



Washington State Patrol
Fire Protection Bureau

Phone: (360) 596-3900

Business Name	Magnolia Care	Provider Number	2650
Address	1707 E ROWAN AVE ,	Approval Status	Approved
City, State, Zip	Spokane, WA 99207	Facility Type	Residential Care

On 02/14/2025 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 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)

Acknowledged.

2 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)

Corrected.

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



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Code Requirement

Statement of Violation

3 Testing and Maintenance

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

(IFC 903.5 2021)

2024 - 5/2/24 report from IEPF states, "OS & Y tamper in basement does not work", all noted items shall be resolved. 2/14/25- Email from Fire Systems West states that this is not broken and works fine.

2024 - Testing backflow preventers - testing of backflow preventer is required. Completed.

NFPA 25 13.7.2.
13.7.2 Testing.

13.7.2.1*
All backflow preventers installed in fire protection system piping shall be exercised annually by conducting a forward flow test at a minimum flow rate of the system demand.

13.7.2.1.1
Where water rationing is enforced during shortages lasting more than 1 year, an internal inspection of the backflow preventer to ensure the check valves will fully open shall be permitted in lieu of conducting the annual forward flow test.

13.7.2.1.2
The forward flow test shall not be required where annual fire pump testing causes the system flow rate to flow through the backflow preventer device.

The full flow test of the backflow prevention valve can be performed with a test header or other connections downstream of the valve. A bypass around the check valve in the fire department connection line with a control valve in the normally closed position can be an acceptable arrangement. When flow to a visible drain cannot be accomplished, closed loop flow can be acceptable if a flowmeter or sight glass is incorporated into the system to ensure flow.

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Code Requirement

Statement of Violation

4 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)

Completed 10/8/24, report received.

5 Fuel-burning Appliances and Fuel-Burning Fireplaces

Carbon monoxide detection shall be provided in dwelling units, sleeping units and classrooms that contain a fuel-burning appliance or a fuel-burning fireplace.

(IFC 0915.1.2 2021)

Installed.

6 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.

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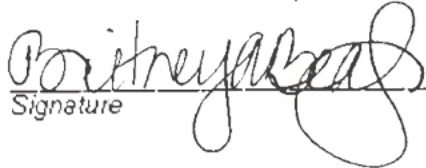
Code Requirement

Statement of Violation

Next inspection scheduled on or after: 11/30/2025

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

Britney A. Beaty - Administrator
Print Name and Title

Deputy State Fire Marshal Barbara McMullen
6403 W ROWAND DR
Spokane WA 99209
(509) 954-2746

Barbara R.
McMullen

Digitally signed by
Barbara R. McMullen
Date: 2025.02.19
05:41:40 -08'00'

Signature

Initials of Authorized Facility Representative: 



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

Business Name	Magnolia Care	Provider Number	2650
Address	1707 E ROWAN AVE ,	Approval Status	Disapproved
City, State, Zip	Spokane, WA 99207	Facility Type	Residential Care

On 09/25/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 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)

Facility is unable to provide documentation for the semi-annual hood cleaning prior to the 6/13/24 report of cleaning.



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Facility Type Residential Care

On 09/25/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

2 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)

1. Facility is unable to provide documentation that the annual fire door inspection has been completed. REPORT PROVIDED VIA EMAIL.

NFPA 80 (2016)

5.2.3.5.2 As a minimum, the following items shall be verified:

- (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 noncombustible 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 leaf closes before the active leaf.
- (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 modifications 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.



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On 09/25/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

3 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)

Dining room door does not close and latch.

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Code Requirement

Statement of Violation

4 Testing and Maintenance

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

(IFC 903.5 2021)

2023 - In the fire sprinkler cabinet, there are spares missing. Also, a fire sprinkler inventory shall be provided.

2023 - There are QR fire sprinklers from 1997 (sidewalls) and 1999 (pendent) and not UL testing documentation available. Report/documentation to be provided. Replaced via email.

2024 - 5/2/24 report from IEFPP states, "OS & Y tamper in basement does not work", all noted items shall be resolved.

2024 - Facility is unable to provide Quarterly Fire Inspections reports for 8/12/24, 11/21/23 and 2/21/24. Reports received.

2024 - Testing backflow preventers - testing of backflow preventer is required.

NFPA 25 13.7.2.
13.7.2 Testing.

13.7.2.1*
All backflow preventers installed in fire protection system piping shall be exercised annually by conducting a forward flow test at a minimum flow rate of the system demand.

13.7.2.1.1
Where water rationing is enforced during shortages lasting more than 1 year, an internal inspection of the backflow preventer to ensure the check valves will fully open shall be permitted in lieu of conducting the annual forward flow test.

13.7.2.1.2
The forward flow test shall not be required where annual fire pump testing causes the system flow rate to flow through the backflow preventer device.

The full flow test of the backflow prevention valve can be performed with a test header or other connections downstream of the valve. A bypass around the check valve in the fire department connection line with a control valve in the normally closed position can be an acceptable arrangement.



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Code Requirement

Statement of Violation

When flow to a visible drain cannot be accomplished, closed loop flow can be acceptable if a flowmeter or sight glass is incorporated into the system to ensure flow.

5 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 904.13.5.2 2021)

Facility is unable to provide documentation for the semi-annual kitchen suppression system servicing.

Missing reports dated 5/6/24 and 10/10/23 provided via email.

6 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)

Facility is unable to provide documentation for the 2024 annual fire alarm system testing and maintenance.

Last documented fire alarm system testing and maintenance report from 5/2/23.

7 Fuel-burning Appliances and Fuel-Burning Fireplaces

Carbon monoxide detection shall be provided in dwelling units, sleeping units and classrooms that contain a fuel-burning appliance or a fuel-burning fireplace.

(IFC 0915.1.2 2021)

There are fuel burning dryers and no carbon monoxide detection installed.

8 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 1032.10.1 2021)

Facility is unable to provide documentation for the monthly 30 second activation test for the emergency lights.

REPORTS RECEIVED VIA EMAIL.



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9 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)

Facility is unable to provide documentation for the annual 90 minute power test for the emergency lights.

ANNUAL 90 MINUTE COMPLETED AND REPORT RECEIVED VIA EMAIL.

10 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.

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

The following Drills are missing.

3RD Shift - Quarter 1 (January - March 2024)

2ND & 3RD Shift - Quarter 3 (July - September 2024)

An 2nd and 3rd shift fire drill shall be completed prior to re-inspection.



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Code Requirement

Statement of Violation

Next inspection scheduled on or after: 10/25/2024

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

Britney A Beaty
Signature

Britney A Beaty - Administrator
Print Name and Title

Deputy State Fire Marshal Barbara McMullen
6403 W ROWAND DR
Spokane WA 99219
(509) 954-2746

Barbara McMullen
Signature