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

Business Name		***Provider Number***	001251
	242 SAINT HELENS ,	***Approval Status***	Disapproved
City, State, Zip	Tacoma, WA 98402	***Facility Type***	Residential Care

On 03/06/2024 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 Testing and Maintenance

Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2009, 2012, 2015, 2018)	Findings during the re-inspection were: 1) Facility was 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 for 2023 - Last 3-year full flow trip test report for dry fire sprinkler system - Last 5-year inspection/test report(s) - Last annual forward flow test report for backflow control valve 2) Unable to produce documentation showing that quarterly fire sprinkler system inspections have been conducted in the past 12 months. If not conducted, inspection shall be required before next re-inspection. 3) Loaded sprinkler head found in dish washing room, near air supply vent. 4) Found ordinary-rated fire sprinkler head in the walk-in cooler - replace with high temp head required.

2 Fusible Link Maintenance

Fixed temperature-sensing elements shall be maintained to ensure proper operation of the system. (IFC 904.5.2 2009, 2012, 2015, 2018)	Findings during the re-inspection were: Unable to produce heat survey report showing correct fusible link rating for hood suppression system--conducted by hood suppression system contractor.

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Code Requirement	Statement of Violation
3Commercial Cooking Systems	
The automatic fire-extinguishing system for commercial cooking systems shall be of a type recognized for protection of commercial cooking equipment and exhaust systems of the type and arrangement protected. Preengineered automatic dry- and wet-chemical extinguishing systems shall be tested in accordance with UL 300 and listed and labeled for the intended application. Other types of automatic fire-extinguishing systems shall be listed and labeled for specific use as protection for commercial cooking operations. The system shall be installed in accordance with this code, its listing and the manufacturer's installation instructions. Signage shall be provided on the exhaust hood or system cabinet, indicating the type and arrangement of cooking appliances protected by the automatic fire extinguishing system. Signage shall indicate appliances from left to right, be durable and the size, color, and lettering shall be approved. Automatic fire-extinguishing systems of the following types shall be installed in accordance with the referenced standard indicated, as follows: 1. Carbon dioxide extinguishing systems, NFPA 12. 2. Automatic sprinkler systems, NFPA 13. 3. Foam-water sprinkler system or foam-water spray systems, NFPA 16. 4. Dry-chemical extinguishing systems, NFPA 17.	Findings during the re-inspection were: 1) Unable to produce documentation showing that DOH Construction Review Services has reviewed and approved the new kitchen hood suppression system and commercial cooking appliance changes. 2) No signage provided on the exhaust hood or system cabinet, indicating the type and arrangement of cooking appliances protected by the hood suppression system. Signage shall indicate appliances from left to right, be durable and the size, color, and lettering shall be approved.

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Code Requirement	Statement of Violation
5. Wet-chemical extinguishing systems, NFPA 17A. Exception: Factory-built commercial cooking recirculating systems that are tested in accordance with UL 710B and listed, labeled and installed in accordance with Section 304.1 of the International Mechanical Code. (IFC 904.12 2015, 2018)	

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On 03/06/2024 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
4NFPA 80 Fire Door Inspection and Testing	
5.2.1 Inspection and Testing. Upon completin 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. And the following hall be checked: 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	Findings during the re-inspection were: 1) Multiple fire doors throughout the facility found having: - painted frame lables - missing hardware screws - door gaps that exceed the allowed clearances 2) Unable to produce last annual fire door inspection report.

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Code Requirement	Statement of Violation
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	

5Owner's Responsibility

The owner shall maintain an inventory of all required fire-resistance-rated construction, construction installed toresist 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 2018 WAC 51-54A)	Findings during the re-inspection were: Findings during the inspection were: 1) SFMO previously cited facility on 2/16/2023 for: "Unable to provide annual inventory records showing that all fire-resistance-rated construction has been inspected/repaired in the past 12 months." 2) On 12/28/23, the facility failed to produce documentation to correct the above items. 3) Facility shall produce an inventory of all fire-resistance-rated construction--as indicated on the building's as-built/life safety plans. 4) Multiple unprotected penetrations found throughout the building's ceilings and corridor walls, however, no plans were present to identify the construction's fire-resistance rating. 5) Facility shall conduct an annual inspection of all fire-resistant-rated construction, and maintain records of all repairs and materials used.

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Code Requirement	Statement of Violation
6Extinguishing 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 904.12.5.2 2018)	Findings during the re-inspection were: 1) Unable to provide reports showing that two semi-annual kitchen hood suppression system servicings were performed in the past 12 months. 2) Kitchen hood found yellow-tagged - tag date reflected is January 2022. Unable to produce documentation showing that deficiencies have been corrected in the past 24 months.
7Inspection, 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)	Findings during the re-inspection were: 1) Fire alarm system was found in silence mode--cause of trouble condition unknown--deficiency correction required. 2) Unable to produce documentation showing that all deficiencies noted in the Jan. 26, 2024 annual fire alarm system confidence report have been corrected.

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On 03/06/2024 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
8Power Source	
Exit signs shall be illuminated at all times. To ensure continued illumination for a duration of not less than 90 minutes in case of primary power loss, the sign illumination means shall be connected to an emergency power system provided from storage batteries, unit equipment or an on-site generator. The installation of the emergency power system shall be in accordance with Section 604. Group I-2, Condition 2 exit sign illumination shall not be provided by unit equipment batteries only. Exception: Approved exit sign illumination types that provide continuous illumination independent of external power sources for a duration of not less than 90 minutes, in case of primary power loss, are not required to be connected to an emergency electrical system. (IFC 1013.6.3 2018)	Findings during the re-inspection were: Exit sign located between rooms 534/535, failed to illuminate on battery-backup when tested.
9Power 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 2018)	Findings during the re-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 at time of 30-day re-inspection.

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On 03/06/2024 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
11Fire Drills	
In all Group I, Group E, and Group R2 Occupancies licensed by the state and inspected by the state fire marshal's office, at least twelve planned and unannounced fire drills shall be held every year. (1) Drills shall be conducted quarterly on each shift in Group I and Group R2, Occupancies and monthly in Group E Occupancies to familiarize personnel with signals and emergency action required under varied conditions. (2) A detailed written record of all fire drills shall be maintained and available for inspection. (3) When drills are conducted between 9:00 p.m. and 6:00 a.m., a coded announcement may be used instead of audible alarms.	Findings during the re-inspection were: 1) The facility failed to conduct/document twelve planned and unannounced fire drills, under varied conditions, in the past 12 months - once per shift, per quarter. Unable to provide fire drill documentation for the following: i) Night shift drill for 3rd quarter 2023 ii) Day shift drill for second quarter 2023 2) Facility will need to conduct a fire drill for ALL shifts in the months of MARCH and APRIL 2024 to be in compliance for the re-inspection.

Next inspection scheduled on or after: 04/08/2024

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

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

Business Name	Cascade Park Vista	***Provider Number***	001251
Address	242 SAINT HELENS ,	***Approval Status***	Disapproved
City, State, Zip	Tacoma, WA 98402	***Facility Type***	Residential Care

On 01/02/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation

1 Listed and Labeled

Only listed and labeled portable, electric space heaters shall be used. (IFC 604.10.1 2018)	Findings during the inspection were: Unapproved portable space heaters found in the activities office.

2 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)	Findings during the inspection were: Unable to provide reports showing that two semi-annual kitchen hood cleanings were performed in the past 12 months.

3 Owner's Responsibility

The owner shall maintain an inventory of all required fire-resistance-rated construction, construction installed toresist 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 2018 WAC 51-54A)	Findings during the inspection were: 1) SFMO previously cited facility on 2/16/2023 for: "Unable to provide annual inventory records showing that all fire-resistance-rated construction has been inspected/repaired in the past 12 months." 2) On 12/28/23, the facility failed to produce documentation to correct the above items. 3) Facility shall produce an inventory of all fire-resistance-rated construction--as indicated on the building's as-built/life safety plans. 4) Multiple unprotected penetrations found throughout the building's ceilings and corridor walls, however, no plans were present to identify the construction's fire-resistance rating. 5) Facility shall conduct an annual inspection of all fire-resistant-rated construction, and maintain records of all repairs and materials used.

Initials of Authorized Facility Representative:_____

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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)	Findings during the inspection were: Hardware on fire door to main boiler/electrical room has been modified - self-closing hinges are installed with plastic parts.
5 Testing and Maintenance	
Sprinkler systems shall be tested and maintained in accordance with Section 901. (IFC 903.5 2009, 2012, 2015, 2018)	Findings during the inspection were: 1) Facility was 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 for 2023 - Last 3-year full flow trip test report for dry fire sprinkler system - Last 5-year inspection/test report(s) - Last annual forward flow test report for backflow control valve 2) Unable to produce documentation showing that quarterly fire sprinkler system inspections have been conducted in the past 12 months. If not conducted, inspection shall be required before next re-inspection. 3) Loaded sprinkler head found in dish washing room, near air supply vent. 4) Found ordinary-rated fire sprinkler head in the walk-in cooler - replace with high temp head required.

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Code Requirement	Statement of Violation

6 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 904.12.5.2 2018)	Findings during the inspection were: 1) Unable to provide reports showing that two semi-annual kitchen hood suppression system servicings were performed in the past 12 months. 2) Kitchen hood found yellow-tagged - tag date reflected is January 2022. Unable to produce documentation showing that deficiencies have been corrected in the past 24 months.

7 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)	Findings during the inspection were: 1) Fire alarm system was found in silence mode--cause of trouble condition unknown--deficiency correction required. 2) Unable to produce documentation showing that annual servicing of the fire alarm system has been performed in the past 12 months. 3) Unable to provide documentation showing that smoke detectors sensitivity testing has been performed in the last past 5 years.

8 Maintenance

Carbon monoxide alarms and carbon monoxide detection systems shall be maintained in accordance with NFPA 720. Carbon monoxide alarms and carbon monoxide detectors that become inoperable or begin producing end-of-life signals shall be replaced. (IFC 915.6 2018)	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

9 Power Source

Exit signs shall be illuminated at all times. To ensure continued illumination for a duration of not less than 90 minutes in case of primary power loss, the sign illumination means shall be connected to an emergency power system provided from storage batteries, unit equipment or an on-site generator. The installation of the emergency power system shall be in accordance with Section 604. Group I-2, Condition 2 exit sign illumination shall not be provided by unit equipment batteries only. Exception: Approved exit sign illumination types that provide continuous illumination independent of external power sources for a duration of not less than 90 minutes, in case of primary power loss, are not required to be connected to an emergency electrical system. (IFC 1013.6.3 2018)	Findings during the inspection were: Exit sign located between rooms 534/535, failed to illuminate on battery-backup when tested.

10 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 1031.10.1 2018)	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.

11 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 2018)	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 at time of 30-day re-inspection.

Initials of Authorized Facility Representative:_____

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12 Securing Compressed Gas Containers, Cylinders and Tanks

Code Requirement	Statement of Violation
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 2018)	Findings during the inspection were: Found 17 unracked oxygen cylinders in the 4th floor oxygen storage room--staff education required.

Initials of Authorized Facility Representative:_____

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On 01/02/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

13 NFPA 80 Fire Door Inspection and Testing

Code Requirement	Statement of Violation
5.2.1 Inspection and Testing. Upon completin 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. And the following hall be checked: 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	Findings during the inspection were: Multiple fire doors throughout the facility found having: - painted frame lables - missing hardware screws - door gaps that exceed the allowed clearances

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Code Requirement	Statement of Violation
14 Fire Drills	
In all Group I, Group E, and Group R2 Occupancies licensed by the state and inspected by the state fire marshal's office, at least twelve planned and unannounced fire drills shall be held every year. (1) Drills shall be conducted quarterly on each shift in Group I and Group R2, Occupancies and monthly in Group E Occupancies to familiarize personnel with signals and emergency action required under varied conditions. (2) A detailed written record of all fire drills shall be maintained and available for inspection. (3) When drills are conducted between 9:00 p.m. and 6:00 a.m., a coded announcement may be used instead of audible alarms.	Findings during the inspection were: 1) The facility failed to conduct/document twelve planned and unannounced fire drills, under varied conditions, in the past 12 months - once per shift, per quarter. Unable to provide fire drill documentation for the following: i) Night shift drill for 3rd quarter 2023 ii) Day shift drill for second quarter 2023 2) Facility will need to conduct a fire drill for ALL shifts in the month of January 2024 to be in compliance for the re-inspection.

Next inspection scheduled on or after: 02/05/2024

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:_____