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

Business Name	The Meridian at Stone Creek 1111 S 376th ST ,	***Provider Number***	2365
		Approval Status	Disapproved
City, State, Zip	Milton, WA 98354	***Facility Type***	Residential Care

On 09/25/2024 the Office of the State Fire Marshal conducted a re-inspection at your facility. Listed below are violations that have not been corrected.

Code Requirement	Statement of Violation

1 Circuit identifcation 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.	Findings during the re-inspection were: Fire alarm circuit breaker in the main electrical room--Panels --was found missing the required lock device--locking breaker in the "ON" position.

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Code Requirement	Statement of Violation
(NFPA 72 10.6.5.2) **2Owner'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 2021)	Findings during the re-inspection were: Unable to provide last annual inspection of all fire-resistant-rated construction assemblies in the building, or record of repairs.

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Code Requirement	Statement of Violation
3Inspection 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)	Findings during the re-inspection were: Unable to provide record showing that fire doors have been annually inspected, tested and repaired in the past 12 months.
4Door Operation	
Swinging fire doors shall close from the full-open position and latch automatically. (IFC 705.2.4 2021)	Findings during the re-inspection were: Both 'in' and 'out' fire-rated doors between kitchen and dining room have had the lever/latch hardware removed and replaced with keyed deadbolt lock; doors no longer latch.

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Code Requirement	Statement of Violation

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)	Findings during the re-inspection were: 1) Unable to provide documentation showing that all automatic and fusible link fire/smoke dampers in the facility have received inspection and testing in the past four years, per NFPA 80, 19.5.3. If fusible link dampers have not received inspection/testing in the past four years, service scheduling shall be required. 2) Facility shall label all damper access panels with the words “Fire Damper” in letters not less than 1 in. (25 mm) in height.

6 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2021)	Findings during the re-inspection were: Unable to provide fire sprinkler system documentation for the following: - Last annual forward flow test report - not conducted, scheduling required - Last annual standpipe confidence report - Last 3-year full flow trip test report - conducted May 2023 - Last 5-year inspection/test report(s) - conducted Feb. 2020 - Last 5-year FDC hydro test report - unknown if conducted, scheduling required

7 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)	Findings during the re-inspection were: Found kitchen hood suppression system past due for semi-annual servicing - last performed in May 2023.

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Code Requirement	Statement of Violation
8 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 2021)	Findings during the re-inspection were: 1) Unable to provide documentation showing that annual servicing of the emergency backup generator has been performed in the past 12 months. 2) Unable to provide documentation showing that diesel fuel is in compliance with manufacturer's recommendations - no fuel sample report available. 3) Unable to provide documentation showing the emergency generator has received monthly load tests for the past 12 months.

Next inspection scheduled on or after: 10/21/2024

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

Deputy State Fire Marshal Lysandra Davis
2502 112 ST
Tacoma WA 984455104
(360) 890-1622

Signature

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Fire Protection Bureau
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Code Requirement	Statement of Violation

1 Abatement of Electrical Hazards

Abatement of unsafe conditions and electrical hazards. Conditions that constitute an electrical shock or fire hazard shall be abated.. (IFC 603.2 2021)	Findings during the inspection were: Light switch in kitchen pantry is missing required cover plate.

2 Working Space and Clearance

Working space and clearances. Working space around electrical equipment shall be provided in accordancewith Section 110.26 of NFPA 70 for electrical equipment rated 1,000 volts or less, and Section 110.32 of NFPA 70 for electrical equipment rated over 1,000 volts. The minimum required working space shall be not less than 30 inches (762 mm) in width, 36 inches (914 mm) in depth and 78 inches (1981 mm) in height in front of electrical service equipment. Where the electrical service equipment is wider than 30 inches (762 mm), the minimum working space shall be not less than the width of the equipment. Storage of materials shall not be located within the designated working space. (IFC 603.4, 2021)	Findings during the inspection were: Facility failed to maintain required workspace clearance in front of electrical panels in: - Mechanical room by W214 - Mechanical room by E116

3 Extension Cords

Extension cords. Extension cords shall not be a substitute for permanent wiring and shall be listed and labeled in accordance with UL 817. Extension 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 603.6 2021)	Findings during the inspection were: 1) Extension cords found utilized as permanent wiring in the following locations: - Activity room 1, powering vending machine - Clinical support office (labeled storage room), powering devices by desk - Service hall laundry room, powering refrigerator 2) Extension cord found exended and concealed above ceiling tiles, powering the refrigerator in service hall laundry room.

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Code Requirement	Statement of Violation

4 Cleaning

Hoods, grease-removal devices, fans, ducts and other appurtenances shall be cleaned at intervals as required by Sections 606.3.3.1 through 606.3.3.3. (IFC 606.3.3 2021)	Findings during the inspection were: Unable to provide reports showing that four (4) quarterly kitchen hood cleanings have been performed in the past 12 months, as required by NFPA 96.

5 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 2021)	Findings during the inspection were: Unable to provide last annual inspection of all fire-resistant-rated construction assemblies in the building, or record of repairs.

6 Penetrations - Maintaining Protection

Materials and firestop systems used to protect membrane and through penetrations in fire-resistance-rated construction and construction installed to resist the passage of smoke shall be maintained. The materials and firestop systems shall be securely attached to or bonded to the construction being penetrated with no openings visible through or into the cavity of the construction. Where the system design number is known, the system shall be inspected to the listing criteria and manufacturer's installation instructions. (IFC 703.1 2021)	Findings during the inspection were: 1) Unsealed penetrations observed in the following locations: - Exterior access boiler room - in rated ceiling - Exterior riser room (by main entrance) - in rated wall 2) Found unapproved silicone used to protect penetration inside the mechanical room, across from W303--around the overhead pipe entering the interior storage room.

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Code Requirement	Statement of Violation

7 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)	Findings during the inspection were: Unable to provide record showing that fire doors have been annually inspected, tested and repaired in the past 12 months.

8 Door Operation

Swinging fire doors shall close from the full-open position and latch automatically. (IFC 705.2.4 2021)	Findings during the inspection were: The following fire doors failed to self-close and latch when tested: - Storage room by E316; latch hardware inoperable - Storage room by W134; disengaged/disabled self-closer - MC corridor door by W132; transition strip prevents door from closing - MC corridor door by W114; push bar locked in open position - MC corridor door by W137; latch hardware inoperable - Service hall laundry room; door propped open - Both 'in' and 'out' doors between kitchen/dining room; latch hardware replaced with deadbolt locks

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Code Requirement	Statement of Violation

9 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: 1) Unable to provide documentation showing that all automatic and fusible link fire/smoke dampers in the facility have received inspection and testing in the past four years, per NFPA 80, 19.5.3. If fusible link dampers have not received inspection/testing in the past four years, service scheduling shall be required. 2) Dampers by E316, E216, and E116 were coated in excessive dust build-up. Unable to verify that they have received inspection and testing in the past four years--no inspection labels visible. 3) Facility shall label all damper access panels with the words “Fire Damper” in letters not less than 1 in. (25 mm) in height.

10 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2021)	Findings during the inspection were: 1) Unable to provide fire sprinkler system documentation for the following: - Quarterly inspection reports - three performed in the last 12 months - Last annual confidence test report - conducted Jan. 2024 - Last annual forward flow test report - not conducted, scheduling require - Last annual standpipe confidence report - Last 3-year full flow trip test report - conducted May 2023 - Last 5-year inspection/test report(s) - conducted Feb. 2020 - Last 5-year FDC hydro test report - unknown if conducted, scheduling required 2) Cover plate behind recessed sprinkler head shall be required in mechanical room by W214 - notable gap in sheetrock observed around sprinkler head. 3) Found ordinary-rated fire sprinkler heads in the walk-in cooler and freezer - replace heads with intermediate-temperature classification or higher required.

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Code Requirement	Statement of Violation

11 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)	Findings during the inspection were: Found kitchen hood suppression system past due for semi-annual servicing - last performed in May 2023.

12 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)	Findings during the inspection were: Unable to provide documentation showing that annual servicing of the fire alarm system has been performed in the past 12 months.

13 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)	Findings during the inspection were: Unable to provide documentation showing that monthly inspection of the facility's carbon monoxide alarms has been performed in the past 12 months.

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Code Requirement	Statement of Violation

14 Graphics

Externally illuminated exit signs shall comply with Sections 1013.6.1 through 1013.6.3 Every exit sign and directional exit sign shall have plainly legible letters not less than 6 inches (152 mm) high with the principal strokes of the letters not less than 3/4 inch (19.1 mm) wide. The word “EXIT” shall have letters having a width not less than 2 inches (51 mm) wide, except the letter “I,” and the minimum spacing between letters shall not be less than 3/8 inch (9.5 mm). Signs larger than the minimum established in this section shall have letter widths, strokes and spacing in proportion to their height. The word “EXIT” shall be in high contrast with the background and shall be clearly discernible when the means of exit sign illumination is or is not energized. If a chevron directional indicator is provided as part of the exit sign, the construction shall be such that the direction of the chevron directional indicator cannot be readily changed. (IFC 1013.6.1 2021)	Findings during the inspection were: Exit sign by W209 has internal part blocking light bulb; preventing full illumination of exit sign lettering on front and back.

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 1032.10.1 2021)	Findings during the inspection were: Unable to provide documentation showing that 30-second monthly battery testing of the facility's emergency lighting and exit signs has been performed in the last 12 months.

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Code Requirement	Statement of Violation
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 2021)	Findings during the inspection were: 1) Unable to provide documentation showing that 90-minute annual battery testing of the emergency lighting and exit signs has been performed in the past 12 months. 2) Facility will need to conduct a 90-minute annual test of all emergency lighting and exit signs in the building to be in compliance by the re-inspection date.
17 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 1032.2 2021)	Findings during the inspection were: Exterior lever handle on west dining room exit doors is installed backwards--obstructing the interior right leaf from opening when the left leaf is latched. Facility has cinched a strap around the left leaf's interior push bar, which allows the right leaf to open, as it pushes the left leaf's lever handle out of the way.
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 2021)	Findings during the inspection were: 1) Unable to provide documentation showing that annual servicing of the emergency backup generator has been performed in the past 12 months. 2) Unable to provide documentation showing that diesel fuel is in compliance with manufacturer's recommendations - no fuel sample report available. 3) Unable to provide documentation showing the emergency generator has received monthly load tests for the past 12 months.

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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 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)	Findings during the inspection were: Two unracked oxygen cylinder found in resident room W334--one on floor and one on table.

20 Inspection Frequency

Fire extinguishers shall be inspected when initially placed in service and thereafter at approximately 30-day intervals. Fire extinguishers shall be inspected, manually or by electronic monitoring, at more frequent intervals when circumstances require. (NFPA Standard 10 Section 6.2.1)	Findings during the inspection were: Portable fire extinguishers throughout the facility did not have the required 30-day inspections documented for April, May, or June of 2024.

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On 07/22/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

21 Circuit identifcation and Accessibility

Code Requirement	Statement of Violation
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)	Findings during the inspection were: Fire alarm circuit breaker in the main electrical room--Panels --was found missing the required lock device--locking breaker in the "ON" position.

Initials of Authorized Facility Representative:_____

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Code Requirement	Statement of Violation
22 NFPA 80 Fire Door Inspection and Testing	
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 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 9. Latching hardware operates and secures the door when it is in the closed positon 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 NFPA 80, 5.2.3.5.2 (2019)	Findings during the inspection were: 1) Found painted fire door frame labels throughout the facility. 2) The following fire doors and frames had open holes due to hardware changes: - Mechanical room door by W214; hole above door handle - Corridor doors by W108; holes in door face, and in frame by door closer - Door between memory care and service hall; hole above door handle - Sevice hall door to kitchen; hole above door handle - Both kitchen doors to dining room; holes above deadbolt locks

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Code Requirement — Statement of Violation

Next inspection scheduled on or after: 08/26/2024

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 Lysandra Davis
2502 112 ST
Tacoma WA 984455104
(360) 890-1622

_____
Signature

Initials of Authorized Facility Representative:_____