFC 604.5.1 2018)

Findings during the inspection were:

Facility failed to maintain microwave located in community relations room, microwave shall be plugged in the wall receptacle.

3 Unapproved conditions

Open junction boxes and open-wiring splices shall be prohibited. Approved covers shall be provided for all switch and electrical outlet boxes.

(IFC 604.6. 2018)

Findings during the inspection were:

Facility failed to maintain electrical outlet located in north med station room, missing cover plate.



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4 Owner's Responsibility

The owner shall maintain an inventory of all required fire-resistance-rated construction, construction installed to resist the passage of smoke and the construction included in Sections 703 through 707 and Sections 602.4.1 and 602.4.2 of the International Building Code. Such construction shall be visually inspected by the owner annually and properly repaired, restored or replaced where damaged, altered, breached or penetrated. Records of inspections and repairs shall be maintained. Where concealed, such elements shall not be required to be visually inspected by the owner unless the concealed space is accessible by the removal or movement of a panel, access door, ceiling tile or similar movable entry to the space.

(IFC 701.6 2018 WAC 51-54A)

Findings during the inspection were:

Facility failed to maintain fire-resistance-rated construction in the following locations;

1. Between basement mechanical room and medical storage, holes on both sides of wall.
2. North janitor's closet, hole in wall.

5 Inspection and Maintenance

Opening protectives in fire-resistance-rated assemblies shall be inspected and maintained in accordance with NFPA 80. Opening protectives in smoke barriers shall be inspected and maintained in accordance with NFPA 80 and NFPA 105. Openings in smoke partitions shall be inspected and maintained in accordance with NFPA 105. Fire doors and smoke and draft control doors shall not be blocked, obstructed, or otherwise made inoperable. Fusible links shall be replaced promptly whenever fused or damaged. Opening protectives and smoke and draft control doors shall not be modified.

(IFC 705.2 2018)

Findings during the inspection were:

Facility failed to maintain fire doors throughout the building, door wedges and other items are being used to hold doors open.

6 Duct and Air Transfer Openings - Maintaining Protection

Dampers protecting ducts and air transfer openings shall be inspected and maintained in accordance with NFPA 80 and NFPA 105. Other products or materials used to protect the openings for ducts and air transfer openings shall be securely attached to or bonded to the construction containing the duct or air transfer opening, without visible openings through or into the cavity of the construction. Any damaged products or materials protecting duct and air transfer openings shall be repaired, restored or replaced.

(IFC 706.1 2018)

Findings during the inspection were:

Facility failed to provide documentation showing fire/smoke dampers 4-year inspection.



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Code Requirement

Statement of Violation

7 Inspection, Testing and Maintenance

Fire detection and alarm systems, emergency alarm systems, gas detection systems, fire-extinguishing systems, mechanical smoke exhaust systems and smoke and heat vents shall be maintained in an operative condition at all times, and shall be replaced or repaired where defective. Nonrequired fire protection systems and equipment shall be inspected, tested and maintained or removed.

(IFC 901.6 2018)

Findings during the inspection were:

Facility failed to maintain kitchen suppression system, system currently leaving. Kitchen suppression system shall be maintained in an operative condition at all times, and shall be replaced or repaired where defective.

8 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901.

(IFC 903.5 2009, 2012, 2015, 2018)

Findings during the inspection were:

Facility failed to provide the following documentation for the sprinkler system;

1. Annual inspection report.
2. Backflow inspection.
3. Five-year fire department connection hydrostatic test.
4. Quarterly inspections.

Facility failed to maintain fire alarm system and must correct the following;

1. Yellow status must be corrected so the system is back to normal.
2. Must provide permits for the newly installed fire alarm panel/system.

9 Certification of Service Personnel for Fire-Extinguishing Equip

Service personnel performing system design, installation or conducting system maintenance or testing on automatic fire-extinguishing systems, other than automatic sprinkler systems, shall possess the appropriate ICC/NAFED certification.

(IFC 904.1.1 2018 WAC 51-54A)

Findings during the inspection were:

Facility failed to provide documentation showing service technician for kitchen suppression system holds ICC certification.



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Statement of Violation

10 Extinguishing System Service

Automatic fire-extinguishing systems shall be serviced not less frequently than every six months and after activation of the system. Inspection shall be by qualified individuals, and a certificate of inspection shall be forwarded to the fire code official upon completion.

(IFC 904.12.5.2 2018)

Findings during the inspection were:

Facility failed to provide documentation showing 2nd semi-annual servicing for kitchen suppression system. Missing service report after 7/07/2022

11 Portable Fire Extinguishers - General Requirements

Portable fire extinguishers shall be selected, installed and maintained in accordance with this section and NFPA 10.

Exceptions:

1. The distance of travel to reach an extinguisher shall not apply. The travel distance to reach an extinguisher shall not apply to the spectator seating portions of Group A-5 occupancies.

2. Thirty-day inspections shall not be required and maintenance shall be allowed to be once every three years for dry-chemical or halogenated agent portable fire extinguishers that are supervised by a listed and approved electronic monitoring device, provided that all of the following conditions are met:

2.1. Electronic monitoring shall confirm that extinguishers are properly positioned, properly charged and unobstructed.

2.2. Loss of power or circuit continuity to the electronic monitoring device shall initiate a trouble signal.

2.3. The extinguishers shall be installed inside of a building or cabinet in a noncorrosive environment.

2.4. Electronic monitoring devices and supervisory circuits shall be tested every 3 years when extinguisher maintenance is performed.

2.5. A written log of required hydrostatic test dates for extinguishers shall be maintained by the owner to verify that hydrostatic tests are conducted at the frequency required by NFPA 10.

3. In Group I-3, portable fire extinguishers shall be permitted to be located at staff locations.

(IFC 906.2 2015, 2018)

Findings during the inspection were:

Facility failed to inspect fire extinguishers monthly.

Facility failed to maintain extinguishers in the following location.

1. Elevator room, not inspected in the last 2 years.

2. Tool shed room, extinguisher blocked.

3. No Class-K fire extinguisher located in kitchen (IFC 906.4).



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12 Testing/Maintenance

All inspection, testing, maintenance and programming not defined as "electrical construction trade" by chapter 19.28 RCW shall be completed by a NICET II or ESA/NTS Certified Fire Alarm Technician (CFAT) Level II Fire in fire alarms (effective July 1, 2018).

(IFC 907.10.1 2018 WAC 51-54A)

Findings during the inspection were:

Facility failed to provide documentation showing maintenance technician for the fire alarm system holds a NICET II or ESA/NTS certificate.

13 Inspection, Testing and Maintenance

The maintenance and testing schedules and procedures for fire alarm and fire detection systems shall be in accordance with Sections 907.8.1 through 907.8.5 and NFPA 72. Records of inspection, testing and maintenance shall be maintained.

(IFC 907.8 2018)

Findings during the inspection were:

Facility failed to provide documentation showing annual inspection of fire alarm system.

Facility failed to maintain fire alarm system, currently in yellow status and must provide permits for the new system.

14 Smoke Detector Sensitivity

Smoke detector sensitivity shall be checked within one year after installation and every alternate year thereafter. After the second calibration test, where sensitivity tests indicate that the detector has remained within its listed and marked sensitivity range (or 4-percent obscuration light grey smoke, if not marked), the length of time between calibration tests shall be permitted to be extended to a maximum of 5 years. Where the frequency is extended, records of detector-caused nuisance alarms and subsequent trends of these alarms shall be maintained. In zones or areas where nuisance alarms show any increase over the previous year, calibration tests shall be performed.

(IFC 907.8.3 2012, 2015, 2018)

Findings during the inspection were:

Facility failed to provide documentation showing sensitivity report for smoke detectors.

15 Maintenance

Carbon monoxide alarms and carbon monoxide detection systems shall be maintained in accordance with NFPA 720. Carbon monoxide alarms and carbon monoxide detectors that become inoperable or begin producing end-of-life signals shall be replaced.

(IFC 915.6 2018)

Findings during the inspection were:

There is no carbon monoxide detector located in commercial laundry room.



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16 Means of Egress Continuity

The path of egress travel along a means of egress shall not be interrupted by any building element other than a means of egress component as specified in this chapter. Obstructions shall not be placed in the minimum width or required capacity of a means of egress component except projections permitted by this chapter. The minimum width or required capacity of a means of egress system shall not be diminished along the path of egress travel.

(IFC 1003.6 2015, 2018)

Findings during the inspection were:

Facility failed to maintain path of egress going from basement to south staircase, various items blocking path to staircase and in staircase.



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17 Exit Signs - Where Required

Exits and exit access doors shall be marked by an approved exit sign readily visible from any direction of egress travel. The path of egress travel to exits and within exits shall be marked by readily visible exit signs to clearly indicate the direction of egress travel in cases where the exit or the path of egress travel is not immediately visible to the occupants. Intervening means of egress doors within exits shall be marked by exit signs. Exit sign placement shall be such that any point in an exit access corridor or exit passageway is within 100 feet (30 480 mm) or the listed viewing distance of the sign, whichever is less, from the nearest visible exit sign.

Exceptions:

1. Exit signs are not required in rooms or areas that require only one exit or exit access.
2. Main exterior exit doors or gates that are obviously and clearly identifiable as exits need not have exit signs where approved by the fire code official.
3. Exit signs are not required in occupancies in Group U and individual sleeping units or dwelling units in Group R-1, R-2 or R-3.
4. Exit signs are not required in dayrooms, sleeping rooms or dormitories in occupancies in Group I-3.
5. In occupancies in Groups A-4 and A-5, exit signs are not required on the seating side of vomitories or openings into seating areas where exit signs are provided in the concourse that are readily apparent from the vomitories. Egress lighting is provided to identify each vomitory or opening within the seating area in an emergency.

(IFC 1013.1 2018)

Findings during the inspection were:

Facility failed to maintain exit sign located at the north stairs, chevron pointing to area with no exit.



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18 Activation Test

Emergency lighting equipment shall be tested monthly for a duration of not less than 30 seconds. The test shall be performed manually or by an automated self-testing and self-diagnostic routine. Where testing is performed by self-testing and self-diagnostics, a visual inspection of the emergency lighting equipment shall be conducted monthly to identify any equipment displaying a trouble indicator or that has become damaged or otherwise impaired.

(IFC 1031.10.1 2018)

Findings during the inspection were:

Facility failed to provide documentation showing 30-second monthly activation test of exit signs and emergency lighting.

19 Power Test

Battery-powered emergency lighting equipment shall be tested annually by operating the equipment on battery power for not less than 90 minutes.

(IFC 1031.10.2 2018)

Findings during the inspection were:

Facility failed to provide documentation showing 90-minute annual test of exit signs and emergency lighting.

20 Maintenance

Emergency and standby power systems shall be maintained in accordance with NFPA 110 and NFPA 111 such that the system is capable of supplying service within the time specified for the type and duration required.

(IFC 1203.4 2018)

Findings during the inspection were:

Facility failed to provide the following documentation for the generator.

1. Annual inspection report.
2. Log of weekly inspections.
3. Log of monthly 30-minute full load test.



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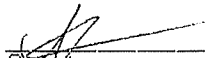
Code Requirement

Statement of Violation

Next inspection scheduled on or after: 07/07/2023

Right of appeal. Any person may appeal any decision made by the Fire Protection Bureau in accordance with WAC 212-12.

Owner or Authorized Representative


Signature

Keenan Olsen maintenance
Print Name and Title director

Deputy State Fire Marshal Raul Murcia
PO BOX 42642
Olympia WA 98504
(360) 819-0067


Signature