



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

Business Name	Highgate Senior Living - Bellingham	Provider Number	2097
Address	155 E KELLOGG RD ,	Approval Status	Approved
City, State, Zip	Bellingham, WA 98226	Facility Type	Residential Care

On 07/05/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

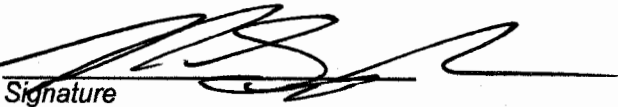
All violations noted during previous related inspection(s) have been corrected.

Owner or Owner's Representative


Signature

Jim Carney CRM
Print Name and Title

Deputy State Fire Marshal Brandon G. Brown
16778 146 ST SE
Monroe WA 98272
(360) 791-7037


Signature

This document was prepared by Residential Care Services for the Locator website.

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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Phone: (360) 596-3900

Business Name Highgate Senior Living - Bellingham
Address 155 E KELLOGG RD ,
City, State, Zip Bellingham, WA 98226

Provider Number 2097
Approval Status Disapproved
Facility Type Residential Care

On 05/30/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
1 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)	Corrected
2 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)	Corrected
3 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)	The following violations were observed: 1. The fire rated door to the Nurses office is missing parts and has been modified.

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Business Name	Highgate Senior Living - Bellingham	Provider Number	2097
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On 05/30/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
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4 Door Operation

Swinging fire doors shall close from the full-open position and latch automatically. (IFC 705.2.4 2018)	The following violations were observed: 1. Resident room #204 fire door would not close and latch from the fully open position. 2. The fire rated door to the 1st floor elevator would not close and latch from the fully open position.
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5 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)	Corrected
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Code Requirement	Statement of Violation
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6 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)	Corrected
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7 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)	Corrected
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Code Requirement	Statement of Violation
8 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)	Corrected
9 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)	Corrected
10 Emergency Power for Illumination - General	
In the event of power supply failure in rooms and spaces that require two or more means of egress an emergency electrical system shall automatically illuminate all of the following areas: 1. Aisles 2. Corridors 3. Exit access stairways and ramps (IFC 1008.3.1 2015, 2018)	Corrected

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Code Requirement	Statement of Violation
11 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)	Corrected
12 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)	Corrected
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)	Corrected
14 Fire Drills	
In all Group I, Group E, and Group R2 Occupancies licensed by the state and inspected by the state fire marshal's office, at least twelve planned and unannounced fire drills shall be held every year. (1) Drills shall be conducted quarterly on each shift in Group I and Group R2, Occupancies and monthly in Group E Occupancies to familiarize personnel with signals and emergency action required under varied conditions. (2) A detailed written record of all fire drills shall be maintained and available for inspection. (3) When drills are conducted between 9:00 p.m. and 6:00 a.m., a coded announcement may be used instead of audible alarms.	The following violations were observed: Facility cannot provide documentation for the completion of twelve planned and unannounced fire drills in the previous 12 months.

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Code Requirement

Statement of Violation

Next inspection scheduled on or after: 06/29/2023

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

Print Name and Title

Deputy State Fire Marshal Brandon G. Brown
16778 146 ST SE
Monroe WA 98272
(360) 791-7037

Signature

Landon Norton Maintenance Manager

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Facility Type Residential Care

On 04/24/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Administration

Extension requested by Landon Norton and granted by Brandon Brown until 2/27/23. Second extension request was granted until 3/29/23.

2 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)

Corrected

3 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)

The following violations were observed:

Facility is unable to provide documentation for the semi-annual hood cleaning.

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)

The following violations were observed:

Facility is unable to provide documentation that the annual fire wall inspection has been completed.

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Code Requirement

Statement of Violation

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)

The following violations were observed:

1. The fire rated door to the Nurses office is missing parts and has been modified.
2. The fire rated door to the Activities Directors office was blocked open by a wedge, preventing it from closing and latching.
3. Facility is unable to provide documentation that the annual fire door inspection has been completed.

NFPA 80 (2016)

5.2.3.5.2 As a minimum, the following items shall be verified:

- (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 noncombustible 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 leaf closes before the active leaf.
- (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 modifications to the door assembly have been performed that void the label.
- (12) Meeting edge protection, gasketing and edge seals, where required, are inspected to verify their presence and integrity.
- (13) Signage affixed to a door meets the requirements listed in 4.1.4.

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Code Requirement	Statement of Violation
6 Door Operation	
Swinging fire doors shall close from the full-open position and latch automatically. (IFC 705.2.4 2018)	The following violations were observed: 1. Resident room #204 fire door would not close and latch from the fully open position. 2. Resident room #205 fire door would not close and latch from the fully open position. 3. The fire rated door to the 1st floor elevator would not close and latch from the fully open position. 4. The delayed exit door in the dinning room did not open in 15 seconds.
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)	The following violations were observed: Facility is unable to provide documentation for the 4 year fire and 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)	Corrected
9 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)	Corrected

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Facility Type Residential Care

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Code Requirement

Statement of Violation

10 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)

The following violations were observed:

Facility was unable to provide the required documentation for monthly fire extinguisher maintenance in accordance with NFPA 10.

11 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)

The following violations were observed:

Facility is unable to provide documentation for the annual fire alarm system testing without deficiencies.



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Facility Type Residential Care

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Code Requirement	Statement of Violation
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12 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)

The following violations were observed:

Facility is unable to provide documentation for the required smoke detector sensitivity testing.

13 Inspection and Maintenance

Fire department connections shall be periodically inspected, tested and maintained in accordance with NFPA 25. Records of inspection, testing and maintenance shall be maintained.

(IFC 912.7 2018)

Corrected

14 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)

The following violations were observed:

Facility is unable to provide documentation for the monthly carbon monoxide detector testing.

NFPA 720 8.7.1 Single - and multiple-station carbon monoxide alarms and all connected appliances shall be inspected and tested in accordance with the manufacturer's published instructions at least monthly.

15 Emergency Power for Illumination - General

In the event of power supply failure in rooms and spaces that require two or more means of egress an emergency electrical system shall automatically illuminate all of the following areas:

1. Aisles
2. Corridors
3. Exit access stairways and ramps

(IFC 1008.3.1 2015, 2018)

The following violations were observed:

1. The emergency egress light in the 2nd floor activities room would not illuminate when the test button was pressed.
2. The emergency egress light in memory care laundry room would not illuminate when the test button was pressed.



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On 04/24/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

16 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)

The following violations were observed:

Facility is unable to provide documentation for the monthly 30 second activation test for the emergency lights.

17 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)

The following violations were observed:

Facility is unable to provide documentation for the annual 90 minute power test for the emergency lights.

18 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)

The following violations were observed:

Facility is unable to provide documentation for the annual servicing of the emergency generator.

19 Fire Drills

In all Group I, Group E, and Group R2 Occupancies licensed by the state and inspected by the state fire marshal's office, at least twelve planned and unannounced fire drills shall be held every year.

- (1) Drills shall be conducted quarterly on each shift in Group I and Group R2, Occupancies and monthly in Group E Occupancies to familiarize personnel with signals and emergency action required under varied conditions.
- (2) A detailed written record of all fire drills shall be maintained and available for inspection.
- (3) When drills are conducted between 9:00 p.m. and 6:00 a.m., a coded announcement may be used instead of audible alarms.

The following violations were observed:

Facility cannot provide documentation for the completion of twelve planned and unannounced fire drills in the previous 12 months.

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Code Requirement

Statement of Violation

Next inspection scheduled on or after: 05/24/2023

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

Print Name and Title

Deputy State Fire Marshal Brandon G. Brown
16778 146 ST SE
Monroe WA 98272
(360) 791-7037

Signature

Jeff Jackson / Executive Director

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Business Name	Highgate Senior Living - Bellingham	Provider Number	2097
Address	155 E KELLOGG RD ,	Approval Status	Disapproved
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On 12/19/2022 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
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1 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)	The following violation was observed: There was an electrical outlet without a faceplate in the maintenance office, exposing the inner electrical fixture.
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2 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)	The following violations were observed: Facility is unable to provide documentation for the semi-annual hood cleaning.
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3 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)	The following violations were observed: Facility is unable to provide documentation that the annual fire wall inspection has been completed.
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Code Requirement	Statement of Violation
4 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)	The following violations were observed: 1. The fire rated door to the Nurses office is missing parts and has been modified. 2. The fire rated door to the Activities Directors office was blocked open by a wedge, preventing it from closing and latching. 3. The fire rated door to the 2nd floor laundry was blocked open by a wedge, preventing it from closing and latching and has 2 hoes in the door. 4/ Facility is unable to provide documentation that the annual fire door inspection has been completed. NFPA 80 (2016) 5.2.3.5.2 As a minimum, the following items shall be verified: (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 noncombustible 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 leaf closes before the active leaf. (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 modifications to the door assembly have been performed that void the label. (12) Meeting edge protection, gasketing and edge seals, where required, are inspected to verify their presence and

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Facility Type Residential Care

On 12/19/2022 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
	integrity. (13) Signage affixed to a door meets the requirements listed in 4.1.4.

5 Door Operation

Swinging fire doors shall close from the full-open position and latch automatically.
(IFC 705.2.4 2018)

The following violations were observed:

1. Resident room #204 fire door would not close and latch from the fully open position.
2. Resident room #205 fire door would not close and latch from the fully open position.
3. Resident room #217 fire door would not close and latch from the fully open position.
4. The fire rated door to the 1st floor elevator would not close and latch from the fully open position.
5. The delayed exit door in the dinning room did not open in 15 seconds.

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)

The following violations were observed:

Facility is unable to provide documentation for the 4 year fire and smoke damper inspection.

This document was prepared by Residential Care Services for the Locator website.



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

Business Name	Highgate Senior Living - Bellingham	Provider Number	2097
Address	155 E KELLOGG RD ,	Approval Status	Disapproved
City, State, Zip	Bellingham, WA 98226	Facility Type	Residential Care

On 12/19/2022 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
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7 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2009, 2012, 2015, 2018)	The following violations were observed: 1. Facility is unable to provide documentation for the annual sprinkler system inspection. 2. Facility is unable to provide documentation for the 5 year internal piping inspection. 3. Facility is unable to provide documentation for the quarterly sprinkler system inspections.
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8 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)	The following violations were observed: Facility is unable to provide documentation for the semi-annual kitchen suppression system servicing.
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9 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)

The following violations were observed:

1. The required maintenance for the fire extinguisher in the staff lounge has not been completed in accordance with NFPA 10
2. Facility was unable to provide the required documentation for monthly fire extinguisher maintenance in accordance with NFPA 10.

10 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)

The following violations were observed:

1. Facility is unable to provide documentation for the annual fire alarm system testing.
2. Smoke alarm in room #105 is missing.



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11 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)

The following violations were observed:

Facility is unable to provide documentation for the required smoke detector sensitivity testing.

12 Inspection and Maintenance

Fire department connections shall be periodically inspected, tested and maintained in accordance with NFPA 25. Records of inspection, testing and maintenance shall be maintained.

(IFC 912.7 2018)

The following violations were observed:

Facility was unable to provide documentation that the Fire Department Connection has been hydrostatically tested in accordance with NFPA 25.

NFPA 25 (2017) - 13.8.5 The piping from the fire department connection to the fire department check valve shall be hydrostatically tested at 150 psi (10 bar) for 2 hours at least once every 5 years.

13 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)

The following violations were observed:

Facility is unable to provide documentation for the monthly carbon monoxide detector testing.

NFPA 720 8.7.1 Single - and multiple-station carbon monoxide alarms and all connected appliances shall be inspected and tested in accordance with the manufacturer's published instructions at least monthly.

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14 Emergency Power for Illumination - General

In the event of power supply failure in rooms and spaces that require two or more means of egress an emergency electrical system shall automatically illuminate all of the following areas: 1. Aisles 2. Corridors 3. Exit access stairways and ramps (IFC 1008.3.1 2015, 2018)	The following violations were observed: 1. The emergency egress light in the 2nd floor activities room would not illuminate when the test button was pressed. 2. The emergency egress light in memory care laundry room would not illuminate when the test button was pressed.
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15 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)	The following violations were observed: Facility is unable to provide documentation for the monthly 30 second activation test for the emergency lights.
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16 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)	The following violations were observed: Facility is unable to provide documentation for the annual 90 minute power test for the emergency lights.
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17 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)	The following violations were observed: Facility is unable to provide documentation for the annual servicing of the emergency generator.
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18 Fire Drills

In all Group I, Group E, and Group R2 Occupancies licensed by the state and inspected by the state fire marshal's office, at least twelve planned and unannounced fire drills shall be held every year.

(1) Drills shall be conducted quarterly on each shift in Group I and Group R2, Occupancies and monthly in Group E Occupancies to familiarize personnel with signals and emergency action required under varied conditions.

(2) A detailed written record of all fire drills shall be maintained and available for inspection.

(3) When drills are conducted between 9:00 p.m. and 6:00 a.m., a coded announcement may be used instead of audible alarms.

The following violations were observed:

Facility cannot provide documentation for the completion of twelve planned and unannounced fire drills in the previous 12 months.

Next inspection scheduled on or after: 01/18/2023

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

Jeff Jackson / Executive Director
Print Name and Title

Deputy State Fire Marshal Brandon G. Brown
16778 146 ST SE
Monroe WA 98272
(360) 791-7037

Signature