



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

August 14, 2023

Cindy Davis
Executive Director
Renton Assisted Living
71 VICTORIA
Renton WA 98055

The Office of the State Fire Marshal conducted an annual fire and life safety inspection of Renton Assisted Living.

Initial Inspection

During the inspection, we identified a number of violations.

We provided a copy of the inspection report to the facility.

The inspection report outlined each violation and items to correct prior to a reinspection, scheduled on or after August 11, 2023.

Required Reinspection

- Today we conducted a reinspection of Renton Assisted Living.
- During the reinspection, one or more of the violations identified during the initial inspection remained uncorrected.

These two inspections found this facility failed to gain and maintain compliance as required by state law. These violations place the residents, staff, and visitors at risk.

Required Follow-Up

- The facility administrator shall submit a letter to Deputy State Fire Marshal Cozetta Christian, 2502, 112TH, , Tacoma, WA 984455104 within 30 days. The letter shall explain, in detail, how the code violations were corrected and indicate the facility is ready for a final reinspection.
- Upon receipt of the letter, the Deputy State Fire Marshal will conduct a final reinspection.
- If the letter is not received by the time specified, we shall notify the Department of Social and Health Services (DSHS) Residential Care Services Division of the failure to correct violations. We will recommend enforcement action against the facility. Enforcement actions available to DSHS under RCW 18.20.190 include civil fines, stop placements, and license suspension or revocation.
- If the option chosen by DSHS is a license revocation, a new fire and life safety inspection will be required prior to recommending relicensure.

If you have any questions regarding this process, please contact Deputy State Fire Marshal Cozetta Christian at (360) 584-5796.

Letter Received By:

Letter Issued By:

Deputy State Fire Marshal
Cozetta Christian

cc: Residential Care Services
Enclosures



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

Business Name Renton Assisted Living
Address 71 VICTORIA ,
City, State, Zip Renton, WA 98055

Provider Number 2614
Approval Status Disapproved
Facility Type Residential Care

On 08/14/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Administration

On 08/14/2023 an unannounced Fire and Life Safety Code re-inspection was conducted at Renton Assisted Living by a representative of the Washington State Patrol, State Fire Marshal's Office to determine compliance with all applicable codes.

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

2 Smoking General

The smoking or carrying of a lighted pipe, cigar, cigarette or any other type of smoking paraphernalia or material is prohibited in the areas indicated in Sections 310.2 through 310.8.

(IFC 310.1 2015, 2018)

Corrected

3 Compliance with "No Smoking" signs.

Smoking shall not be permitted nor shall a person smoke, throw or deposit any lighted or smoldering substance in any place where "No Smoking" signs are posted.

(IFC 310.5 2015, 2018)

The following violation was observed at the time of re-inspection:

Residents are currently smoking in the nonsmoking area outside. There are currently cigarette butts on the ground and in the brush.

4 Burning Objects

Lighted matches, cigarettes, cigars, or other burning objects shall not be discarded in such a manner that could cause ignition of other combustible material.

(IFC 310.7 2015, 2018)

The following violation was observed at the time of re-inspection:

The "non" smoking area has cigarette butts thrown in the brush.

5 Multiplug Adapters

Multiplug adapters, such as cube adapters, unfused plug strips or any other device not complying with NFPA 70 shall be prohibited.

(IFC 604.4 2018)

The following violation was observed at the time of re-inspection:

The maintenance office has an unapproved multi plug adapter on the ceiling. - 3rd floor

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Provider Number 2614

Approval Status Disapproved

Facility Type Residential Care

On 08/14/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

6 Installation

Relocatable power tap cords shall not extend through walls, ceilings, floors, under doors or floor coverings, or be subject to environmental or physical damage.

(IFC 604.4.3 2018)

The following violation was observed at the time of re-inspection:

The Business Manager's office has a power strip dangling by it's cord. - behind desk - 2nd floor

Place on desk at time of re-inspection.

7 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)

The following violation was observed at the time of re-inspection:

The facility was unable to provide record of their annual fire wall inspection and/or repairs for all fire-resistant-rated construction.

8 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 2018)

The following violation was observed at the time of re-inspection:

The Salon door has two small penetrations in it. - at the door handle

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Code Requirement

Statement of Violation

9 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)

The following violation was observed at the time of re-inspection:

The facility was unable to provide inventory record of their annual inspection and/or repairs for all fire-resistant-rated doors.

10 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)

The following violation was observed at the time of re-inspection:

The facility was unable to provide documentation for their last fire/smoke damper testing.

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

19.4 Periodic Inspection and Testing.

19.4.1 Each damper shall be tested and inspected 1 year after installation.

19.4.1.1 The test and inspection frequency shall then be every 4 years, except in hospitals, where the frequency shall be every 6 years.

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Facility Type Residential Care

On 08/14/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

11 Inspection, Testing and Maintenance

Fire detection and alarm systems, emergency alarm systems, gas detection systems, fire-extinguishing systems, mechanical smoke exhaust systems and smoke and heat vents shall be maintained in an operative condition at all times, and shall be replaced or repaired where defective. Nonrequired fire protection systems and equipment shall be inspected, tested and maintained or removed.

(IFC 901.6 2018)

The following violation was observed at the time of re-inspection:

The following locations are missing escutcheon rings:

1. Resident room 108 - when you walk in - before rooms
2. In hall by resident room 121

The maintenance office has a wire attached to the sprinkler pipe.

12 Testing and Maintenance

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

(IFC 903.5 2009, 2012, 2015, 2018)

The following violation was observed at the time of re-inspection:

The facility was unable to provide their quarterly sprinkler reports.

13 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)

The following violation was observed at the time of re-inspection:

The facility's kitchen suppression report has multiple deficiencies and is currently yellow tagged.

The facility was unable to provide a correction report.

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Facility Type Residential Care

On 08/14/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

14 Portable Fire Extinguishers - General Requirements

Portable fire extinguishers shall be selected, installed and maintained in accordance with this section and NFPA 10.

Exceptions:

1. The distance of travel to reach an extinguisher shall not apply. The travel distance to reach an extinguisher shall not apply to the spectator seating portions of Group A-5 occupancies.
2. Thirty-day inspections shall not be required and maintenance shall be allowed to be once every three years for dry-chemical or halogenated agent portable fire extinguishers that are supervised by a listed and approved electronic monitoring device, provided that all of the following conditions are met:
 - 2.1. Electronic monitoring shall confirm that extinguishers are properly positioned, properly charged and unobstructed.
 - 2.2. Loss of power or circuit continuity to the electronic monitoring device shall initiate a trouble signal.
 - 2.3. The extinguishers shall be installed inside of a building or cabinet in a noncorrosive environment.
 - 2.4. Electronic monitoring devices and supervisory circuits shall be tested every 3 years when extinguisher maintenance is performed.
 - 2.5. A written log of required hydrostatic test dates for extinguishers shall be maintained by the owner to verify that hydrostatic tests are conducted at the frequency required by NFPA 10.
3. In Group I-3, portable fire extinguishers shall be permitted to be located at staff locations.

(IFC 906.2 2015, 2018)

The following violation was observed at the time of re-inspection:

The required maintenance for the fire extinguishers in the following areas have not been completed in accordance with NFPA 10:

1. Wellness Office - 3rd floor
2. Hall by resident room 303
3. Hall by resident room 319
4. Hall by resident room 216
5. Hall by resident room 218
6. Outside smoking area - dated 2018
7. Activity office by E.D - tag is torn - unsure when last done
8. Med tech room - 2nd floor
9. Hall by resident room 210
10. Hall by resident room 208
11. TV Lounge - 1st floor
12. Laundry room
13. Hall by resident room 116
14. Class K in the kitchen

15 Unobstructed and Unobscured

Portable fire extinguishers shall not be obstructed or obscured from view. In rooms or areas in which visual obstruction cannot be completely avoided, means shall be provided to indicate the locations of extinguishers.

(IFC 906.6 2015, 2018)

The following violation was observed at the time of re-inspection:

The fire Extinguisher in the laundry room is on the ground and blocked with clothing.



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Code Requirement

Statement of Violation

16 Securing Compressed Gas Containers, Cylinders and Tanks

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)

The following violation was observed at the time of re-inspection:

Resident room 106 has unsecured oxygen.

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17 Fire Drills

In all Group I, Group E, and Group R2 Occupancies licensed by the state, at least twelve planned and unannounced fire drills shall be held every year. 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. A detailed written record of all fire drills shall be maintained and available for inspection at all times. When drills are conducted between 9:00 p.m. and 6:00 a.m., a coded announcement may be used instead of audible alarms. Fire drills shall include the transmission of a fire alarm signal and simulation of emergency conditions. The fire alarm monitoring company shall be notified prior to the activation of the fire alarm system for drill purposes and again at the conclusion of the transmission and restoration of the fire alarm system to normal mode.

(WAC 212-12-044)

The following violation was observed at the time of re-inspection:

The facility was not able to provide documentation for the completion of twelve planned and unannounced fire drills in the previous 12 months.

Next inspection scheduled on or after: 09/13/2023

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 Cozetta Christian
2502 112TH E
Tacoma WA 984455104
(360) 584-5796

Signature



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

July 12, 2023

Cindy Davis
Executive Director
Renton Assisted Living
71 VICTORIA
Renton WA 98055

The Office of the State Fire Marshal conducted an annual fire and life safety inspection of Renton Assisted Living.

Initial Inspection

During the inspection, we identified a number of violations.

We provided a copy of the inspection report to the facility.

The inspection report outlined each violation and items to correct prior to a reinspection, scheduled on or after July 12, 2023.

Required Reinspection

- Today we conducted a reinspection of Renton Assisted Living.
- During the reinspection, one or more of the violations identified during the initial inspection remained uncorrected.

These two inspections found this facility failed to gain and maintain compliance as required by state law. These violations place the residents, staff, and visitors at risk.

Required Follow-Up

- The facility administrator shall submit a letter to Deputy State Fire Marshal Cozetta Christian, 2502, 112TH, , Tacoma, WA 984455104 within 30 days. The letter shall explain, in detail, how the code violations were corrected and indicate the facility is ready for a final reinspection.
- Upon receipt of the letter, the Deputy State Fire Marshal will conduct a final reinspection.
- If the letter is not received by the time specified, we shall notify the Department of Social and Health Services (DSHS) Residential Care Services Division of the failure to correct violations. We will recommend enforcement action against the facility. Enforcement actions available to DSHS under RCW 18.20.190 include civil fines, stop placements, and license suspension or revocation.
- If the option chosen by DSHS is a license revocation, a new fire and life safety inspection will be required prior to recommending relicensure.

If you have any questions regarding this process, please contact Deputy State Fire Marshal Cozetta Christian at (360) 584-5796.

Letter Received By:

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Deputy State Fire Marshal
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Business Name Renton Assisted Living
Address 71 VICTORIA ,
City, State, Zip Renton, WA 98055

Provider Number 2614
Approval Status Disapproved
Facility Type Residential Care

On 07/12/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

1 Administration

On 07/12/2023 an unannounced Fire and Life Safety Code inspection was conducted at Renton Assisted Living by a representative of the Washington State Patrol, State Fire Marshal's Office to determine compliance with all applicable codes.

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

2 Smoking General

The smoking or carrying of a lighted pipe, cigar, cigarette or any other type of smoking paraphernalia or material is prohibited in the areas indicated in Sections 310.2 through 310.8.

(IFC 310.1 2015, 2018)

The following violation was observed at the time of re-inspection:

The following resident rooms smell of smoke:

1. ☒
2. ☒ (found cigarette next to window with lighter)✓
3. ☒ (Tobacco on floor)✓

Facility states they have talked with the residents and thought they were no longer smoking. There is also a complaint investigation open for this. (Complaint # 76598)

3 Compliance with "No Smoking" signs.

Smoking shall not be permitted nor shall a person smoke, throw or deposit any lighted or smoldering substance in any place where "No Smoking" signs are posted.

(IFC 310.5 2015, 2018)

The following violation was observed at the time of re-inspection:

Residents are currently smoking in the non smoking area outside. There currently cigarette butts on the ground and in the brush.

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Code Requirement	Statement of Violation
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4 Burning Objects

Lighted matches, cigarettes, cigars, or other burning objects shall not be discarded in such a manner that could cause ignition of other combustible material.

(IFC 310.7 2015, 2018)

The following violation was observed at the time of re-inspection:

The "non" smoking area has cigarette butts thrown in the brush.

5 Multiplug Adapters

Multiplug adapters, such as cube adapters, unfused plug strips or any other device not complying with NFPA 70 shall be prohibited.

(IFC 604.4 2018)

The following violation was observed at the time of re-inspection:

The maintenance office has an unapproved multi plug adapter on the ceiling - 3rd floor

6 Installation

Relocatable power tap cords shall not extend through walls, ceilings, floors, under doors or floor coverings, or be subject to environmental or physical damage.

(IFC 604.4.3 2018)

The following violation was observed at the time of re-inspection:

The business manager's office has a power strip dangling by it's cord. behind desk. - 2nd floor

7 Extension Cords

Extension cords and flexible cords shall not be a substitute for permanent wiring and shall be listed and labeled in accordance with UL 817. Extension cords and flexible 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 604.5 2018)

Corrected

8 Unapproved conditions

Open junction boxes and open-wiring splices shall be prohibited. Approved covers shall be provided for all switch and electrical outlet boxes.

(IFC 604.6, 2018)

Corrected

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Code Requirement

Statement of Violation

9 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)

The following violation was observed at the time of re-inspection:

The facility was unable to provide record of their annual fire wall inspection and/or repairs for all fire-resistant-rated construction.

10 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 2018)

The following violation was observed at the time of re-inspection:

The Salon door has two small penetrations in it - at the door handle.

X

11 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)

The following violation was observed at the time of re-inspection:

The facility was unable to provide inventory record of their annual inspection and/or repairs for all fire-resistant-rated doors.



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Code Requirement	Statement of Violation
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12 Door Operation

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

(IFC 705.2.4 2018)

Corrected

13 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)

The following violation was observed at the time of re-inspection:

The facility was unable to provide documentation for their fire/smoke damper testing. It was last inspected 2018.

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

19.4 Periodic Inspection and Testing.

19.4.1 Each damper shall be tested and inspected 1 year after installation.

19.4.1.1 The test and inspection frequency shall then be every 4 years, except in hospitals, where the frequency shall be every 6 years

14 Inspection, Testing and Maintenance

Fire detection and alarm systems, emergency alarm systems, gas detection systems, fire-extinguishing systems, mechanical smoke exhaust systems and smoke and heat vents shall be maintained in an operative condition at all times, and shall be replaced or repaired where defective. Nonrequired fire protection systems and equipment shall be inspected, tested and maintained or removed.

(IFC 901.6 2018)

The following violation was observed at the time of re-inspection:

The following locations are missing escutcheon rings:

1. Resident room 108 - when you walk in - before rooms
2. In hall by resident room 121

The maintenance office has a hanger and stethoscope hanging from the sprinkler pipe.



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Code Requirement

Statement of Violation

15 Testing and Maintenance

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

(IFC 903.5 2009, 2012, 2015, 2018)

The following violation was observed at the time of re-inspection:

The facility was unable to provide quarterly sprinkler reports for their sprinkler system.

16 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)

The following violation was observed at the time of re-inspection:

The facility's kitchen suppression report has multiple deficiencies and is currently yellow tagged.

The facility was unable to provide a correction report.

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Code Requirement

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17 Portable Fire Extinguishers - General Requirements

Portable fire extinguishers shall be selected, installed and maintained in accordance with this section and NFPA 10.

Exceptions:

1. The distance of travel to reach an extinguisher shall not apply. The travel distance to reach an extinguisher shall not apply to the spectator seating portions of Group A-5 occupancies.

2. Thirty-day inspections shall not be required and maintenance shall be allowed to be once every three years for dry-chemical or halogenated agent portable fire extinguishers that are supervised by a listed and approved electronic monitoring device, provided that all of the following conditions are met:

2.1. Electronic monitoring shall confirm that extinguishers are properly positioned, properly charged and unobstructed.

2.2. Loss of power or circuit continuity to the electronic monitoring device shall initiate a trouble signal.

2.3. The extinguishers shall be installed inside of a building or cabinet in a noncorrosive environment.

2.4. Electronic monitoring devices and supervisory circuits shall be tested every 3 years when extinguisher maintenance is performed.

2.5. A written log of required hydrostatic test dates for extinguishers shall be maintained by the owner to verify that hydrostatic tests are conducted at the frequency required by NFPA 10.

3. In Group I-3, portable fire extinguishers shall be permitted to be located at staff locations.

(IFC 906.2 2015, 2018)

The following violation was observed at the time of re-inspection:

The required maintenance for the fire extinguishers in the following areas have not been completed in accordance with NFPA 10:

1. Wellness Office - 3rd floor
2. Hall by resident room 303 *
3. Hall by resident room 319 ✓
4. Hall by resident room 216 *
5. Hall by resident room 218 *
6. Outside smoking area - dated 2018
7. Activity office by E.D - tag is torn - unsure when last done
8. Med tech room - 2nd floor *
9. Hall by resident room 210 *
10. Hall by resident room 208 *
11. TV Lounge - 1st floor
12. Laundry room
13. Hall by resident room 116
14. Class K in the kitchen

18 Unobstructed and Unobscured

Portable fire extinguishers shall not be obstructed or obscured from view. In rooms or areas in which visual obstruction cannot be completely avoided, means shall be provided to indicate the locations of extinguishers.

(IFC 906.6 2015, 2018)

The following violation was observed at the time of re-inspection:

The fire extinguisher by resident room 210 was blocked by a trash can and a wheel chair. *Corrected again at re-inspection ✓

The fire extinguisher in the Laundry room on ground floor was blocked with clothing.



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Address	71 VICTORIA ,	Approval Status	Disapproved
City, State, Zip	Renton, WA 98055	Facility Type	Residential Care

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------------------	------------------------

19 Hangers and Brackets

Hand-held portable fire extinguishers, not housed in cabinets, shall be installed on the hangers or brackets supplied. Hangers or brackets shall be securely anchored to the mounting surface in accordance with the manufacturer's installation instructions. (IFC 906.7 2015, 2018)	Corrected
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20 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 2015, 2018)	Corrected
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21 Unobstructed and Unobscured

Manual fire alarm boxes shall be provided with ready access, unobstructed, unobscured and visible at all times. (IFC 907.4.2.6 2018)	Corrected
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22 Door Opening Force

The force for pushing or pulling open interior swinging egress doors, other than fire doors , shall not exceed 5 pounds (22 N). These forces do not apply to the force required to retract latch bolts or disengage other devices that hold the door in a closed position. For other swinging doors, as well as sliding and folding doors, the door latch shall release when subjected to a 15-pound (67 N) force. The door shall be set in motion when subjected to a 30-pound (133 N) force. The door shall swing to a full-open position when subjected to a 15-pound (67 N) force. (IFC 1010.1.3 2015, 2018)	Corrected
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This document was prepared by Residential Care Services for the Locator website.



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

Business Name Renton Assisted Living
Address 71 VICTORIA ,
City, State, Zip Renton, WA 98055

Provider Number 2614
Approval Status Disapproved
Facility Type Residential Care

On 07/12/2023 the Office of the State Fire Marshal conducted an inspection at your facility.

Code Requirement

Statement of Violation

23 Securing Compressed Gas Containers, Cylinders and Tanks

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)

The following violation was observed at the time of re-inspection:

The following locations have unsecured oxygen tanks:

1. Resident room 106

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Facility Type Residential Care

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Code Requirement	Statement of Violation
24 Fire Drills In all Group I, Group E, and Group R2 Occupancies licensed by the state, at least twelve planned and unannounced fire drills shall be held every year. 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. A detailed written record of all fire drills shall be maintained and available for inspection at all times. When drills are conducted between 9:00 p.m. and 6:00 a.m., a coded announcement may be used instead of audible alarms. Fire drills shall include the transmission of a fire alarm signal and simulation of emergency conditions. The fire alarm monitoring company shall be notified prior to the activation of the fire alarm system for drill purposes and again at the conclusion of the transmission and restoration of the fire alarm system to normal mode. (WAC 212-12-044)	The following violation was observed at the time of re-inspection: The facility was not able to provide documentation for the completion of twelve planned and unannounced fire drills in the previous 12 months.

Next inspection scheduled on or after: 08/11/2023

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

Emily Davis Executive Director
Print Name and Title

Deputy State Fire Marshal Cozetta Christian
2502 112TH E
Tacoma WA 984455104
(360) 584-5796

Signature



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

Business Name	Renton Assisted Living	Provider Number	2614
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Code Requirement

Statement of Violation

1 Administration

On 6/12/2023 an unannounced Fire and Life Safety Code inspection was conducted at Renton Assisted Living by a representative of the Washington State Patrol, State Fire Marshal's Office to determine compliance with all applicable codes.

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

2 Smoking General

The smoking or carrying of a lighted pipe, cigar, cigarette or any other type of smoking paraphernalia or material is prohibited in the areas indicated in Sections 310.2 through 310.8.

(IFC 310.1 2015, 2018)

The following violation was observed at the time of inspection:

The following resident rooms smell of smoke:

1. [REDACTED] (marijuana)
2. [REDACTED]
3. [REDACTED] (found plastic cup with water and cigarette butts inside)
4. [REDACTED]

Facility states they are aware they have residents smoking however can not get them to stop. There is also a complaint investigation open for this. (Complaint # 76598)

3 Compliance with "No Smoking" signs.

Smoking shall not be permitted nor shall a person smoke, throw or deposit any lighted or smoldering substance in any place where "No Smoking" signs are posted.

(IFC 310.5 2015, 2018)

The following violation was observed at the time of inspection:

Residents are currently smoking in the non smoking area outside. They moved all the chairs / ash tray over from the original smoking area.

The facility stated that it is too hard for the residents who are in wheel chairs to get across the parking lot to the smoking area.

4 Burning Objects

Lighted matches, cigarettes, cigars, or other burning objects shall not be discarded in such a manner that could cause ignition of other combustible material.

(IFC 310.7 2015, 2018)

The following violation was observed at the time of inspection:

The "non" smoking area has cigarette butts thrown in the brush and in the garbage can with a plastic liner with other combustible trash in it.



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Code Requirement

Statement of Violation

5 Multiplug Adapters

Multiplug adapters, such as cube adapters, unfused plug strips or any other device not complying with NFPA 70 shall be prohibited. (IFC 604.4 2018)	The following violation was observed at the time of inspection: The maintenance office has an unapproved multi plug adapter on the ceiling - 3rd floor
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6 Installation

Relocatable power tap cords shall not extend through walls, ceilings, floors, under doors or floor coverings, or be subject to environmental or physical damage. (IFC 604.4.3 2018)	The following violation was observed at the time of inspection: The business manager's office has a power strip dangling by it's cord. behind desk. - 2nd floor
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7 Extension Cords

Extension cords and flexible cords shall not be a substitute for permanent wiring and shall be listed and labeled in accordance with UL 817. Extension cords and flexible 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 604.5 2018)	The following violation was observed at the time of inspection: The following locations have extension cords in use: 1. Resident room 217b - Corrected at time of inspection 2. Laundry room - 1st floor
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8 Unapproved conditions

Open junction boxes and open-wiring splices shall be prohibited. Approved covers shall be provided for all switch and electrical outlet boxes. (IFC 604.6, 2018)	The following violation was observed at the time of inspection: The facility has an open cable box located on the ceiling - 1st floor exit South side Resident room 312 has a broken cover plate on a cable box. On wall before you enter rooms.
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Code Requirement

Statement of Violation

9 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)

The following violation was observed at the time of inspection:

The facility was unable to provide record of their annual fire wall inspection and/or repairs for all fire-resistant-rated construction.

10 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 2018)

The following violation was observed at the time of inspection:

The Salon door has two small penetrations in it - at the door handle.

11 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)

The following violation was observed at the time of inspection:

The facility was unable to provide inventory record of their annual inspection and/or repairs for all fire-resistant-rated doors.



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Code Requirement

Statement of Violation

12 Door Operation

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

(IFC 705.2.4 2018)

The following violation was observed at the time of inspection:

HWFD 3N exit door didn't latch properly when tested -by room 307

13 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)

The following violation was observed at the time of inspection:

The facility was unable to provide documentation for their fire/smoke damper testing. It was last inspected 2018.

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

19.4 Periodic Inspection and Testing.

19.4.1 Each damper shall be tested and inspected 1 year after installation.

19.4.1.1 The test and inspection frequency shall then be every 4 years, except in hospitals, where the frequency shall be every 6 years.

14 Inspection, Testing and Maintenance

Fire detection and alarm systems, emergency alarm systems, gas detection systems, fire-extinguishing systems, mechanical smoke exhaust systems and smoke and heat vents shall be maintained in an operative condition at all times, and shall be replaced or repaired where defective. Nonrequired fire protection systems and equipment shall be inspected, tested and maintained or removed.

(IFC 901.6 2018)

The following violation was observed at the time of inspection:

The maintenance office has a hanger and stethoscope hanging from the sprinkler pipe.

The following locations have dirty sprinkler heads:

1. Kitchen - throughout
2. Laundry - 1st floor

The following locations are missing escutcheon rings:

1. Resident room 108 - when you walk in - before rooms
2. In hall by resident room 121



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Code Requirement

Statement of Violation

15 Testing and Maintenance

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

(IFC 903.5 2009, 2012, 2015, 2018)

The following violation was observed at the time of inspection:

The facility was unable to provide quarterly sprinkler reports for their sprinkler system.

Staff stated they stopped last year when they switched contractors.

16 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)

The following violation was observed at the time of inspection:

The facility's kitchen suppression report has multiple deficiencies and is currently yellow tagged.

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Code Requirement

Statement of Violation

17 Portable Fire Extinguishers - General Requirements

Portable fire extinguishers shall be selected, installed and maintained in accordance with this section and NFPA 10. Exceptions: - The distance of travel to reach an extinguisher shall not apply. The travel distance to reach an extinguisher shall not apply to the spectator seating portions of Group A-5 occupancies. - Thirty-day inspections shall not be required and maintenance shall be allowed to be once every three years for dry-chemical or halogenated agent portable fire extinguishers that are supervised by a listed and approved electronic monitoring device, provided that all of the following conditions are met: - Electronic monitoring shall confirm that extinguishers are properly positioned, properly charged and unobstructed. - Loss of power or circuit continuity to the electronic monitoring device shall initiate a trouble signal. - The extinguishers shall be installed inside of a building or cabinet in a noncorrosive environment. - Electronic monitoring devices and supervisory circuits shall be tested every 3 years when extinguisher maintenance is performed. - A written log of required hydrostatic test dates for extinguishers shall be maintained by the owner to verify that hydrostatic tests are conducted at the frequency required by NFPA 10. - In Group I-3, portable fire extinguishers shall be permitted to be located at staff locations. (IFC 906.2 2015, 2018)	The following violation was observed at the time of inspection: The required maintenance for the fire extinguishers in the following areas have not been completed in accordance with NFPA 10: - Wellness Office - 3rd floor - Hall by resident room 303 - Hall by resident room 319 - Hall by resident room 216 - Hall by resident room 218 - Outside smoking area - dated 2018 - Activity office by E.D - tag is torn - unsure when last done - Med tech room - 2nd floor - Hall by resident room 210 - Hall by resident room 208 - TV Lounge - 1st floor - Laundry room - Hall by resident room 116 - Class K in the kitchen
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18 Unobstructed and Unobscured

Portable fire extinguishers shall not be obstructed or obscured from view. In rooms or areas in which visual obstruction cannot be completely avoided, means shall be provided to indicate the locations of extinguishers. (IFC 906.6 2015, 2018)	The following violation was observed at the time of inspection: The fire extinguisher by resident room 210 was blocked by a trash can and a wheel chair. *Corrected at time of inspection
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Code Requirement

Statement of Violation

19 Hangers and Brackets

Hand-held portable fire extinguishers, not housed in cabinets, shall be installed on the hangers or brackets supplied. Hangers or brackets shall be securely anchored to the mounting surface in accordance with the manufacturer's installation instructions.

(IFC 906.7 2015, 2018)

The following violation was observed at the time of inspection:

The Laundry room fire extinguisher on the 1st floor was found on the ground.

20 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 2015, 2018)

The following violation was observed at the time of inspection:

The following fire extinguishers are mounted over the required 5 feet:

1. Activity office by E.D office
2. Med Tech room

21 Unobstructed and Unobscured

Manual fire alarm boxes shall be provided with ready access, unobstructed, unobscured and visible at all times.

(IFC 907.4.2.6 2018)

The following violation was observed at the time of inspection:

The manual pull station was obstructed by a chair and a fake tree. - 1st floor TV lounge room.

*Corrected at time of inspection

22 Door Opening Force

The force for pushing or pulling open interior swinging egress doors, other than fire doors, shall not exceed 5 pounds (22 N). These forces do not apply to the force required to retract latch bolts or disengage other devices that hold the door in a closed position. For other swinging doors, as well as sliding and folding doors, the door latch shall release when subjected to a 15-pound (67 N) force. The door shall be set in motion when subjected to a 30-pound (133 N) force. The door shall swing to a full-open position when subjected to a 15-pound (67 N) force.

(IFC 1010.1.3 2015, 2018)

The following violation was observed at the time of inspection:

The south side exit door on 1st floor requires extra force to open. - Leading to the outside



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Code Requirement

Statement of Violation

23 Securing Compressed Gas Containers, Cylinders and Tanks

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)

The following violation was observed at the time of inspection:

The following locations have unsecured oxygen tanks:

1. Resident room 217b
2. Resident room 106



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Code Requirement

Statement of Violation

24 Fire Drills

In all Group I, Group E, and Group R2 Occupancies licensed by the state, at least twelve planned and unannounced fire drills shall be held every year. 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. A detailed written record of all fire drills shall be maintained and available for inspection at all times. When drills are conducted between 9:00 p.m. and 6:00 a.m., a coded announcement may be used instead of audible alarms. Fire drills shall include the transmission of a fire alarm signal and simulation of emergency conditions. The fire alarm monitoring company shall be notified prior to the activation of the fire alarm system for drill purposes and again at the conclusion of the transmission and restoration of the fire alarm system to normal mode.

(WAC 212-12-044)

The following violation was observed at the time of inspection:

The facility was not able to provide documentation for the completion of twelve planned and unannounced fire drills in the previous 12 months.

Next inspection scheduled on or after:

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

Unavailable For Signature
Print Name and Title

Deputy State Fire Marshal Cozetta Christian
2502 112TH E
Tacoma WA 984455104
(360) 584-5796

Cozetta
Signature