



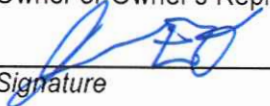
Washington State Patrol
Fire Protection Bureau
Phone: (360) 596-3900

Business Name	Ciel Senior Living	Provider Number	2471
Address	23845 ISSAQUAH FALL CITY RD ,	Approval Status	Approved
City, State, Zip	Issaquah, WA 98029	Facility Type	Residential Care

On 10/03/2024 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

Jordan Drew Executive Director
Print Name and Title

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


Signature

Right of appeal. Any person may appeal any decision made by the Fire Protection Bureau in accordance with WAC 212-12.



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Business Name	Columbia Landing of Issaquah	Provider Number	2471
Address	23845 ISSAQUAH FALL CITY RD ,	Approval Status	Disapproved
City, State, Zip	Issaquah, WA 98029	Facility Type	Residential Care

On 08/01/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Administration

	On 08/01/2024 an unannounced Fire and Life Safety Code inspection was conducted at Ciel Senior Living, formally known as Columbia Landing of Issaquah 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 Initiation

Where a fire alarm system is provided, emergency evacuation drills shall be initiated by activating the fire alarm system. (IFC 405.8, 2021)	The following violation was observed at the time of inspection: The facility failed to include transmission of fire alarm signals throughout the facility when conducting their fire drills. The facility conducted table tops only, and stated the fire alarm company sounds the alarm quarterly. Note: Use of a coded announcement instead of an audible alarm is only permitted for drills conducted between 9:00 p.m. and 6:00 a.m.
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3 Open electrical terminations

Open junction boxes and open-wiring splices shall be prohibited. Approved covers shall be provided for all switch and electrical outlet boxes. (IFC 603.2.2, 2021)	The following violation was observed at the time of inspection: The Sprinkler Riser room outside has a receptacle cover missing.
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This document was prepared by Residential Care Services for the Locator website.



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Code Requirement

Statement of Violation

4 Application and Use

603.5.2 Application and use. Relocatable power taps and current taps shall be directly connected to a permanently installed receptacle.

Exceptions:

1. Where approved for use in a Group A occupancy or in a meeting room in a Group B occupancy, not more than five relocatable power taps shall be permitted to be connected together or connected to an extension cord for temporary use to supply power to electronic equipment.

2. Current taps and relocatable power taps shall not be required to connect directly to a permanently installed receptacle outlet where used for 90 days or less for the purpose of testing the performance of such devices.

(IFC 603.5.2, 2021)

The following violation was observed at the time of inspection:

The Cafeteria area has 3 power strips connected together - plugged into a refrigerant.

5 Power Supply

Portable, electric space heaters shall be plugged directly into an approved receptacle.

(IFC 603.9.2, 2021)

The following violation was observed at the time of inspection:

The Activity Director's office has a portable space heater plugged into a power strip.

6 Operations, Inspection and Maintenance

Commercial cooking systems shall be operated, inspected, and maintained in accordance with Sections 606.3.1 through 606.3.4 and Chapter 12 of NFPA 96.

(IFC 606.3 2021 WAC 51-54A)

The following violation was observed at the time of inspection:

The facility's kitchen hood cleaning shows that the hinge kit needs repaired / replaced.

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



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Facility Type Residential Care

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Code Requirement

Statement of Violation

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 2021)

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.

8 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)

The following violation was observed at the time of inspection:

The West side Electrical room has penetrations in the ceiling. - by room 37

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)

The following violation was observed at the time of inspection:

The facility was unable to provide documentation for their last fire/smoke damper testing.

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

10 Testing and Maintenance

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

(IFC 903.5 2021)

The following violation was observed at the time of inspection:

The facility was unable to provide documentation for:

1. Current annual sprinkler inspection
2. 3rd and 4th quarter sprinkler reports

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

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 2021)

The following violation was observed at the time of inspection:

The facility was unable to provide current documentation of their annual inspection for their fire alarm system.

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

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 at the time of inspection:

The facility was unable to provide documentation showing that monthly testing of their CO detectors have been performed in the past 12 months.

13 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 at the time of inspection:

The facility was unable to provide documentation showing that 90-minute annual testing of the emergency lighting has been performed in the last 12 months.

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 NFPA 80 Fire Door Inspection and Testing

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

5.2.4 Periodic Inspection and Testing.

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

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

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

And the following shall be checked:

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

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.

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

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

1. Serenity room - West side
2. Electrical room - in break room; East side



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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 intetie
13. Signage affixed to a door meets the requirements listed in 4.1.4

Next inspection scheduled on or after: 08/31/2024

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 Cozetta Christian
2502 112TH E
Tacoma WA 984455104
(360) 584-5796


Signature