



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

Business Name Redmond Heights Senior Living

Provider Number 2628

Address 7950 WILLOWS RD NE,

Approval Status Disapproved

City, State, Zip Redmond, WA 98052

Facility Type Residential Care

On 01/08/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Time

Drills shall be held at unexpected times and under varying conditions to simulate the unusual conditions that occur in case of fire.

Exceptions:

1. In severe climates, the fire code official shall have the authority to modify the emergency evacuation drill termination points and frequency.
2. In Groups I-1, I-2, I-3 and R-4, where staff-only emergency evacuation drills are conducted after visiting hours or where care recipients are expected to be asleep, a coded announcement shall be an acceptable alternative to audible alarms.

(IFC 405.2 2018)

The following deficiencies were cited as a result of this inspection:

At the time of inspection, the following paperwork was not provided:

1. Facility cannot provide documentation for the completion of twelve planned and unannounced fire drills in the previous 12 months.

The following drills are missing.

Corrected 1st Shift - Quarter 1

3rd Shift - Quarter 2, 3 and 4

Corrected 2. Facility will need to verify care staffs schedule to accommodate times of fire drills. Two shifts cannot be combined as one drill for both shift inside that quarter.

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

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)

Corrected

3 Equipment and Fixtures

Equipment and wiring. All electrical equipment, wiring, devices and appliances shall be tested; listed and labeled; and installed, used and maintained in accordance with NFPA 70 and all instructions included as part of such listing.

(IFC 603.1.1, 2021)

Corrected



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Code Requirement	Statement of Violation
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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)

The following deficiencies were cited as a result of this inspection:

At the time of inspection, the following paperwork was not provided:

1. Hood cleaning shows past due
2. Past reports show exhaust fan blade not accessible.

Facility will need to working with cleaning vendor to bring this up to code

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

At time of inspection the following was observed:

Corrected 1. Hood area and filters show heavy build-up. Facility will need to change outside vendor to a quarterly schedule.

5 Clothes Dryer Exhaust Systems - Maintenance

610.1.2 Maintenance. The lint trap, mechanical and heating components, and the exhaust duct system of a clothes dryer shall be maintained in accordance with the manufacturer's operating instructions to prevent the accumulation of lint or debris that prevents the exhaust of air and products of combustion.

(IFC 610.1.2 - 2021)

Corrected



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6 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)

Corrected

7 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)

Corrected



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Code Requirement

Statement of Violation

8 Testing and Maintenance

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

(IFC 903.5 2021)

The following deficiencies were cited as a result of this inspection:

At the time of inspection, the following paperwork was not provided:

1. Annual forward flow test (NFPA 25 13.7.2)

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

At time of inspection the following was observed:

1. Kitchen hood looks to have a working UL300 suppression system and a standard working sprinkler head. Facility will need to working with sprinkler vendor to bring this up to code.
Corrected 2. Loaded heads found in laundry room
Corrected 3. Escutcheon found missing in kitchen above serving area.

9 Fusible Link Maintenance

Fixed temperature-sensing elements shall be maintained to ensure proper operation of the system.

(IFC 904.5.2 2021)

Corrected

10 Extinguishers Weighing 40 Pounds or Less

Portable fire extinguishers having a gross weight not exceeding 40 pounds (18 kg) shall be installed so that their tops are not more than 5 feet (1524 mm) above the floor.

(IFC 906.9.1 2021)

Corrected

11 Maintenance

Emergency and standby power systems shall be maintained in accordance with NFPA 110 and NFPA 111 such that the system is capable of supplying service within the time specified for the type and duration required.

(IFC 1203.4 2021)

Corrected



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Code Requirement

Statement of Violation

12 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 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

Corrected



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

Next inspection scheduled on or after: 02/10/2025

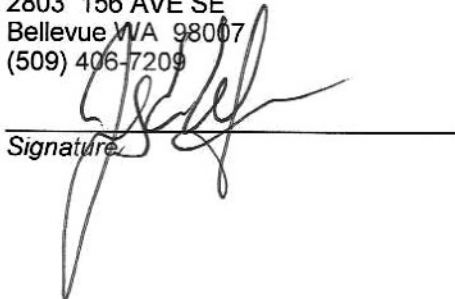
Right of appeal. Any person may appeal any decision made by the Fire Protection Bureau in accordance with WAC 212-12.

Owner or Authorized Representative


Signature

ANGELITO G. AGUSTIN / MTD
Print Name and Title

Deputy State Fire Marshal Jason Van Gorkum
2803 156 AVE SE
Bellevue WA 98007
(509) 406-7209


Signature



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Code Requirement

Statement of Violation

1 Time

Drills shall be held at unexpected times and under varying conditions to simulate the unusual conditions that occur in case of fire.

Exceptions:

1. In severe climates, the fire code official shall have the authority to modify the emergency evacuation drill termination points and frequency.
2. In Groups I-1, I-2, I-3 and R-4, where staff-only emergency evacuation drills are conducted after visiting hours or where care recipients are expected to be asleep, a coded announcement shall be an acceptable alternative to audible alarms.

(IFC 405.2 2018)

The following deficiencies were cited as a result of this inspection:

At the time of inspection, the following paperwork was not provided:

1. Facility cannot provide documentation for the completion of twelve planned and unannounced fire drills in the previous 12 months.
The following drills are missing.

1st Shift - Quarter 1
3rd Shift - Quarter 2, 3 and 4

2. Facility will need to verify care staffs schedule to accommodate times of fire drills. Two shifts cannot be combined as one drill for both shift inside that quarter.

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

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 deficiencies were cited as a result of this inspection:

At the time of inspection, the following paperwork was not provided:

1. Between 6:00 am to 9:00 pm must use the fire alarm during all emergency drills.

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

Handwritten signature and date: 11/14/24



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3 Equipment and Fixtures

Equipment and wiring. All electrical equipment, wiring, devices and appliances shall be tested; listed and labeled; and installed, used and maintained in accordance with NFPA 70 and all instructions included as part of such listing. (IFC 603.1.1, 2021)	At time of inspection the following was observed: 1. IT room has two broken receptacles
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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)	The following deficiencies were cited as a result of this inspection: At the time of inspection, the following paperwork was not provided: 1. Hood cleaning shows past due 2. Past reports show exhaust fan blade not accessible. Facility will need to working with cleaning vendor to bring this up to code All inspection reports must verify that the system has no deficiencies, or document that all deficiencies have been corrected. At time of inspection the following was observed: 1. Hood area and filters show heavy build-up. Facility will need to change outside vendor to a quarterly schedule.
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5 Clothes Dryer Exhaust Systems - Maintenance

610.1.2 Maintenance. The lint trap, mechanical and heating components, and the exhaust duct system of a clothes dryer shall be maintained in accordance with the manufacturer's operating instructions to prevent the accumulation of lint or debris that prevents the exhaust of air and products of combustion. (IFC 610.1.2 - 2021)	At time of inspection the following was observed: 1. Heavy lent build-up found upper back of dryers.
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6 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 deficiencies were cited as a result of this inspection:

At the time of inspection, the following paperwork was not provided:

1. Only a portion of the building shows being inspected.

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

7 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)

At time of inspection the following was observed:

1. Memory Care, Spa room has penetration found in ceiling.

AL
11/12/2024



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Code Requirement	Statement of Violation
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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 deficiencies were cited as a result of this inspection: At the time of inspection, the following paperwork was not provided: 1. Annual forward flow test (NFPA 25 13.7.2) All inspection reports must verify that the system has no deficiencies, or document that all deficiencies have been corrected. At time of inspection the following was observed: 1. Kitchen hood looks to have a working UL300 suppression system and a standard working sprinkler head. Facility will need to working with sprinkler vendor to bring this up to code. 2. Loaded heads found in laundry room 3. Escutcheon found missing in kitchen above serving area.
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9 Fusible Link Maintenance

Fixed temperature-sensing elements shall be maintained to ensure proper operation of the system. (IFC 904.5.2 2021)	The following deficiencies were cited as a result of this inspection: At the time of inspection, the following paperwork was not provided: 1. Facility will need to have vendor perform a heat test to verify correct links temp's are being used. Paperwork shows 3 - 450 degrees All inspection reports must verify that the system has no deficiencies, or document that all deficiencies have been corrected.
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10 Extinguishers Weighing 40 Pounds or Less

Portable fire extinguishers having a gross weight not exceeding 40 pounds (18 kg) shall be installed so that their tops are not more than 5 feet (1524 mm) above the floor. (IFC 906.9.1 2021)	At time of inspection the following was observed: 1. Laundry room has fire extinguisher above 5 feet.
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Code Requirement	Statement of Violation
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11 Maintenance

Emergency and standby power systems shall be maintained in accordance with NFPA 110 and NFPA 111 such that the system is capable of supplying service within the time specified for the type and duration required.

(IFC 1203.4 2021)

The following deficiencies were cited as a result of this inspection:

At the time of inspection, the following paperwork was not provided:

1. Fuel test report
2. 3/5/2025 annual report shows battery due to age.

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

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

Handwritten signature and date:
11/12/2024



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Code Requirement	Statement of Violation
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12 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 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

The following deficiencies were cited as a result of this inspection:

At the time of inspection, the following paperwork was not provided:

1. Only a portion of the building shows being inspected.

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

At time of inspection the following was observed:

1. Fire door by room 230 will not latch

[Handwritten signature]
11/12/2024



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

Next inspection scheduled on or after: 12/11/2024

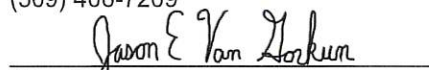
Right of appeal. Any person may appeal any decision made by the Fire Protection Bureau in accordance with WAC 212-12.

Owner or Authorized Representative


Signature

ANGELITO G. AGUSTIN / MAINT. DIRECTOR
Print Name and Title

Deputy State Fire Marshal Jason Van Gorkum
2803 156 AVE SE
Bellevue WA 98007
(509) 406-7209


Signature

