



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

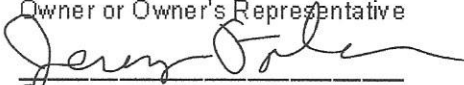
Business Name Merrill Gardens at Auburn
Address 18 1 ST SE,
City, State, Zip Auburn, WA 98001

Provider Number 2506
Approval Status Approved
Facility Type Residential Care

On 09/05/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

All violations noted during previous related inspection(s) have been corrected.

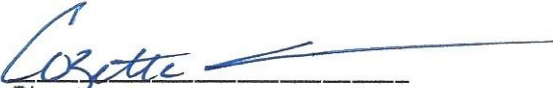
Owner or Owner's Representative


Signature

Jeremy Fowler

Print Name and Title

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


Signature

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

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	Merrill Gardens at Auburn	Provider Number	2506
Address	18 1 ST SE,	Approval Status	Disapproved
City, State, Zip	Auburn, WA 98001	Facility Type	Residential Care

On 05/13/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Administration

On 5/13/2024 an unannounced Fire and Life Safety Code inspection was conducted at Merrill Gardens at Auburn 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 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 has not sounded their fire alarm during fire drills. Staff stated they were told they only had to initiate the alarm once a year.

*Fire drills shall be initiated by the activation of the fire alarm system. When drills are conducted between 9 p.m. and 6 a.m. a coded announcement may be used instead of audible alarms.

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 at the time of inspection:

The following locations have unapproved multi plug adapters in use:

1. Resident room 413
2. Resident room 335
3. Select Rehabilitation office - 1st floor



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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:

Resident room 307 has a power strip daisy chained into another power strip.

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 at the time of inspection:

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

Facility will need to provide a fire wall map to show where fire walls are or list out each fire wall on the fire wall form.

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Code Requirement

Statement of Violation

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)

The following violation was observed at the time of inspection:

The facility has a penetration in the wall outside of resident room 413.

The Electrical room / Storage by 331 has penetrations in the wall.

The Electrical room / Storage by 331; the conduits have paper shoved on the outside.

The dining room has a penetration in the ceiling tile where they cut around the sprinkler head.

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)

The following violation was observed at the time of inspection:

The facility was unable to provide documentation for all of their fire doors. Currently only the cross corridors and exit doors are being recorded.

It is unclear when the last time the fusible link drop down window / door was last inspected.

The SW storage room in the garage has penetrations in the fire door.

8 Door Operation

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

(IFC 705.2.4 2021)

The following violation was observed at the time of inspection:

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

1. Electrical room by 410
2. Stairwell 4NW27 by room 406
3. Dry storage in kitchen - Will need to be kept close or add a magnet to keep it open.
4. Team member lounge - 1st floor
5. SW Storage room outside in garage



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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 facilities fore damper report shows 9 dampers have failed.

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

10 Decorative Materials & Artificial Decorative Vegetation-General

The following requirements shall apply to all occupancies:

1. Furnishings or decorative materials of an explosive or highly flammable character shall not be used.
2. Fire-retardant coatings in existing buildings shall be maintained so as to retain the effectiveness of the treatment under service conditions encountered in actual use.
3. Furnishings or other objects shall not be placed to obstruct exits, access thereto, egress therefrom or visibility thereof.
4. The permissible amount of noncombustible decorative materials shall not be limited.

(IFC 807.1 2021)

The following violation was observed at the time of inspection:

The memory care exit door is lined all the way down with decorative plastic.

11 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 annual sprinkler report shows multiple deficiencies.

The 3 year full flow trip test is over due.

The facility missed their 4th quarter sprinkler inspection.

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

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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 2021)

The following violation was observed at the time of inspection:

The exit sign out on the patio (memory care side) has an exit sign that is full of water and does not work.

13 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 1031.2 2021)

The following violation was observed at the time of inspection:

The dining room has a table and chairs blocking the exit door.

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 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.

15 Installation

Emergency power systems and standby power systems shall be installed in accordance with the International Building Code, NFPA 70, NFPA 110 and NFPA 111.

(IFC 1203.1.3 2021)

The following violation was observed at the time of inspection:

The facilities generator does not have an emergency stop switch located outside of the generator.

The facility does not have an annunciation panel for their new generator.

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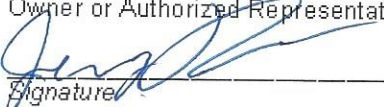
Code Requirement

Statement of Violation

Next inspection scheduled on or after: 06/12/2024

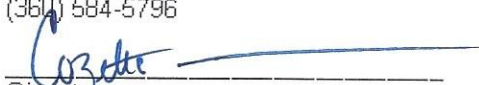
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Owner or Authorized Representative


Signature

Jeremy Fowler Maint Dir.
Print Name and Title

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


Signature

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