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

Business Name	Wheatland Village Assisted Living	***Provider Number***	001640
Address	1500 CATHERINE ST ,	***Approval Status***	Disapproved
City, State, Zip	Walla Walla, WA 99362	***Facility Type***	Residential Care

On 10/7/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
14 Opening Protectives - Floor Openings and Shafts	
When openings are required to be protected, opening protectives shall be maintained self-closing or automatic-closing by smoke detection. Existing fusible-link-type automatic door-closing devices are permitted if the fusible link rating does not exceed 135ºF (57ºC). (IFC 0704.2)	Corrected
15 Hold-Open Devices and Closers	
Hold-open devices and automatic door closers, where provided, shall be maintained. During the period that such device is out of service for repairs, the door it operates shall remain in the closed position. (IFC 705.2.3 2021)	The following violations were observed: Doors with self closers were blocked open in the following locations: Wheatland Building: Room 220 (corrected during re-inspection) Room 212 (corrected during re-inspection) Parkview Building: Vitality Director's office Vitality Director's office storage room
16 Door Operation	
Swinging fire doors shall close from the full-open position and latch automatically. (IFC 705.2.4 2021)	Corrected
17 Installation Requirements	
Automatic sprinkler systems shall be designed and installed in accordance with Sections 903.3.1 through 903.3.8. (IFC 903.3 2021)	The following violation was observed: Wheatland Building: Second floor community deck - combustible awning was installed without fire sprinkler coverage.

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18 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2021)	The following violations were observed: Facility was unable to provide documentation of annual forward flow testing on the fire sprinkler backflow devices in Wheatland and Parkview buildings within the past twelve months. Facility was unable to provide documentation of hydrostatic testing on the fire department connections for Wheatland and Parkview buildings within the past five years. Facility was unable to provide documentation of first quarter 2024 fire sprinkler system in Wheatland and Parkview building inspections.

19 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 904.13.5.2 2021)	The following violation was observed: Facility was unable to provide documentation of 2024 second semi annual service on the Wheatland and Parkview kitchen hood suppression systems. Facility provided reports for February 15, 2024 and March 3, 2025

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20 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 2021)	Corrected

21 Unobstructed and Unobscured

Portable fire extinguishers shall not be obstructed or obscured from view. In rooms or areas in which visual obstruction cannot be completely avoided, means shall be provided to indicate the locations of extinguishers. (IFC 906.6 2021)	Corrected

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Code Requirement	Statement of Violation

22 Hangers and Brackets

Hand-held portable fire extinguishers, not housed in cabinets, shall be installed on the hangers or brackets supplied. Hangers or brackets shall be securely anchored to the mounting surface in accordance with the manufacturer's installation instructions. (IFC 906.7 2021)	Corrected

23 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 2021)	The following violations were observed: Facility was unable to provide documentation of annual inspection and testing of the fire alarm Wheatland building system within the past twelve months. Fire Alarm Control Panel has active trouble signal. Wheatland Building: Fire alarm control panel room - electrical panel and breaker providing power to the FACP not noted on the FACP box Emergency Power Panel - no signage on front of panel indicating the FACP breaker is within the panel

24 Testing / Maintenance

All inspection, testing, maintenance and programing 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 907.8.4.1 2021 WAC)	The following violation was observed: Facility was unable to provide documentation of NICET certification for technicians performing annual fire alarm inspection and testing on the Parkview building.

25 Maintenance

Carbon monoxide alarms and carbon monoxide detection systems shall be maintained in accordance with NFPA 72. Carbon monoxide alarms and carbon monoxide detectors that become inoperable or begin producing end-of-life signals shall be replaced. (IFC 915.6 2021 WAC)	The following violation was observed: Facility was unable to provide documentation of monthly carbon monoxide alarm testing after December 2024 for both Wheatland and Parkview buildings.

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26 Controlled Egress Doors in Groups I-1 and I-2

Electric locking systems, including electromechanical locking systems and electromagnetic locking systems, shall be permitted to be locked in the means of egress in Group I-1 or I-2 occupancies where the clinical needs of persons receiving care require their containment. Controlled egress doors shall be permitted in such occupancies where the building is equipped throughout with an automatic sprinkler system in accordance with Section 903.3.1.1 or an approved automatic smoke or heat detection system installed in accordance with Section 907, provided that the doors are installed and operate in accordance with all of the following: 1. The doors shall unlock on actuation of the automatic sprinkler system or automatic smoke detection system. 2. The door locks shall unlock on loss of power controlling the lock or lock mechanism. 3. The door locking system shall be installed to have the capability of being unlocked by a switch located at the fire command center, a nursing station or other approved location. The switch shall directly break power to the lock. 4. A building occupant shall not be required to pass through more than one door equipped with a controlled egress locking system before entering an exit. 5. The procedures for unlocking the doors shall be described and approved as part of the emergency planning and preparedness required by Chapter 4 of the International Fire Code. 6. There is a system, such as a keypad and code, in place that allows visitors, staff persons and appropriate residents to exit. Instructions for exiting shall be posted within six feet of the door. 7. All clinical staff shall have the keys, codes or other means necessary to operate the locking systems. 8. Emergency lighting shall be provided at the door. 9. The door locking system units shall be listed in accordance with UL 294. EXCEPTIONS: 1. Items 1 through 4 and 6 shall not apply to doors to areas where persons, which because of clinical needs, require restraint or containment as part of the function of a psychiatric treatment area.	Corrected

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Code Requirement	Statement of Violation
2. Items 1 through 4 and 6 shall not apply to doors to areas where a listed egress control system is utilized to reduce the risk of child abduction from nursery and obstetric areas of a Group I-2 hospital. (IFC 1010.1.9.7 2021 WAC 51-54A)	

27 Hardware

Door handles, pulls, latches, locks and other operating devices on doors required to be accessible by Chapter 11 of the International Building Code shall not require tight grasping, tight pinching or twisting of the wrist to operate. (IFC 1010.2.2 2021)	Corrected

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Code Requirement	Statement of Violation
28 Gates	
Gates serving the means of egress system shall comply with the requirements of this section. Gates used as a component in a means of egress shall conform to the applicable requirements for doors. Exception: Horizontal sliding or swinging gates exceeding the 4-foot (1219 mm) maximum leaf width limitation are permitted in fences and walls surrounding a stadium. (IFC 1010.4, 2021) Electric locking systems, including electromechanical locking systems and electromagnetic locking systems, shall be permitted to be locked in the means of egress in Group I-1 or I-2 occupancies where the clinical needs of persons receiving care require their containment. Controlled egress doors shall be permitted in such occupancies where the building is equipped throughout with an automatic sprinkler system in accordance with Section 903.3.1.1 or an approved automatic smoke or heat detection system installed in accordance with Section 907, provided that the doors are installed and operate in accordance with all of the following: 1. The doors shall unlock on actuation of the automatic sprinkler system or automatic smoke detection system. 2. The door locks shall unlock on loss of power controlling the lock or lock mechanism. 3. The door locking system shall be installed to have the capability of being unlocked by a switch located at the fire command center, a nursing station or other approved location. The switch shall directly break power to the lock. 4. A building occupant shall not be required to pass through more than one door equipped with a controlled egress locking system before entering an exit. 5. The procedures for unlocking the doors shall be described and approved as part of the emergency planning and preparedness required by Chapter 4 of the International Fire Code. 6. There is a system, such as a keypad and code, in place that allows visitors, staff persons and appropriate residents to exit. Instructions for exiting shall be posted within six feet of the door.	Corrected

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Code Requirement	Statement of Violation
7. All clinical staff shall have the keys, codes or other means necessary to operate the locking systems. 8. Emergency lighting shall be provided at the door. 9. The door locking system units shall be listed in accordance with UL 294. EXCEPTIONS: 1. Items 1 through 4 and 6 shall not apply to doors to areas where persons, which because of clinical needs, require restraint or containment as part of the function of a psychiatric treatment area. 2. Items 1 through 4 and 6 shall not apply to doors to areas where a listed egress control system is utilized to reduce the risk of child abduction from nursery and obstetric areas of a Group I-2 hospital. (IFC 1010.1.9.7 2021 WAC 51-54A)	

29 Securing Compressed Gas Containers, Cylinders and Tanks

Compressed gas containers, cylinders and tanks shall be secured to prevent falling caused by contact, vibration or seismic activity. Securing of compressed gas containers, cylinders and tanks shall be by one of the following methods: 1. Securing containers, cylinders and tanks to a fixed object with one or more restraints. 2. Securing containers, cylinders and tanks on a cart or other mobile device designed for the movement of compressed gas containers, cylinders or tanks. 3. Nesting of compressed gas containers, cylinders and tanks at container filling or servicing facilities or in sellers' warehouses not open to the public. Nesting shall be allowed provided that the nested containers, cylinders or tanks, if dislodged, do not obstruct the required means of egress. 4. Securing of compressed gas containers, cylinders and tanks to or within a rack, framework, cabinet or similar assembly designed for such use. Exception: Compressed gas containers, cylinders and tanks in the process of examination, filling, transport or servicing. (IFC 5303.5.3 2021)	Corrected

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Next inspection scheduled on or after: 11/6/2025

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

Ron Burt

Signature

Ron Burt / Plant OPS Director

Print Name and Title

Deputy State Fire Marshal Alan Harlan
2803 156TH AVE SE
Bellevue WA 98007
(425) 495-7121

Alan Harlan

Digitally signed by Alan Harlan
Date: 2025.10.07 16:04:21 -07'00'

Signature

Initials of Authorized Facility Representative: RB