



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

Business Name	The Gardens at Marysville, Independent Living & AL	Provider Number	2476
Address	9802 48th ,	Approval Status	Disapproved
City, State, Zip	Marysville, WA 98270	Facility Type	Residential Care

On 09/26/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
1 Ceiling Clearance	
Storage shall be maintained 2 feet (610 mm) or more below the ceiling in nonsprinklered areas of buildings or not less than 18 inches (457 mm) below sprinkler head deflectors in sprinklered areas of buildings. Exceptions: 1. The 2-foot (610 mm) ceiling clearance is not required for storage along walls in nonsprinklered areas of buildings. 2. The 18-inch (457 mm) ceiling clearance is not required for storage along walls in areas of buildings equipped with an automatic sprinkler system in accordance with Section 903.3.1.1, 903.3.1.2 or 903.3.1.3. (IFC 315.3.1 2018)	Corrected
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)	Corrected



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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 during the re-inspection: 15 resident room fire doors throughout the facility was blocked open by a various items, preventing it from closing and latching.
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 #313 fire door would not close and latch from the fully open position. 2. The fire rated door from the 1st floor laundry room to the corridor near memory care would not close and latch from a fully open position.
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)	Corrected



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Code Requirement	Statement of Violation
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. The sprinkler head near room #321 is sagging to low in the ceiling. 2. The sprinkler head near room #313 is sagging to low in the ceiling
8 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 2015, 2018)	Corrected
9 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
10 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

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



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Code Requirement	Statement of Violation
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11 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:

The emergency egress light near room 321 would not illuminate when the test button was pressed.

12 Internally Illuminated Exit Signs

Electrically powered, self-luminous and photoluminescent exit signs shall be listed and labeled in accordance with UL 924 and shall be installed in accordance with the manufacturer's instructions and Section 1203. Exit signs shall be illuminated at all times.

(IFC 1013.5 2018)

Corrected

Next inspection scheduled on or after: 10/26/2023

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

Scott Martin
Signature

Scott Martin Maint. Dir.
Print Name and Title

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

[Signature]
Signature



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

September 26, 2023

Scott Martin
Maintenance Director
The Gardens at Marysville, Independent Living & AL
9802 48th
Marysville WA 98270

The Office of the State Fire Marshal conducted an annual fire and life safety inspection of The Gardens at Marysville, Independent Living & AL.

Initial Inspection

- During the inspection, we identified a number of violations.
- We provided a copy of the inspection report to the facility.
- The inspection report outlined each violation and items to correct prior to a reinspection, scheduled on or after September 15, 2023.

Required Reinspection

- Today we conducted a reinspection of The Gardens at Marysville, Independent Living & AL.
- During the reinspection, one or more of the violations identified during the initial inspection remained uncorrected.

These two inspections found this facility failed to gain and maintain compliance as required by state law. These violations place the residents, staff, and visitors at risk.

Required Follow-Up

- The facility administrator shall submit a letter to Deputy State Fire Marshal Brandon G. Brown, 16778, 146, ST, Monroe, WA 98272 within 30 days. The letter shall explain, in detail, how the code violations were corrected and indicate the facility is ready for a final reinspection.
- Upon receipt of the letter, the Deputy State Fire Marshal will conduct a final reinspection.
- If the letter is not received by the time specified, we shall notify the Department of Social and Health Services (DSHS) Residential Care Services Division of the failure to correct violations. We will recommend enforcement action against the facility. Enforcement actions available to DSHS under RCW 18.20.190 include civil fines, stop placements, and license suspension or revocation.
- If the option chosen by DSHS is a license revocation, a new fire and life safety inspection will be required prior to recommending relicensure.

If you have any questions regarding this process, please contact Deputy State Fire Marshal Brandon G. Brown at (360) 791-7037.

Letter Received By:

Letter Issued By:

Deputy State Fire Marshal
Brandon G. Brown

cc: Residential Care Services
Enclosures



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On 08/16/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
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1 Ceiling Clearance

Storage shall be maintained 2 feet (610 mm) or more below the ceiling in nonsprinklered areas of buildings or not less than 18 inches (457 mm) below sprinkler head deflectors in sprinklered areas of buildings.

Exceptions:

1. The 2-foot (610 mm) ceiling clearance is not required for storage along walls in nonsprinklered areas of buildings.
2. The 18-inch (457 mm) ceiling clearance is not required for storage along walls in areas of buildings equipped with an automatic sprinkler system in accordance with Section 903.3.1.1, 903.3.1.2 or 903.3.1.3.

(IFC 315.3.1 2018)

The following violations were observed:

There is combustible material being stored within 18in of the ceiling in the storage near room #307.

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)

The following violations were observed:

There was an electrical outlet without a faceplate in break room, exposing the inner electrical fixture.

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.

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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 #313 fire door would not close and latch from the fully open position.
2. The fire rated door from the dining room to the corridor near the kitchen would not close and latch from a fully open position.
3. The fire rated door from the 1st floor laundry room to the corridor near memory care would not close and latch from a fully open position.

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)

The following violations were observed:

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

6 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. The sprinkler head near room #321 is sagging to low in the ceiling.
2. The sprinkler head near room #313 is sagging to low in the ceiling.



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Code Requirement	Statement of Violation
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7 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 2015, 2018)

The following violations were observed:

Portable fire extinguisher in Kitchen was obstructed by brooms, mops, and aprons.

8 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:

The smoke detector head located in the follow areas has been installed within 36 inches of an air supply diffuser or return air opening. This is preventing proper operation of the smoke detector.

1. Beauty shop
2. 3 floor nurses office
3. Activities room

9 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.



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Code Requirement

Statement of Violation

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)

The following violations were observed:

1. The emergency egress light near room 321 would not illuminate when the test button was pressed.
2. Two emergency egress lights near copy room would not illuminate when the test button was pressed.
3. The emergency egress light near fireplace room would not illuminate when the test button was pressed.

11 Internally Illuminated Exit Signs

Electrically powered, self-luminous and photoluminescent exit signs shall be listed and labeled in accordance with UL 924 and shall be installed in accordance with the manufacturer's instructions and Section 1203. Exit signs shall be illuminated at all times.

(IFC 1013.5 2018)

The following violations were observed:

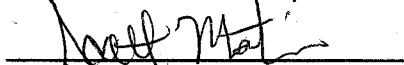
The installed Emergency Exit Sign does not have a secondary power source to ensure continued illumination in case of primary power loss in the following locations.

1. near room #205
2. in 1st floor stairwell B
3. in kitchen

Next inspection scheduled on or after: 09/15/2023

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

Scott Martin Maint. Dir.
Print Name and Title

Deputy State Fire Marshal Brandon G. Brown
16778 146 ST SE
Monroe WA 98272
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Signature