



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

Business Name	Ciel Senior Living of the Tri-Cities Memory Care	Provider Number	2448
Address	575 N YOUNG ST ,	Approval Status	Pending APPROVED
City, State, Zip	Kennewick, WA 993366706	Facility Type	Residential Care

On 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

MEURAE SMITH, AED
Print Name and Title

Deputy State Fire Marshal Barbara Maier
PO BOX 42642
Olympia WA 98504
(360) 596-3925

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	Fieldstone Memory Care - Kennewick	Provider Number	2448
Address	575 N YOUNG ST ,	Approval Status	Disapproved
City, State, Zip	Kennewick, WA 993366706	Facility Type	Residential Care

On 07/30/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
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1 Equipment Rooms

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

(IFC 315.2.3 2021)

The following violation was observed:

Mechanical & Electrical Rooms - combustible materials were stored in rooms.

2 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)

The following violation was observed:

Executive Director's Office - appliance was plugged into a multiplug adapter. Corrected during inspection.

3 Relocatable power taps and current taps

Relocatable power taps and current taps. The construction and use of current taps and relocatable power taps shall be in accordance with NFPA 70 and this code.

(IFC 603.5, 2021)

The following violation was observed:

West wing nurse's station - an unfused cube multiplug adapter was in use. Corrected during inspection.

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)

NOTE TO FACILITY:

Kitchen hood inspection and cleaning report dated July 28, 2024 indicated heavy grease build up in the fans, ducts, hood and filters. Facility is required to increase hood inspection and cleaning from semi annual to quarterly.

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Address 575 N YOUNG ST ,
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Provider Number 2448
Approval Status Disapproved
Facility Type Residential Care

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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)

The following violation was observed:

Facility was unable to provide documentation of annual rated wall inspections within the past twelve months.

6 Hold-Open Devices and Closers

Hold-open devices and automatic door closers, where provided, shall be maintained. During the period that such device is out of service for repairs, the door it operates shall remain in the closed position.

(IFC 705.2.3 2021)

The following violation was observed:

Kitchen exit to the vestibule - door was held open by a door stop inhibiting the ability of the door closer.

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 violation was observed:

Facility was unable to provide documentation of smoke/fire damper inspections within the past four years.

Facility is reminded that documentation of testing shall include for each damper:

Person performing testing
Date of testing
Location
Pass/Fail
Deficiency description
When and how the deficiency was corrected
Confirmation of retesting deficient dampers

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8 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2021)	The following violations were observed: Excessive particulate and/or grease was observed on fire sprinkler heads in the following locations: Kitchen - by cooking appliances West Wing Laundry
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9 Unobstructed and Unobscured

Portable fire extinguishers shall not be obstructed or obscured from view. In rooms or areas in which visual obstruction cannot be completely avoided, means shall be provided to indicate the locations of extinguishers. (IFC 906.6 2021)	The following violation was observed: East wing serving kitchenette - access to the fire extinguisher was obstructed. Corrected during inspection.
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10 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 2021)	The following violation was observed: Main Entrance - access to fire alarm system manual pull station was obstructed by a cart. Corrected during inspection.
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11 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 2021)	The following violation was observed: Facility was unable to provide documentation of hydrostatic testing of the fire department connection within the past five years.
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12 Maintenance

Carbon monoxide alarms and carbon monoxide detection systems shall be maintained in accordance with NFPA 72. Carbon monoxide alarms and carbon monoxide detectors that become inoperable or begin producing end-of-life signals shall be replaced. (IFC 915.6 2021 WAC)	The following violation was observed: Facility was unable to provide documentation of monthly carbon monoxide alarm testing for the past twelve months.
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13 Controlled Egress Doors in Groups I-1 and I-2

Electric locking systems, including electromechanical locking systems and electromagnetic locking systems, shall be permitted to be locked in the means of egress in Group I-1 or I-2 occupancies where the clinical needs of persons receiving care require their containment. Controlled egress doors shall be permitted in such occupancies where the building is equipped throughout with an automatic sprinkler system in accordance with Section 903.3.1.1 or an approved automatic smoke or heat detection system installed in accordance with Section 907, provided that the doors are installed and operate in accordance with all of the following:

1. The doors shall unlock on actuation of the automatic sprinkler system or automatic smoke detection system.
2. The door locks shall unlock on loss of power controlling the lock or lock mechanism.
3. The door locking system shall be installed to have the capability of being unlocked by a switch located at the fire command center, a nursing station or other approved location. The switch shall directly break power to the lock.
4. A building occupant shall not be required to pass through more than one door equipped with a controlled egress locking system before entering an exit.
5. The procedures for unlocking the doors shall be described and approved as part of the emergency planning and preparedness required by Chapter 4 of the International Fire Code.
6. There is a system, such as a keypad and code, in place that allows visitors, staff persons and appropriate residents to exit. Instructions for exiting shall be posted within six feet of the door.
7. All clinical staff shall have the keys, codes or other means necessary to operate the locking systems.
8. Emergency lighting shall be provided at the door.
9. The door locking system units shall be listed in accordance with UL 294.

EXCEPTIONS: 1. Items 1 through 4 and 6 shall not apply to doors to areas where persons, which because of clinical needs, require restraint or containment as part of the function of a psychiatric treatment area.

The following violation was observed:

Emergency egress in the following locations lacked signage during the inspection:
East Wing emergency exits with the exception of the exit to the administration/front common area
West Wing emergency exits

Interviews with staff indicated that they are in the process of adding instructions reflecting the egress code to the keypad to enable visitors and staff members to exit. Instructions shall be posted within six feet of the door and at a level for all individuals if standing, wheelchair restricted or other forms of mobility can easily read.

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

14 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)	The following violation was observed: Facility was unable to provide documentation of annual 90 minute power test of the emergency exit signs and lighting in for common areas of the building within the past twelve months.
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15 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)	The following violation was observed: Pepsi Cafe - unsecured compressed gas cylinders under counter.
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Next inspection scheduled on or after: 08/29/2024

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

WENDY SMITH, AED

Print Name and Title

Deputy State Fire Marshal Barbara Maier
PO BOX 42642
Olympia WA 98504
(360) 596-3925



Signature

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