



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

Business Name Madison Avenue Retirement Center

Provider Number 000922

Address 285 Madison ,

Approval Status Approved

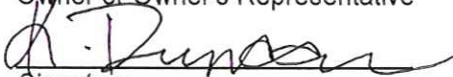
City, State, Zip Bainbridge Island, WA 98110

Facility Type Residential Care

On 09/30/2024 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

Kari Durcan Executive Director
Print Name and Title

Deputy State Fire Marshal Raul Murcia
PO BOX 42642
Olympia WA 98504
(360) 819-0067


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.



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

Business Name	Madison Avenue Retirement Center	Provider Number	000922
Address	285 Madison ,	Approval Status	Disapproved
City, State, Zip	Bainbridge Island, WA 98110	Facility Type	Residential Care

On 08/14/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

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 2021)

Findings during the inspection were:

Facility failed to provide documentation of annual inspection of fire-resistance-rated construction.

2 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)

Corrected.

3 Testing and Maintenance

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

(IFC 903.5 2021)

Corrected.

4 Inspection, Testing and Maintenance

Findings during the inspection were:

Facility failed to provide documentation showing monthly inspection of single and or multiple station smoke alarms.



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On 08/14/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

5 Maintenance

Carbon monoxide alarms and carbon monoxide detection systems shall be maintained in accordance with NFPA 72. Carbon monoxide alarms and carbon monoxide detectors that become inoperable or begin producing end-of-life signals shall be replaced.

(IFC 915.6 2021 WAC)

Findings during the inspection were:

Facility failed to provide documentation showing maintenance and testing of carbon monoxide alarms.

6 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)

Findings during the inspection were:

Facility failed to provide documentation of monthly 30-second activation test.

7 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)

Corrected.

8 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)

Findings during the inspection were:

Facility failed to provide the following documentation for the generator;

- Log of weekly inspections.
- Log of monthly full load test.



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On 08/14/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

9 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

Findings during the inspection were:

Facility failed to provide documentation of annual fire door inspection.

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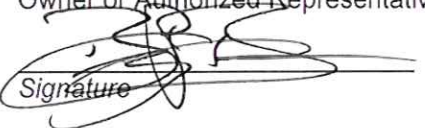
Code Requirement	Statement of Violation
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- | | |
|--|--|
| 9. Latching hardware operates and secures the door when it is in the closed position | |
| 10. Auxiliary hardware items that interfere or prohibit operation are not installed on the door or 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: 09/14/2024

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

Benjamin P. Brewin Maint. Tech Manager
Print Name and Title

Deputy State Fire Marshal Raul Murcia
PO BOX 42642
Olympia WA 98504
(360) 819-0067


Signature

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Business Name Madison Avenue Retirement Center

Provider Number 000922

Address 285 Madison ,

Approval Status Disapproved

City, State, Zip Bainbridge Island, WA 98110

Facility Type Residential Care

On 06/26/2024 the Office of the State Fire Marshal conducted an inspection at your facility.

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 2021)

Findings during the inspection were:

Facility failed to provide documentation of annual inspection of fire-resistance-rated construction.

2nd floor staff room by room 209, penetration in wall.

Basement ceiling tile missing by location of main drain.

2 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)

Findings during the inspection were:

Facility failed to provide documentation of 4-year fire/smoke damper inspection.

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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)

Findings during the inspection were:

Facility failed to provide the following documentation for the fire sprinkler system;

- Five-year internal pipe examination.
- Fire department connection hydrostatic test.

Fire department connection needs FDC sign.

1st floor, sprinkler room, walkers being stored in room and blocking sprinkler risers.

4 Inspection, Testing and Maintenance

Findings during the inspection were:

Facility failed to provide documentation showing monthly inspection of single and or multiple station smoke alarms.

There is a smoke detector that is less than 3 feet from a HVAC vent.

Fire alarm in trouble mode, trouble mode shall be corrected.

5 Maintenance

Carbon monoxide alarms and carbon monoxide detection systems shall be maintained in accordance with NFPA 72. Carbon monoxide alarms and carbon monoxide detectors that become inoperable or begin producing end-of-life signals shall be replaced.

(IFC 915.6 2021 WAC)

Findings during the inspection were:

Facility failed to provide documentation showing maintenance and testing of carbon monoxide alarms.

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Code Requirement

Statement of Violation

6 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)

Findings during the inspection were:

Facility failed to provide documentation of monthly 30-second activation test.

7 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)

Findings during the inspection were:

Facility failed to provide documentation of annual 90-minute power test.

8 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)

Findings during the inspection were:

Facility failed to provide the following documentation for the generator;

- Annual servicing of generator.
- Log of weekly inspections.
- Log of monthly full load test.

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Code Requirement

Statement of Violation

9 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

Findings during the inspection were:

Facility failed to provide documentation of annual fire door inspection.

3rd floor double doors by room 306 did not latch and one of the doors does not open when push bar is pressed.

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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: 07/27/2024

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

Benjamin P. Brewin Heist. Tech Manager
Print Name and Title

Deputy State Fire Marshal Raul Murcia
PO BOX 42642
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Signature

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