



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

Business Name

10420 GRAVELLY LAKE DR SW,

City, State, Zip

Lakewood, WA 984995041

Provider Number 2735

Approval Status Disapproved

Facility Type Residential Care

On 04/21/2025 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 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 2018 WAC 51-54A)

Findings during the re-inspection were:

PREVIOUSLY CITED DEFICIENCIES REMAIN

- 1) SFMO previously cited facility on 7/30/2023 for:
"Facility shall conduct an annual inspection of all fire-resistant-rated construction assemblies, and maintain records of all repairs and materials used, where originally required during time of construction."
- 2) On the initial, yearly inspection conducted 7/1/24, the facility failed to produce documentation to correct the citation above.
- 3) 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.
- 4) 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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Statement of Violation

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 2018)

Findings during the re-inspection were:

PREVIOUSLY CITED DEFICIENCIES REMAIN

- 1) SFMO previously cited facility on 7/30/23 for: "Unable to provide record showing that fire doors have been annually inspected, tested and repaired in the past 12 months."
- 2) On the initial, yearly inspection conducted 7/1/24, the facility failed to produce documentation to correct the above items.

3 Door Operation

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

(IFC 705.2.4 2021)

Findings during the re-inspection were:

PREVIOUSLY CITED DEFICIENCIES REMAIN

- 2) Facility shall perform facility-wide audit of all fire doors--INCLUDING RESIDENT ROOM FIRE DOORS--to ensure that they are all capable of self-closing and latching.
- 3) The following fire doors failed to self-close and latch when tested:
- Dining room doors; by Activity room

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Code Requirement

Statement of Violation

4 Fusible Link Maintenance

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

(IFC 904.5.2 2021)

Findings during the re-inspection were:

PREVIOUSLY CITED DEFICIENCIES REMAIN

1) Unable to produce documentation showing that a heat survey has been performed for the commercial hood to determine the fusible link rating required for installation

2) A heat survey for the kitchen hood suppression system shall be conducted, to determine the appropriate fusible link rating required for installation. Currently there are three 450 degree links in place.

5 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)

Findings during the re-inspection were:

PREVIOUSLY CITED DEFICIENCIES REMAIN

Unable to provide documentation showing that deficiencies identified in the June 2024 annual service report have been corrected - fire alarm system was yellow-tagged for multiple deficiencies. Panel indicates deficiencies were corrected 7/2024--no report available.

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Next inspection scheduled on or after: 05/21/2025

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

Deputy State Fire Marshal Lysandra Davis
2502 112 ST
Tacoma WA 984455104
(360) 890-1622

Signature

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Washington State Patrol
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Business Name	Maple Creek of Lakewood	Provider Number	2575
Address	10420 GRAVELLY LAKE DR SW,	Approval Status	Disapproved
City, State, Zip	Lakewood, WA 984995041	Facility Type	Residential Care

On 07/01/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement	Statement of Violation
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1 Abatement of Electrical Hazards

Abatement of unsafe conditions and electrical hazards. Conditions that constitute an electrical shock or fire hazard shall be abated.. (IFC 603.2 2021)	Findings during the inspection were: Outlet in nurse's office (located above counter) is missing the required cover plate.
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2 Extension Cords

Extension cords. Extension cords shall not be a substitute for permanent wiring and shall be listed and labeled in accordance with UL 817. Extension cords shall not be affixed to structures, extended through walls, ceilings or floors, or under doors or floor coverings, nor shall such cords be subject to environmental damage or physical impact. Extension cords shall be used only with portable appliances. Extension cords marked for indoor use shall not be used outdoors.. (IFC 603.6 2021)	Findings during the inspection were: Extension cord utilized as permanent wiring in main lobby, found powering vending machine by dining room--power strip with surge protection required.
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3 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)	Findings during the inspection were: Kitchen hood found past due for semi-annual cleaning--last cleaned on 10/26/23.
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Code Requirement

Statement of Violation

4 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 2018 WAC 51-54A)

Findings during the inspection were:

- 1) SFMO previously cited facility on 7/30/2023 for: "Facility shall conduct an annual inspection of all fire-resistant-rated construction assemblies, and maintain records of all repairs and materials used, where originally required during time of construction."
- 2) On the initial, yearly inspection conducted 7/1/24, the facility failed to produce documentation to correct the citation above.
- 3) 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.
- 4) Facility shall conduct an annual inspection of all fire-resistant-rated construction, and maintain records of all repairs and materials used.

5 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:

- 1) SFMO previously cited facility on 7/30/23 for: "Unable to provide record showing that fire doors have been annually inspected, tested and repaired in the past 12 months."
- 2) On the initial, yearly inspection conducted 7/1/24, the facility failed to produce documentation to correct the above items.

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6 Door Operation

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

(IFC 705.2.4 2021)

Findings during the inspection were:

- 1) Facility failed to maintain all fire doors in the building as capable of self-closing and latching--numerous doors failed when tested.
- 2) Facility shall perform facility-wide audit of all fire doors--including resident room fire doors--to ensure that they are all capable of self-closing and latching.
- 3) The following fire doors failed to self-close and latch when tested:
 - Breakroom door; 3rd floor
 - Stairwell #2 door, by 201
 - Corridor door between 205/206
 - Corridor door between 105/106
 - Activity room doors; 1st floor
 - Dining room doors; by Activity room
 - Corridor doors by 108

7 Testing and Maintenance

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

(IFC 903.5 2021)

Findings during the inspection were:

- 1) No quarterly inspection reports available--must be obtained from PSI.
- 2) No records of 5-year FDC hydro testing--scheduling required.
- 3) No records of annual forward flow testing--scheduling required.
- 4) Missing escutcheon ring in first floor resident hall, by Room 108.

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8 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)	Findings during the inspection were: 1) Facility failed to perform semi-annual servicing of their kitchen hood suppression system, per IFC 904.13.5.2. 2) Records show the hood suppression system is receiving annual inspection, testing and maintenance. A second semi-annual servicing shall be performed in December 2024.
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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)	Findings during the inspection were: 1) Unable to produce documentation showing that a heat survey has been performed for the commercial hood to determine the fusible link rating required for installation 2) A heat survey for the kitchen hood suppression system shall be conducted, to determine the appropriate fusible link rating required for installation. Currently there are three 450 degree links in place.
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10 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)	Findings during the inspection were: Unable to provide documentation showing that deficiencies identified in the June 2024 annual service report have been corrected - fire alarm system was yellow-tagged for multiple deficiencies.
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11 Unlatching

The unlatching of any door or leaf for egress shall require not more than one motion in a single linear or rotational direction to release all latching and all locking devices. Exceptions: 1. Places of detention or restraint. 2. Where manually operated bolt locks are permitted by Section 1010.2.5. 3. Doors with automatic flush bolts as permitted by Section 1010.2.4, Item 4. 4. Doors from individual dwelling units and sleeping units of Group R occupancies as permitted by Section 1010.2.4, Item 5. (IFC 1010.2.1 2021)	Findings during the inspection were: Exit door to Stairwell 1 by room 210 is equipped with twisting door knob hardware--shall be replaced with single-action, lever hardware.
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12 NFPA 80 Fire Door Inspection and Testing

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 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

5.2.4.1 Periodic inspections and testing shall be performed not less than annually.

Findings during the inspection were:

- 1) Facility failed to maintain all fire doors in accordance with NFPA 80, 5.2.3.5.2 and 5.2.4.1.
- 2) Fire door to library has broken magnetic door holder, found wedged open instead.
- 3) Corridor fire doors between 105 & 106 had multiple missing screws in the door hinges.

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13 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) All day shift fire drill records conducted in 2023 and 2024 reported that the facility failed to include the transmission of the fire alarm signal throughout the facility during simulation, as required by WAC 212-12-044.
- 2) No fire drills conducted for Quarter 2 of 2024.
- 3) Facility shall conduct a Day and Noc shift fire drill for JULY and AUGUST 2024--for a total of four drills, to be in compliance at time of the next re-inspection.

The recommendation was made to conduct all fire drills at the beginning of each quarter, instead of the last month of the quarter, to allow for sufficient time to complete the required drills.

Next inspection scheduled on **or after:** 08/01/2024

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