



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

Business Name Woodland Retirement & AL Community

Provider Number 001709

Address 4532 Intelco ,

Approval Status Approved

City, State, Zip Lacey, WA 98503

Facility Type Residential Care

On 11/27/2023 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

Jennifer Hills Executive 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	Woodland Retirement & AL Community	Provider Number	001709
Address	4532 Intelco ,	Approval Status	Disapproved
City, State, Zip	Lacey, WA 98503	Facility Type	Residential Care

On 08/30/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Ceiling Clearance

Storage shall be maintained 2 feet (610 mm) or more below the ceiling in nonsprinklered areas of buildings or not less than 18 inches (457 mm) below sprinkler head deflectors in sprinklered areas of buildings.

Exceptions:

1. The 2-foot (610 mm) ceiling clearance is not required for storage along walls in nonsprinklered areas of buildings.
2. The 18-inch (457 mm) ceiling clearance is not required for storage along walls in areas of buildings equipped with an automatic sprinkler system in accordance with Section 903.3.1.1, 903.3.1.2 or 903.3.1.3.

(IFC 315.3.1 2018)

Findings during the inspection were:

Facility failed to maintain 2nd floor activity closet by room 280, storage less than 18 inches from sprinkler head.

2 Equipment Rooms - Storage in Buildings

Combustible material shall not be stored in boiler rooms, mechanical rooms, electrical equipment rooms or in fire command centers as specified in Section 508.1.5.

(IFC 315.3.3 2018)

Findings during the inspection were:

Facility failed to maintain mechanical room by room 110, combustible material shall not be stored mechanical rooms.

3 Abatement of Electrical Hazards

Identified electrical hazards shall be abated. Identified hazardous electrical conditions in permanent wiring shall be brought to the attention of the responsible code official. Electrical wiring, devices, appliances and other equipment that is modified or damaged and constitutes an electrical shock or fire hazard shall not be used.

(IFC 604.1 2018)

Findings during the inspection were:

Facility failed to maintain outlet in room 133, outlet by AC unit has burn markings. Also, cord from AC unit is burnt and melted.

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Statement of Violation

4 Temporary Wiring

Temporary wiring for electrical power and lighting installations is allowed for a period not to exceed 90 days. Temporary wiring methods shall meet the applicable provisions of NFPA 70.

Exception: Temporary wiring for electrical power and lighting installations is allowed during periods of construction, remodeling, repair or demolition of buildings, structures, equipment or similar activities.

(IFC 604.9 2018)

Findings during the inspection were:

Facility failed to maintain extension cord outside of room 181, Easter decoration.

5 Cleaning

Hoods, grease-removal devices, fans, ducts and other appurtenances shall be cleaned at intervals as required by Sections 607.3.3.1 through 607.3.3.3.

(IFC 607.3.3 2018)

Findings during the inspection were:

Facility must provide documentation showing kitchen hood will be cleaned twice a year. Sticker currently showing it is being done once a year.

6 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 provide documentation showing annual inspection of fire-resistance-rated construction.

Facility failed to maintain electrical panel room next to room 153, penetration in ceiling.

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7 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 4-year fire/smoke damper inspection.

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. Three-year dry system full flow trip test.
3. Annual trip test.
4. Quarterly inspections.

Facility failed to maintain the following locations for the sprinkler system;

1. Sprinkler head outside of room 359 is recessed, missing escutcheon plate, and glass bulb is painted over.
2. Sprinkler head in Executive Director's office being blocked by light fixture.

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 servicing kitchen suppression system holds NAFED certification.



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Code Requirement

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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 first and second semi-annual inspection of the kitchen suppression system.

11 Fusible Link and Sprinkler Head Replacement

Fusible links and automatic sprinkler heads shall be replaced annually, and other protection devices shall be serviced or replaced in accordance with the manufacturer's instructions.

Exception: Frangible bulbs are not required to be replaced annually.

(IFC 904.12.5.3 2018)

Findings during the inspection were:

Facility failed to provide documentation showing annual replacement of fusible links for the kitchen suppression system.

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12 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 maintain the following fire extinguishers;

1. All fire extinguishers on the 3rd floors, last annual inspection was in 2021.

2. Mechanical room next to room 110, last annual inspection was in 2020.

3. Elevator room #3, last annual inspection was in 2021.

13 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

14 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 2018)

Findings during the inspection were:

Facility failed to maintain oxygen tanks in the following locations;

1. Room 104, oxygen tank in minion tin can.
2. First floor oxygen room, unsecured oxygen tank.

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15 NFPA 80 Fire Door Inspection and Testing

5.2.1 Inspection and Testing. Upon completion of the installation, door, shutters, and window assemblies shall be inspected and tested in accordance with 5.2.4.

5.2.4 Periodic Inspection and Testing.

5.2.4.1 Periodic inspections and testing shall be performed not less than annually.

5.2.2.4 A record of all inspections and testing shall be provided that includes, but is not limited to, the following information:

1. Date of inspection
2. Name of facility
3. Address of facility
4. Name of person(s) performing inspections and testing
5. Company name and address of inspecting company
6. Signature of inspector of record
7. Individual record of each inspected and tested fire door assembly
8. Opening identifier and location of each inspected and tested fire door assembly
9. Type and description of each inspected and tested fire door assembly
10. Verification of visual inspection and functional operation
11. Listing of deficiencies in accordance with 5.2.3, Section 5.3, and Section 5.4

And the following shall be checked:

1. Labels are clearly visible and legible
2. No open holes or breaks exist in surfaces of either the door or frame
3. Glazing, vision light frames, and glazing beads are intact and securely fastened in place, if so equipped.
4. The door, frame, hinges, hardware, and non-combustible threshold are secured, aligned and in working order with no visible signs of damage
5. No parts are missing or broken
6. Door clearances do not exceed clearances listed in 4.8.4 and 6.3.1.7
7. The self-closing device is operational; that is, the active door completely closes when operated from the full open position
8. If a coordinator is installed, the inactive lead close before the active lead

Findings during the inspection were:

Facility failed to maintain the following doors;

1. Room 232 missing door handle.
2. Stairwell door by room 136 does not latch.
3. Room 112 missing door handle and dead bolt.

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9. Latching hardware operates and secures the door when it is in the closed position
10. Auxiliary hardware items that interfere or prohibit operation are not installed on the door or frame
11. No field modification to the door assembly have been preformed that void the label.
12. Meeting edge protection, gasketing and edge seals where required, are inspected to verify their presence and intertie
13. Signage affixed to a door meets the requirements listed in 4.1.4

Next inspection scheduled on or after:

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

Not Available
Signature

Print Name and Title

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

[Signature]
Signature