



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

Business Name	Beehive Retirement and Assisted Living Community	Provider Number	2148
Address	401 MAPLE , #BRC	Approval Status	Approved
City, State, Zip	McCleary, WA 98557	Facility Type	Residential Care

On 12/18/2023 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

Not Available

Signature

Print Name and Title

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

Rm
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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Phone: (360) 596-3900

Business Name	Beehive Retirement and Assisted Living Community	Provider Number	2148
Address	401 MAPLE , #BRC	Approval Status	Disapproved
City, State, Zip	McCleary, WA 98557	Facility Type	Residential Care

On 09/28/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Administration

Requested extension on 8/16/2023.

On 09/28/2023 an unannounced Fire and Life Safety Code inspection was conducted at Beehive Retirement and Assisted Living Community by a representative of the Washington State Patrol, State Fire Marshal's Office to determine compliance with all applicable codes.

The following deficiencies were cited as a result of this inspection:

2 Waste Accumulation Prohibited

Combustible waste material creating a fire hazard shall not be allowed to accumulate in buildings or structures or upon premises.

(IFC 304.1 2015, 2018)

Corrected.

3 Multiplug Adapters

Multiplug adapters, such as cube adapters, unfused plug strips or any other device not complying with NFPA 70 shall be prohibited.

(IFC 604.4 2018)

Corrected.

4 Extension Cords

Extension cords and flexible cords shall not be a substitute for permanent wiring and shall be listed and labeled in accordance with UL 817. Extension cords and flexible cords shall not be affixed to structures, extended through walls, ceilings or floors, or under doors or floor coverings, nor shall such cords be subject to environmental damage or physical impact. Extension cords shall be used only with portable appliances. Extension cords marked for indoor use shall not be used outdoors.

(IFC 604.5 2018)

Corrected.

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



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Code Requirement

Statement of Violation

5 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.

6 Records

Records for inspections shall state the individual and company performing the inspection, a description of the inspection and when the inspection took place. Records for cleanings shall state the individual and company performing the cleaning and when the cleaning took place. Such records shall be completed after each inspection or cleaning and maintained.

(IFC 607.3.3.3 2018)

The following violation was observed at the time of re-inspection:

Facility stated inspection was done just waiting on report.

7 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)

Corrected.



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Code Requirement

Statement of Violation

8 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 2021)

Corrected.

9 Door Operation

Swinging fire doors shall close from the full-open position and latch automatically.

(IFC 705.2.4 2018)

Corrected.

10 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)

Corrected.

11 Testing and Maintenance

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

(IFC 903.5 2009, 2012, 2015, 2018)

The following violation was observed at the time of re-inspection:

The facilities sprinkler report is currently yellow tagged due to: QR sprinkler head sample testing needing to be done.

All inspection reports must verify that the system has no deficiencies, or document that all deficiencies have been corrected.



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Code Requirement

Statement of Violation

12 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)

The following violation was observed at the time of re-inspection:

Facility provided documentation for certification from Performance inspection; however they hired a different company to come in to inspect / repair and it is unknown if the company has the appropriate certifications.

13 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 violation was observed at the time of re-inspection:

The kitchen suppression was currently yellow tagged by Performance. The facility had a different company come out and inspect / repair and this company passed the inspection.

Upon talking to facility staff the suppression system is still not tied into the fire alarm system. It is also unknown if the contractor who came in is certified.

The facility will need to either provide proof of certification or have the kitchen suppression reinspected / repaired.

All inspection reports must verify that the system has no deficiencies, or document that all deficiencies have been corrected.

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Code Requirement

Statement of Violation

14 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.

15 Extinguishers Weighing 40 Pounds or Less

Portable fire extinguishers having a gross weight not exceeding 40 pounds (18 kg) shall be installed so that their tops are not more than 5 feet (1524 mm) above the floor.

(IFC 906.9.1 2015, 2018)

Corrected.



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Code Requirement

Statement of Violation

16 Unobstructed and Unobscured

Manual fire alarm boxes shall be provided with ready access, unobstructed, unobscured and visible at all times.

(IFC 907.4.2.6 2018)

Corrected.

17 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 violation was observed at the time of re-inspection:

The facility was unable to provide documentation for their smoke sensitivity report. Facility staff stated their were failures on the inspection.

All inspection reports must verify that the system has no deficiencies, or document that all deficiencies have been corrected.

18 Reliability

Required exit accesses, exits and exit discharges shall be continuously maintained free from obstructions or impediments to full instant use in the case of fire or other emergency when the building area served by the means of egress is occupied. An exit or exit passageway shall not be used for any purpose that interferes with a means of egress.

(IFC 1030.2 2015, 2018)

Corrected.



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Code Requirement

Statement of Violation

19 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 seller's warehouses not accessible to the public. Nesting shall be allowed provided 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 2012, 2015)

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Code Requirement

Statement of Violation

20 Circuit identification and Accessibility

10.6.5.2 Circuit Identification and Accessibility.
10.6.5.2.1 The location of the branch circuit disconnecting means shall be permanently identified at the control unit.
10.6.5.2.2 System circuit disconnecting means shall be permanently identified as to its purpose in accordance with the following:
(1) "FIRE ALARM" for fire alarm systems
(2) "EMERGENCY COMMUNICATIONS" for emergency communications systems
(3) "FIRE ALARM/ECS" for combination fire alarm and emergency communications systems
10.6.5.2.3 For fire alarm and/or signaling systems, the circuit disconnecting means shall have a red marking.
10.6.5.2.4 The red marking shall not damage the overcurrent protective devices or obscure the manufacturer's markings.
10.6.5.2.5 The circuit disconnecting means shall be accessible only to authorized personnel.
10.6.5.3 Mechanical Protection. The branch circuit(s) and connections shall be protected against physical damage.
10.6.5.4 Circuit Breaker Lock. Where a circuit breaker is the disconnecting means, a listed breaker locking device shall be installed.
10.6.5.5 Overcurrent Protection. An overcurrent protective device of suitable current-carrying capacity that is capable of interrupting the maximum short-circuit current to which it can be subject shall be provided in each ungrounded conductor.
(NFPA 72 10.6.5.2)

Corrected.



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Code Requirement

Statement of Violation

21 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 wither 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

Corrected.



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Code Requirement

Statement of Violation

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 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

22 Signage

A precautionary sign, reliable from a distance of 5 feet, shall be conspicuously displayed on each door or gate of the storage area or enclosure.

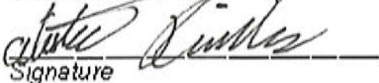
NFPA 99-8-3.1.11.3

Corrected.

Next inspection scheduled on or after: 10/28/2023

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

Alister Daniels
Print Name and Title

Deputy State Fire Marshal Cozetta Christian
2502 112TH E
Tacoma WA 984455104
(360) 584-5796


Signature



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Fire Protection Bureau
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On 07/17/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Administration

	On 07/17/2023 an unannounced Fire and Life Safety Code inspection was conducted at Beehive Retirement and Assisted Living Community by a representative of the Washington State Patrol, State Fire Marshal's Office to determine compliance with all applicable codes. The following deficiencies were cited as a result of this inspection:
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2 Waste Accumulation Prohibited

Combustible waste material creating a fire hazard shall not be allowed to accumulate in buildings or structures or upon premises. (IFC 304.1 2015, 2018)	The following violation was observed at the time of inspection: The Laundry room in the main building has excessive lint buildup behind the washer and dryer.
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3 Multiplug Adapters

Multiplug adapters, such as cube adapters, unfused plug strips or any other device not complying with NFPA 70 shall be prohibited. (IFC 604.4 2018)	The following violation was observed at the time of inspection: The following locations have unapproved multi plug adapters in use: 1. Activity room behind table 2. Activity room behind TV 3. Resident room 101 4. Maintenance Office x2 5. Nurses station in Memory Care
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4 Extension Cords

Extension cords and flexible cords shall not be a substitute for permanent wiring and shall be listed and labeled in accordance with UL 817. Extension cords and flexible cords shall not be affixed to structures, extended through walls, ceilings or floors, or under doors or floor coverings, nor shall such cords be subject to environmental damage or physical impact. Extension cords shall be used only with portable appliances. Extension cords marked for indoor use shall not be used outdoors. (IFC 604.5 2018)	The following violation was observed at the time of inspection: The following locations have extension cords in use: 1. In hall under the table by room 127 2. In hall by Admin office x2 3. Back of Kitchen, x2 one into fan and one into microwave
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On 07/17/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

5 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 at the time of inspection:

Resident room 127 is missing its cover plate on the light switch.

The Maintenance office has multiple open junction boxes and an electrical panel with no cover.

6 Records

Records for inspections shall state the individual and company performing the inspection, a description of the inspection and when the inspection took place. Records for cleanings shall state the individual and company performing the cleaning and when the cleaning took place. Such records shall be completed after each inspection or cleaning and maintained.

(IFC 607.3.3.3 2018)

The following violation was observed at the time of inspection:

The facility was unable to provide documentation for their annual and semi annual hood cleaning.

7 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)

The following violation was observed at the time of inspection:

The facility was unable to provide record of their annual fire wall inspection and/or repairs for all fire-resistant-rated construction.

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Code Requirement

Statement of Violation

8 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 2021)

The following violation was observed at the time of inspection:

The facility was unable to provide inventory record of their annual inspection and/or repairs for all fire-resistant-rated doors.

9 Door Operation

Swinging fire doors shall close from the full-open position and latch automatically.

(IFC 705.2.4 2018)

The following violation was observed at the time of inspection:

The following doors did not close / latch properly when tested:

1. Fire alarm room door
2. Cross corridor A1, A2
3. Memory Care door F

10 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)

The following violation was observed at the time of inspection:

Resident room 127 has a painted sprinkler bulb.

The Laundry room in Memory Care has dirty sprinkler heads.

11 Testing and Maintenance

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

(IFC 903.5 2009, 2012, 2015, 2018)

The following violation was observed at the time of inspection:

The facilities sprinkler report is currently yellowed tagged due to: QR sprinkler head sample testing needing to be done.

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12 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)

The following violation was observed at the time of inspection:

The facility was unable to provide documentation showing kitchen suppression system technician is certified. The report was blank on this section.

13 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 violation was observed at the time of inspection:

The facilities kitchen suppression is currently yellowed tagged due to:

Hood not being tied into the fire alarm panel and the electric stove under the hood does not shut down electrical power on system activation.

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Code Requirement

Statement of Violation

14 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 violation was observed at the time of inspection:

The maintenance for the fire extinguisher in the Maintenance office has not been completed in accordance with NFPA 10.

15 Extinguishers Weighing 40 Pounds or Less

Portable fire extinguishers having a gross weight not exceeding 40 pounds (18 kg) shall be installed so that their tops are not more than 5 feet (1524 mm) above the floor.

(IFC 906.9.1 2015, 2018)

The following violation was observed at the time of inspection:

The following fire extinguishers are mounted above the 5 foot requirement:

1. Laundry room in Main building
2. Maintenance Office



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16 Unobstructed and Unobscured

Manual fire alarm boxes shall be provided with ready access, unobstructed, unobscured and visible at all times.

(IFC 907.4.2.6 2018)

The following violation was observed at the time of inspection:

The following locations have manual pull stations that are blocked or not visible:

1. Activity room - blocked with shelf - by room 129
2. Hallway by Admin office - blocked by plant
3. By Housekeeping - Memory Care

17 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 violation was observed at the time of inspection:

The facility is unable to provide documentation for last smoke detector sensitivity test report.

18 Reliability

Required exit accesses, exits and exit discharges shall be continuously maintained free from obstructions or impediments to full instant use in the case of fire or other emergency when the building area served by the means of egress is occupied. An exit or exit passageway shall not be used for any purpose that interferes with a means of egress.

(IFC 1030.2 2015, 2018)

The following violation was observed at the time of inspection:

The following locations have obstructions to the egress paths:

1. Activity room by room 129
2. Activity room by room 134
3. Attic access area

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



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

Business Name	Beehive Retirement and Assisted Living Community	Provider Number	2148
Address	401 MAPLE , #BRC	Approval Status	Disapproved
City, State, Zip	McCleary, WA 98557	Facility Type	Residential Care

On 07/17/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

19 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 seller's warehouses not accessible to the public. Nesting shall be allowed provided 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 2012, 2015)

The following violation was observed at the time of inspection:

Resident room 101 has unsecured oxygen.

The oxygen room outside has 8 unsecured cylinders.

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Code Requirement

Statement of Violation

20 Circuit identification and Accessibility

10.6.5.2 Circuit Identification and Accessibility.
10.6.5.2.1 The location of the branch circuit disconnecting means shall be permanently identified at the control unit.
10.6.5.2.2 System circuit disconnecting means shall be permanently identified as to its purpose in accordance with the following:
(1) "FIRE ALARM" for fire alarm systems
(2) "EMERGENCY COMMUNICATIONS" for emergency communications systems
(3) "FIRE ALARM/ECS" for combination fire alarm and emergency communications systems
10.6.5.2.3 For fire alarm and/or signaling systems, the circuit disconnecting means shall have a red marking.
10.6.5.2.4 The red marking shall not damage the overcurrent protective devices or obscure the manufacturer's markings.
10.6.5.2.5 The circuit disconnecting means shall be accessible only to authorized personnel.
10.6.5.3 Mechanical Protection. The branch circuit(s) and connections shall be protected against physical damage.
10.6.5.4 Circuit Breaker Lock. Where a circuit breaker is the disconnecting means, a listed breaker locking device shall be installed.
10.6.5.5 Overcurrent Protection. An overcurrent protective device of suitable current-carrying capacity that is capable of interrupting the maximum short-circuit current to which it can be subject shall be provided in each ungrounded conductor.

(NFPA 72 10.6.5.2)

The following violation was observed at the time of inspection:

The Fire alarm circuit breaker in the fire alarm panel room is missing the required lock device--locking breaker in the "ON" position.

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Code Requirement

Statement of Violation

21 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 wither 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

The following violation was observed at the time of inspection:

The Laundry room door handle is missing its locking device leaving a hole the door hardware. - Memory Care



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Code Requirement

Statement of Violation

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 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

22 Signage

A precautionary sign, reliable from a distance of 5 feet, shall be conspicuously displayed on each door or gate of the storage area or enclosure.

NFPA 99-8-3.1.11.3

The following violation was observed at the time of inspection:

The facility failed to install signage on oxygen storage room door. Wording shall state:

CAUTION:
OXIDIZING GAS(ES) STORED WITHIN
NO SMOKING

Next inspection scheduled on or after: 08/16/2023

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

Not Available
Signature

Print Name and Title

Deputy State Fire Marshal Cozetta Christian
2502 112TH E
Tacoma WA 984455104
(360) 584-5796

Cozetta
Signature

Initials of Authorized Facility Representative: _____