

Project Comment Form

June 4, 2020



Construction Review Services

Project Information:

CRS# 61065338

Fieldstone Messenger House Memory Care
Chapter 388-78A WAC Assisted Living Facility

PO Box 47852
111 Israel Rd. SE.
Tumwater, WA. 98501
www.doh.wa.gov/crs
tel. 360-236-2944
fax. 360-236-2321

Project Title: Convert NH To ALF

Project 10861 NE Manitou Park Blvd
Location: Bainbridge Island, WA. 98110

Electronic Submittal. Plans will be delivered to:

Name: Jennifer Pearson
Email: jennifer@carlettiarchitects.com
Phone #: 360-424-0394

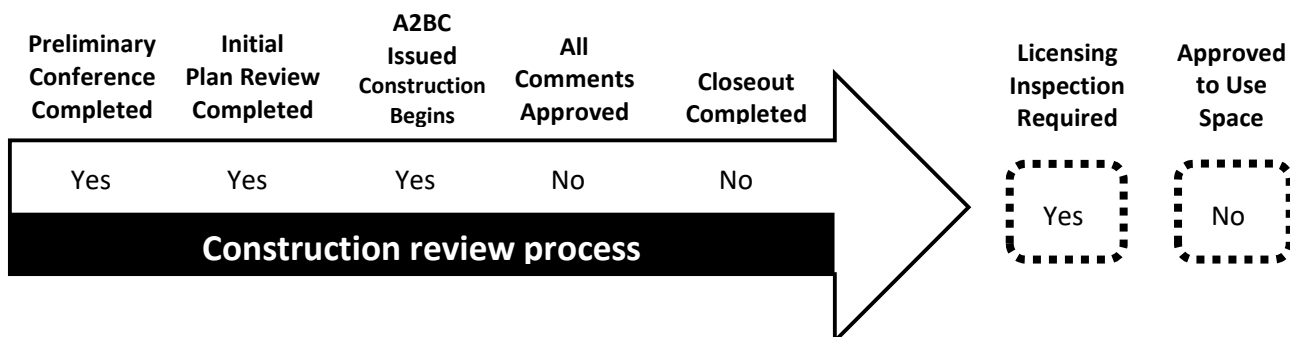
Local Permit #:

Key Contacts:	Company	Name	Phone	Email
DOH Reviewer		Janet Smoot	(360) 236-2970	janet.smoot@doh.wa.gov
Facility Contact:	Cascadia Development	Doug Ellison	509-961-7942	doug@cascadiadevelopment.com
Facility Admin.:	Cascadia Development	Justin Younker	509-426-2756	justin@cascadiadevelopment.com
Arch./Eng.:	Carletti Architects	Jennifer Pearson	360-424-0394	jennifer@carlettiarchitects.com
Other:		Paul Smedberg	920-907-6441	psmedberg@csmith.com
Other:				
Other:				
Other:				
Local AHJ:	City of Bainbridge Island	Todd Cunningham	206-780-3755	tcunningham@bainbridgewa.gov
Add'l Copies To:	<input type="checkbox"/> L&I Electrical Section <input type="checkbox"/> L&I Factory Assembled Structures <input type="checkbox"/> Local Electrical AHJ			

Project Status:

-Authorized to Begin Construction-
Comments are NOT APPROVED

The Construction Documents have been reviewed and found acceptable. All plan review comments have not been approved. **Construction can begin**, subject to construction permitting from the local building official. See page two for important next steps.



To avoid delays it is important you follow these Next Steps:

Respond to Comments:
<ul style="list-style-type: none">• Revise project documents to be compliant with applicable rules and the review comments attached to this form.• Respond, in writing, to the comments attached to this form.• Submit revised plans and responses to comments to the Construction Review Services.
During Construction
<ul style="list-style-type: none">• Maintain a copy of the A2BC drawing set on the project site.• Submit any changes to the A2BC set to CRS for review and approval prior to executing the work.

If you have any questions please contact Construction Review Services (360) 236-2944. You can monitor project status and history at www.doh.wa.gov/crs.

Project Details (for internal use only)

Occupancy Type IBC: I-1 IBC: A-2 IBC: B NFPA 101:		Construction Type IBC: 5-A IBC: IBC: NFPA 101: NFPA 101:		Fed Code: Building Code: 2015 IBC Licensing Code:	
Number of Beds Added:		Removed:		CON Required? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No CON Approved <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Req'd	Provided	Type/category	Are Hospital inpatients seen at this location? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Automatic Fire Sprinkler System:	Yes		13	Are planned residents/patients incapable of self preservation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Automatic Fire Alarm System:	Yes			If yes, how many?	
Emergency Power System:	No	Yes	Type 1 EES	Is sedation provided? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Medical Gas System:	No			If yes, max. planned level?	
Smoke Compartmentation:	Yes	Yes		Is space Medicare certified? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Building Department contacted? No			Estimated construction completion:		
REVIEW NOTES	Preliminary completed under separate number CRS 60923305				
	The project for licensing includes the following portions: Main floor with 35 residential units (39 beds), the entry, the kitchen in the basement level and the elevator and corridors that connect the kitchen to the main floor entry area. This building has additional rooms but they are not being licensed for residential care at this time.				
DSHS	For Assisted Living Facilities Only			Total Sleeping rooms	
	Minimum required area of day rooms/areas			Total Approved beds	
	Total area provided in day rooms/areas			Total Contract beds	
NOTES TO SURVEY	<p>SURVEYOR - 1. Please discuss response 7b (locking doors at night) with the facility to ensure it aligns with the intent of the rule</p> <p>2. Please see comment 17 for chairs provided for each resident. The 2-bedroom units are divided in half with both chairs near one of the beds. The other bed does not have a chair in its surrounding area. Does this follow the intent of the rule?</p>				

Plan Review Comments:

Comment ID#	Approved	Not Approved	
1		<input checked="" type="checkbox"/>	<p>Provide a single pdf of Fire Alarm (FA) plans as reviewed and stamped Approved by the local AHJ (City of Bainbridge Island). Drawings must bear the City Approval Stamp including signature and date of review Approval. Upon review of this 'stamped Approved' set of plans this comment will be marked Deemed (effectively same as Approved). The submittal shall include all product data cut sheets and applicable calculations for a complete submittal. Plans, including any system verification, must bear the stamp of a Certified NICET III Fire Alarm Designer, WA FPE or WA Professional Engineer (PE) Electrical. 2015 IFC 907.1</p> <p><i>Response 05.18.2020 – (2) Two complete fire alarm plans will be submitted during the construction process for DOH approval prior to installation. The submittal during construction will include all of the above noted information required. A final Kitsap County fire marshal stamped approved fire alarm set is required for final DOH approval. The contractor will submit this to DOH upon receipt of the final City of Bainbridge Island stamped approved fire alarm plans.</i></p> <p>Deferred 05.29.2020 – Please only submit a single (1) pdf of the stamped plans.</p>
2		<input checked="" type="checkbox"/>	<p>Provide a single pdf of Fire Sprinkler (FS) plans as reviewed and stamped Approved by the local AHJ (City of Bainbridge Island). Drawings must bear the City Approval Stamp including signature and date of review Approval. Upon review of this 'stamped Approved' set of plans this comment will be marked Deemed (effectively same as Approved). The submittal shall include all product data cut sheets and applicable calculations for a complete submittal. Plans, including any system verification, must bear the stamp of a WA FPE or WA Professional Engineer (PE) Mechanical. 2015 IFC 903.1</p> <p><i>Response 05.18.2020 – (2) Two sets of Fire Sprinkler working drawings and calculations will be submitted to DOH during construction for approval prior to installation. A final Kitsap County contractor will submit this to DOH upon receipt of the final City of Bainbridge Island stamped approved fire sprinkler plans and calculations prior to installation.</i></p> <p>Deferred 05.29.2020 – Please only submit a single (1) pdf of the stamped plans.</p>
3	<input checked="" type="checkbox"/>		<p>Note: This project was reviewed to the basic licensing requirements in WAC 388-78A. No additional overlay requirements for other contract types was not reviewed at this time.</p> <p>If the facility wants to be reviewed to one of the following contracts, please indicate that in your response:</p> <ol style="list-style-type: none"> 1. WAC 388-110-140 Assisted Living 2. WAC 388-110-220(1) Enhanced Adult Residential Care (EARC) 3. WAC 388-110-220(2) & (3) Enhanced Adult Residential Care – Specialized Dementia (EARC-SDC) 4. WAC 388-110-240 Adult Residential Care

			<p><i>Response 05.18.2020 – No Overlay requirements are required for this project.</i></p> <p>Approved 05.29.2020 – based on the response above no additional contract requirements will be applied to this project.</p>
4	<input checked="" type="checkbox"/>		<p>Provide a copy of your Local Building Permit from the City. Obtain this permit prior to the start of any construction. Retain City permit records for use in your project closeout procedures when construction is complete.</p> <p><i>Response 05.18.2020 – This project is currently in the Building Permit Review process with the City of Bainbridge Island. No construction will start until building permits are received.</i></p> <p>Noted 05.29.2020</p>
5			<p>FYI only – Future submissions with a construction value over \$250,000 are required to have a preconstruction meeting before submission. New rules for WAC 388-78A were adopted in January 31, 2020. This project will fall under those new rules as it was submitted after the Jan 31, 2020 date.</p> <p><i>Response 05.18.2020 - A technical assistance meeting was performed and comments were generated on December 13, 2018. How does the preconstruction meeting differ?</i></p> <p>Note 05.28.2020 - You are correct. A technical assistance was provided for a project with this address to assess the viability of turning an existing Nursing Home into an Assisted Living Facility. The project was subsequently closed due to inactivity.</p> <p>Technical Assistance is the same as a preconstruction meeting. The big difference for this project is the Technical Assistance should assess the current design (Drawings should be at 50% completion) for the assisted living facility</p> <p>This comment was really to alert you that new rules for WAC 388-78A were adopted on January 31, 2020 and this is one of the items that is now required for Assisted Living facilities. Before it was optional.</p>
6	<input checked="" type="checkbox"/>		<p>The functional program must inform the design process. WAC 388-78A-2361 (1)</p> <ul style="list-style-type: none"> a) The functional program identifies a Living room / Great Room with space for socializing and a fireplace. Furnishings consist of chairs, couches, end tables, bookcases and wall hangings. b) A passage in the FP under 'Fireplace and Emergency Heat' states, there are no fireplaces in the memory care portion of this site. A fireplace is shown in Sitting area #400 and on sheet A6.1 detail 12. <ul style="list-style-type: none"> • Coordinate the plans and FP to align more closely.

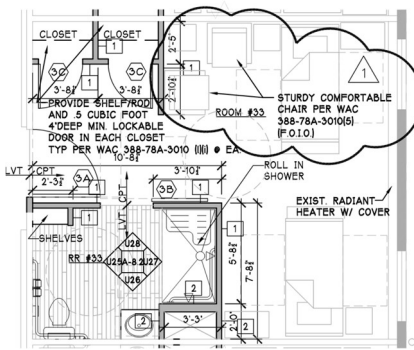
		<ul style="list-style-type: none"> Identify, on the plan, the location of this room (Great Room / Living room) where residents may independently sit and socialize without staff escorting them. <p><i>Response 05.18.2020 – Please review the updated FP showing correct information as related to the plans and how the spaces will be utilized and activities will be performed. Areas designed for socialization are not restricted to requiring residents to be escorted to and from these places.</i></p> <p>Approved 05.29.2020 – based on the response above and the revised functional program.</p>
7	<input checked="" type="checkbox"/>	<p>The assisted living facility must provide space and support necessary for each resident to engage in independent or self-directed activities. WAC 388-78A-2180(1)(a)</p> <p>The current design only allows access to the Townsquare when the resident is escorted. No Living room or activity common space is provided on each wing other than the circulation (corridor) path. The 9 foot corridor between units is not considered a gathering or socializing space. Past designs have included a large social gathering space (20+ feet wide) on each wing for residents to gather and socialize. This design does not provide the common space for a ‘homelike’ design for residents. This space must be independent of staff /family escort. See comment 8 below for common area requirements.</p> <p>Below are additional concerns with the proposed design:</p> <p>a) Doors 20 & 30 are identified as controlled egress doors. This cuts off the Dining and activity space from all residents unless they are escorted. <i>Response 05.18.2020 – Doors 20 & 30 are egress doors that will be open unless the fire alarm is tripped as these doors are on Magnetic hold opens tied to the fire alarm as stated on the door schedule on Sheet A-2.9 “LEVER HANDLE W/PANIC BAR HARDWARE/MAG HOLD OPEN TIED TO FIRE ALARM FOR RELEASE, SMOKE BASKET, PROTECTED EXIT (SEE NOTE #11)”</i></p> <p>Not Approved 05.29.2020 – Doors schedule, sheet A2.9 identifies these doors with Note 11 for controlled egress. These doors are not allowed to be controlled so residents can have access without staff escort (as indicated in the FP). Residents must have access to common areas at all times. The doors can be on Mag Hold opens and released if there is a fire event and as an Occupancy/Smoke Barrier door. Removed the controlled egress portion of these doors.</p> <p>b) Doors 24 & 25 at the Townsquare exit to the courtyard are open at all times. Will residents be allowed to enter this space from the outdoor area? <i>Response 05.18.2020 – Yes, residents will be allowed to access the courtyard via door 24 & 25, the residents can go in and out through these doors. At the facilities designated night routine these doors will be secured to keep residents safe. There is also a call station at these doors (refer to Note N-1.0) should there be any reason for a person needing assistance.</i></p> <p>Approved 05.29.2020 – Residents are allowed to go in and out through these doors.</p> <p><u>RECOMMEND</u> discussing the locking of the doors at night with the RCS Field Manager. Per WAC 388-78A-2381(2)(d) residents must be able to access the outdoor area with minimal assistance except in times of inclement weather, dangerous construction or maintenance activities or other temporary environment factors create an unsafe environment.</p>

		<p>The intent of the rule is to allow residents access at all times other than those times when personal safety is of concern.</p> <p>c) Doors 23 and 31 at the ends of the resident rooms do allow access to a secure courtyard but <u>the courtyard is not visible</u> from these doors. Residents need the visible cueing aspects to understand a courtyard is available to them. Doors at the side of each wing do not clearly cue the resident about entering and exiting the outdoor space.</p> <ul style="list-style-type: none"> • What type of hardware is installed on these existing doors? • How will residents know the outdoor area is available to them if they can't 'see' it? • How will residents know they are to enter their wing along the sides of the building instead of through the Townsquare doors? <p><i>Response 05.18.2020 – At doors 23 and 31 there will be signage stating there is access to the courtyard from these corridor doors. Likewise there will be signage at the courtyard indicating which wing can be accessed from the outside. Also available at these exterior doors are common area call stations located inside and outdoor call stations located on the outside of the building should anyone need assistance in or out of the building.</i></p> <p>Approved 06.01.2020 – based on the understanding these doors are not the only doors available to the residents for accessing the courtyard.</p> <p>d) How will the resident using the courtyard be observed for safety in this area? No views of the courtyard are visible from inside the resident wing corridors.</p> <p><i>Response 05.18.2020 – This facility is staffed 24/7 and views out to the courtyard are readily available from the Townsquare with large areas of glazing. All of the doors accessing the courtyard are equipped with contact sensors to alert staff of door usage (refer to sheet N-2.0, Door/Window Tx) and staff will have a routine of physically checking the courtyard.</i></p> <p>Approved 06.01.2020 – based on the response above and the understanding residents can use the townsquare to courtyard entry. The townsquare is where staff will be on a routine basis.</p> <p><i>Response 05.18.2020 – Please review the updated FP showing correct information as related to the plans and how the spaces will be utilized and activities will be performed. Areas designed for socialization, such as the Townsquare and Dining are not restricted access for residents, as they can come and go as they please.</i></p>
8	<input checked="" type="checkbox"/>	<p>The assisted living facility must provide a minimum of twenty square feet per resident of common areas. WAC 388-78A-3050(2)</p> <p>Since the Townsquare is controlled egress only, the space in that area cannot count towards the common area spatial requirement.</p> <ul style="list-style-type: none"> • The units are large enough to house 2 residents each so the maximum count of residents for Smoke Compartment A is 36 residents. Provide a minimum of 720 sq ft of common area within Smoke Compartment A. The circulation space (corridor) cannot be used towards this square footage. You have 2 seating areas of approximately 60 and 120 sq ft each. This is not adequate. Those areas can be attributed towards the 720 sq ft requirement.

		<ul style="list-style-type: none"> Smoke compartment C can house 34 residents. Please follow the path outlined above for the common area requirement based on the number of residents allowed in each unit. <p><i>Response 05.18.2020 – The facility was previously licensed for 39 care recipient beds. The proposed plan continues to show the same number of care recipients. Please review the updated FP showing correct information as related to the plans and how the spaces will be utilized and activities will be performed. Areas designed for socialization, such as the Townsquare and Dining area are not restricted access for residents, as they can come and go as they please.</i></p> <p><i>Please refer to sheet A-2.4A that shows the common area that residents can use. There are 39 care recipients with 20 s.f. per recipient, $39 \times 20 = 780$ s.f. total common area required, 3,051 s.f. provided as shown on sheet A-2.4A.</i></p> <p>Approved 06.02.2020 – Once the controlled egress hardware is removed from the doors to the Townsquare, the facility will have plenty of common space available to the residents. This comment is approved based on the removal of the controlled egress hardware from doors 20 & 30.</p> <p>FYI – the numbers allowed in the previous occupancy – Nursing Home – are not the same requirements as an Assisted Living facility. This is a new Assisted Living Facility and as such the current rules apply to all requirements necessary for licensing.</p>
9	<input checked="" type="checkbox"/>	<p>Refuge areas shall be provided within each smoke compartment that accommodates the largest occupant load for the adjoining compartments. 2015 IBC 420.4.1</p> <p>Recalculate the number of occupants for all Smoke Compartments based on the information below. The table lists 0 care residents for smoke compartment B. The refuge area is not based on the number of occupants typically found in the ‘occupancy’ type referenced by the use. Smoke compartment B will be used by care recipients, staff and visitors.</p> <p>Each unit is capable of having 2 residents per room based on the size of each unit. Smoke compartment ‘A’ could have 36 residents. Smoke Compartment ‘C’ could have 34 residents. That is a total of 70 care recipients in the ‘Townsquare’ area. Those would be calculated at 15 sq ft per person. Add in the number of staff at the maximum staffing level and add 1 visitor per resident at 6 sq ft each.</p> <p>Please call if you have questions on how to calculate this number.</p> <p><i>Response 05.18.2020 – Please refer to clouded area of revised sheet A-0.02. This facility was previously licensed for 39 care recipient beds. The proposed plan continues to show the same number of care recipients. As shown on sheet A-0.02. Each smoke compartment has the ability to hold the total number of facility occupants based upon 15 s.f. per care recipient and 6 s.f. per other occupants (visitors and staff).</i></p> <p>Approved 06.02.2020 – based on revised calculations on sheet A-0.02.</p>
10	<input checked="" type="checkbox"/>	<p>Provide information on the existing hardware for doors: #9 – Elec Room #10 – Elec Room</p>

		<p>#23 – end of corridor (Smoke Compartment A). Sheet N-2.0 identifies protected Exit. What does this mean?</p> <p>#31 – end of corridor (Smoke Compartment C). Sheet N-2.0 identifies protected Exit. What does this mean?</p> <p>WAC 78A-2821(2)(ii)</p> <p><i>Response 05.18.2020 – The existing door #9 and #10 that access the existing electrical room are both equipped with door closers, lever handles with storage locks.</i></p> <p><i>On Sheet N-2.0 doors #23 and #31 located at the end of the corridors are labeled as a protected exit. This label is provided by the Nurse Call company, Stanley Healthcare, as it refers to these doors as having their equipment installed, such as a call station as these two doors have.</i></p> <p>Approved 06.02.2020 – based on the response above.</p>		
11	<input checked="" type="checkbox"/>	<p>Fire doors shall be latching and self – or automatic closing. 2015 IBC 716.5.9</p> <p>Confirm the following doors are self-latching with closers:</p> <table><tr><td>#11 – Soiled Utility #13 – Clean Utility #14 – Storage #15 – Staff toilet #16 – Janitor / Stor</td><td>#17 – Spa #18 – Stor #19 – Nurse station #22 – Meds #32 – Where is this door? It is listed as a 20 min exterior door?</td></tr></table> <p><i>Response 05.18.2020 – The fire rated interior doors all have closers as shown on sheet A-2.9 on the door schedule there is a column “CLSR”, which stands for Closer. All have lever handles and some type of lock, specified on the door schedule, latches are assumed to be included. Door #32 is the exterior door to the existing mechanical room 415. This door does not need to be a rated exterior door, this has been corrected on a revised door schedule.</i></p> <p>Not Approved 06.02.2020 – Door #13 is identified without a closer. Please correct this on the door schedule, Sheet A-2.9. The other doors are approved per the revised door schedule.</p>	#11 – Soiled Utility #13 – Clean Utility #14 – Storage #15 – Staff toilet #16 – Janitor / Stor	#17 – Spa #18 – Stor #19 – Nurse station #22 – Meds #32 – Where is this door? It is listed as a 20 min exterior door?
#11 – Soiled Utility #13 – Clean Utility #14 – Storage #15 – Staff toilet #16 – Janitor / Stor	#17 – Spa #18 – Stor #19 – Nurse station #22 – Meds #32 – Where is this door? It is listed as a 20 min exterior door?			
12	<input checked="" type="checkbox"/>	<p>Equip each resident sleeping room with individual temperature controls located between eighteen and forty-eight inches above the floor capable of maintaining room temperature plus or minus 3°F from setting, within a range of minimum 60°F to a maximum 85°F. WAC 388-78A-2990 (5)</p> <p>Ref: Sheet M001, Note 2 (HVAC general notes) identifies 5’-0” height for thermostats. Sheet M401 identifies thermostats in new rooms are to be installed at 42” height. Confirm the existing rooms have the thermostats located at the proper height.</p>		

		<p>Enlarged unit plans indicate the existing radiant heater will remain. Sheet M401 indicates they will be removed. Clarify which is correct.15</p> <p><i>Response 05.18.2020 – 1. All thermostats to be mounted at 42". General notes revised on Sheet M001, see updated drawings.</i></p> <p><i>2. Radiant heater covers will be replaced only, not entire fin tube heater. See M401 Keynote 1 for cover removal and Keynote 6 for cover replacement.</i></p> <p>Approved 06.02.2020 – based on the response above and revised plans provided.</p>
13	<input checked="" type="checkbox"/>	<p>Ducts and air transfer openings that penetrate the ceiling membrane of a fire-resistance-rated ceiling assembly shall be protected with a listed ceiling radiation damper. 2015 IBC 717.6.2 (2)</p> <p>Provide a listed ceiling radiation damper for all ducts that penetrate the one-hour ceiling assembly. Ref, Sheet A0.0 - Ceiling is 1 hour assembly.</p> <p><i>Response 05.18.2020 – Fire dampers in applicable areas are show on Sheet M201A and M201B. Updated information about listed radiation dampers added to drawings, see revised sheets M201A and M201B. Detail for construction of damper has been revised, see detail 5/M501</i></p> <p>Not Approved 06.02.2020 – New diffusers/grilles show new ceiling radiation dampers. Confirm all the existing diffusers/grilles are equipped with ceiling radiation dampers to ensure the 1-hour assembly penetrations are correctly installed.</p>
14	<input checked="" type="checkbox"/>	<p>Confirm a grease interceptor is provided from the kitchen in accordance with the local codes. WAC 388-78A-2970(3)(c)</p> <p>Sheet P501 shows details (4 & 5) for grease interceptors. Where on the plan are these located?</p> <p><i>Response 05.18.2020 – Confirmed that grease interceptors are provided. Refer to sheet P401 for locations and respective detail callout.</i></p> <p>Approved 06.02.2020 – based on the response above and locations noted on plans.</p>
15	<input checked="" type="checkbox"/>	<p>Provide closers for the unit doors per 2014 IBC 716.5.9.</p> <p>WA amendment allows unit doors for I-1, condition 2 to omit the closer if sleeping units are not equipped with cooking appliances. Microwaves are considered cooking appliances.</p> <p>The Functional Program identifies a kitchen sink, refrigerator and microwave will be provided by the facility. Clarify if microwaves will be used inside the sleeping unit.</p> <p><i>Response 05.18.2020 – Please review revised FP, none of the resident units will have a kitchen, nor will the units be equipped with microwaves. Therefore, WA amendment for I-1, condition 2 allowing door closers to be omitted at resident units does apply as shown on sheet A-2.9.</i></p>

		<p>Not Approved 06.02.2020 – This facility meets 4 of the 5 requirements for allowing the entry doors to remain without closers. Confirm the facility meet the requirement for smoke detection system interconnected with a smoke detection system required by Section 907.2.6.1. (WA Amendment 716.5.9 (3)(3.5).</p> <p>These can't be separate smoke detectors in the rooms but must be interconnected with the entire system. Once the Fire Alarm plans are submitting showing this condition, this comment can be approved. Please ensure the Fire Alarm contractor is aware of this requirement.</p>
16	<input checked="" type="checkbox"/>	<p>A lockable drawer, cupboard, or other secure space measuring a least one-half cubic foot with a minimum dimension of four inches shall be provided in every sleep room. WAC 388-78A-3010 (8)(e)</p> <p>Enlarged unit plans identify a .5 cubic foot 4" deep min lockable door in each closet. Is this to be a drawer or a separate cupboard inside the closet? Ref Sheet A2.7</p> <p><i>Response 05.18.2020 – It is to be a separate drawer or a cupboard that meets requirements set forth by WAC 388-78A-3010(8)(e)</i></p> <p>Deferred 06.03.2020 - This item will be verified during inspection or by photograph or by design on the plans.</p>
17	<input checked="" type="checkbox"/>	<p>Provide a sturdy chair for each resident in the sleeping room. WAC 388-78A-3011 (3)</p> <p>Sheet A-2.8 Plan-5 does not show a chair for each resident.</p> <p><i>Response 05.18.2020 – Please review revised plan on sheet A-2.8 showing that all companion units will have at least one sturdy chair per residents.</i></p> <p>Approved 06.03.2020 – This item will be evaluated by the RCS staff during survey. The chair is not on the same side of the room as the bed and there is clearly a defined area for each bed area.</p>  <p>See note for Surveyors on sheet 3.</p>
18	<input checked="" type="checkbox"/>	<p>Recommend providing each operable window with non-defeatable – window limitors that open no more than 4 inches.</p>

			<p><i>Response 05.18.2020 – Please refer to sheet A-2.10 Window Schedule. All of the new operable windows have noted a limiter to be installed for a max opening of 4”. In addition #11 on the window notes has been added and clouded which states “ALL EXISTING OPERABLE WINDOWS TO HAVE NON-DEFEATABLE WINDOW LIMITERS THAT ALLOW FOR NO MORE THAN A 4” OPENING”.</i></p> <p>Approved 06.03.2020 – Based on the response above and the revised plans provided.</p>
19	<input checked="" type="checkbox"/>		<p>The facility must maintain the premises free of hazards. WAC 388-78A-2700 (1)</p> <p>A gas fireplace is shown in Sitting Area #400 with a raised hearth and a screen (sheets A8.0 & A6.1). Demonstrate how this can be considered safe and free from burns for the residents. A good rule of thumb is ensuring the screen reaches no more than 120°F which is the scalding temperature of water.</p> <p><i>Response 05.18.2020 – Please refer to drawing 10/A8.0 for note “Gas fire place 36x24 with screen with additional free standing screen to protect residents from heat. Hearth extension also helps to keep residents back from the fireplace”.</i></p> <p>Not Approved 06.03.2020 – This will need to be verified during inspection with the fireplace turned on. Nothing indicates the screen will not reach a high temperature that will harm the residents if they touch the screen.</p>
20	<input checked="" type="checkbox"/>		<p>Provide a laundry area or develop and implement policy and procedure to ensure residents have access to an area where residents may do their personal laundry that is equipped with:</p> <ul style="list-style-type: none"> • A utility sink • A table or counter for folding clean laundry • At least one washing machine and one clothes dryer, • Mechanical ventilation to the outside • Arranged to reduce the chances of soiled laundry contaminating clean laundry. <p>WAC 388-78A-3040(7)</p> <p><i>Response 05.18.2020 – Please refer to the revised FP page 4, stating “Residents who wish to do their own laundry will have supervised access to the laundry room.” The laundry room is located in the room labeled Clean 403 of the enlarged floor plan meets the requirements of WAC 388-78A-3040(7).</i></p> <p>Approved 06.03.2020 – based on the response above and plans showing ‘S2’ sink in the Clean utility is schedule to be a 25” x 22” sink which could qualify as a utility sink.</p>
21			<p>Recommend providing handrails in the corridors to provide a safe built environment.</p> <p><i>Response 05.18.2020 – Please refer to Sheets A-2.5 and A-2.6 for detail call-out in corridors 16/A-6.0) that refers to detail 16 on sheet A-6.0 detailing handrails.</i></p>

22	<input checked="" type="checkbox"/>	<p>Carbon monoxide detection shall be installed in new buildings where fuel-burning appliances and fuel burning fireplaces are installed. 2014 IBC 915.1.2</p> <p><i>Response 05.18.2020 – Carbon monoxide detection shall be provided under the Fire Alarm scope. Fire alarm is a deferred submittal and will be provided as response to Comment #1.</i></p> <p>Deferred 06.03.2020</p>
23	<input checked="" type="checkbox"/>	<p>Provide emergency lighting in resident units, common areas and other areas of the facility where residents may be during a power outage. WAC 388-78A-2980 (1), WAC 388-78A-2700 (1)(d)</p> <p>Noted in Project narrative, sheet E302, some common areas are on Emergency lighting requirements. Nothing is mentioned about resident units. Each unit does show a symbol that looks like an emergency / battery powered light. Confirm this symbol is the emergency light fixture.</p> <p><i>Response 05.18.2020 – Confirmed, fixture type EM in the resident rooms is an emergency battery powered light fixture. Refer to Sheet E301A and E301B for lighting plans. Refer to E002 for Luminaire Schedule and description of fixture type EM.</i></p> <p>Approved 06.03.2020 – Resident units do have emergency lighting and common areas are covered with fixtures on the emergency generator.</p>
24	<input checked="" type="checkbox"/>	<p>Equip each assisted living facility with a backup source of heat in enough common areas to keep all residents adequately warm during interruptions of normal heating operations. WAC 388-78A-2990 (3)</p> <p><i>Response 05.18.2020 – Confirmed, the HVAC unit serving the dining room and common core area is powered by the backup generator. Refer to Sheet E202, Keynote 2, for location and information. Refer to Sheet E601, Keynote 12, for information regarding feeding this HVAC unit from the backup generator.</i></p> <p>Approved 06.03.2020 – based on the response above and plans that confirm keynote 2 on sheet E202.</p>
25	<input checked="" type="checkbox"/>	<p>Contact CRS Plans Reviewer Janet Smoot at 360.236.2970 to schedule substantial completion inspection within 2 weeks of completion. Please contact 3-4 weeks before completion to coordinate schedules. This comment will carry with the main comment file and will remain 'open' until construction is complete. IBC 110</p> <p>This may be completed as an electronic inspection based on the current environment.</p>

26	<input checked="" type="checkbox"/>	<p>The FP identifies 3 emergency generators on this campus. Only one emergency generator is shown on the one-line diagrams.</p> <p>Please provide clarification, as Emergency Generator requires specific information, inspections, fuel requirements, and wiring not provided in either the functional program, specifications or the electrical plan. Please clarify if your system is to be an “Emergency Generator/ Standby Generator” or if the generator is to provide “Backup power for lighting and heat. The system as noted is a Standby or Emergency Generation system that is not required for an Alf or EARC. A “Backup System” would meet the requirements and not involve NFPA 70/700 Emergency Systems and 701 Legally Required Standby Systems. If this is the case, then additional information specified in the aforementioned section of the NFPA must be provided.</p> <p>There are, however, fewer requirements if you choose to revise your documentation/drawings to reflect a “Backup System” as the facility will not be required to provide power to your emergency lighting, or provide a separate source of fuel capable of support for 96 hours, as you will be required to do so if the generator is identified as a Standby system. If you choose to modify the naming of the generation system, please ensure you do so to ALL documents referencing the Backup system. Also please feel free to follow up with CRS if you have questions.</p> <p><i>Response 05.18.2020 – There are currently (3) generators on the campus. Only (1) of those generators will be serving the Memory Care wing, which is the subject of this code review. This generator is shown on the one-line diagram on Sheet E601 and will provide backup power for the heating system. Emergency lighting will be provided with integral batteries and not be connected to the generator.</i></p> <p>Approved 06.03.2020 – based on the response above.</p> <p>Note: This response indicates a full L&I review will be required for the emergency generator as it was termed a back-up generator</p>
		Kitchen review
27		<p>The functional program the commercial kitchen will meet King County Health Department codes. This project is not in King County, please update your FP.</p> <p><i>Response 05.18.2020 – Please refer to the revised FP that now reads Kitsap County on page 4.</i></p> <p>Noted 06.03.2020</p>
28	<input checked="" type="checkbox"/>	<p>Provide a housekeeping supply room in proximity to kitchen areas equipped with:</p> <ul style="list-style-type: none"> • Utility sink or equivalent means of obtaining and disposing of mop water, away from food preparation and service areas • Storage for wet mops • Locked storage for cleaning supplies and • Mechanical ventilation to the outside of the assisted living facility. <p>WAC 388-78A-3090 (2)</p>

		<p>Provide a room for this equipment close to the kitchen not in the kitchen.</p> <p><i>Response 05.18.2020 – Please refer to sheet A-2.3 showing all of the existing lower level of the building; including areas adjacent to existing kitchen B100 (the only area where work is taking place on the lower floor). Note that there is an existing Janitor Closet B107 that provides a mop sink, storage for wet mops, locked storage of cleaning supplies and existing exterior ventilation. This is an area we are not touching for building permit / kitchen redesign therefore does not show up on the kitchen plans (K-1 through K-6) so as to not be assumed any work is to take place in any areas beyond the Kitchen on the lower floor.</i></p> <p>Approved 06.03.2020 – based on the response above and plan showing an existing Janitors room close to the kitchen.</p>
29	<input checked="" type="checkbox"/>	<p>Provide a manual pull (actuation device) between 10 feet and 20 feet away on the way to an exit. It shall not be more than 48” and not less than 42 inches above the floor and clearly identified. 2015 IFC 904.12.1.</p> <p>Identify where this is on the plan.</p> <p><i>Response 05.18.2020 – Actuation device is not required per exception to 904.12.1 since hood is covered by automatic sprinkler system. In the event that the existing condition do not meet the Fire Inspection Report, an add alternate has been provided to upgrade the system. See Keynote 4 on M401.</i></p> <p>Not Approved 06.04.2020 – The exception does not exempt facilities from having a manual pull device. The manual pull device is for the fire suppression system for the Type I hood, not the sprinkler system in the room. Provide a manual actuation device located as described above. Or provide more information about the existing hood (or is this a new hood?). Identify how the Type I hood meets the current code. This is a new facility and as such needs to meet the codes currently in place.</p>
30	<input checked="" type="checkbox"/>	<p>Identify, on the plan, where the Type K fire extinguisher is located in the kitchen. 2015 IFC 904.12.5</p> <p><i>Response 05.18.2020 – Please refer to revised sheet A-2.6 showing clouded locations of Type K fire extinguisher as called out on the floor plan notes.</i></p> <p>Not Approved 06.04.2020 – Floor plan notes on Sheet A-2.6 do not identify a Type K fire extinguisher. I see where you have added a FE to the plan but it is not specifically identified as a Type K extinguisher.</p>
31	<input checked="" type="checkbox"/>	<p>Locations of handwash sinks:</p> <ul style="list-style-type: none"> Handwash sinks need to be located so that handwashing is the first task that is performed when you enter the kitchen. Right now the only sink near an entry door is the utility sink (which needs to be located inside a housekeeping room, see comment 28 above).

		<p><i>Response 05.18.2020 – Please refer to sheet A-2.6 kitchen basement plan showing locations of the existing hand sinks. The main access into the kitchen will be provided via the elevator as the Memory Care is located on the main level and the kitchen located in the basement. Therefore access to and from the kitchen, especially with carts carrying food and/or dishes will utilize the elevator. There is a hand sink located next to the elevator so kitchen staff will have ready access to this sink for hand washing immediately upon entering the kitchen. The door that is located by the future freezer area is for food delivery and egress to the outside, this is not the main access for staff.</i></p> <p>Not Approved 06.04.2020 – This is an unusual request. Most staff enter the kitchen through a door not an elevator. There are 2 stairwells near the kitchen, but they don't seem to correspond or connect to the first floor at the grid lines indicated. So I am confused. I imagine many of the staff will enter the kitchen through the door adjacent to the Dieticians office. There should be a sink located at the entry. I understand staff will use the elevator during times of food delivery.</p> <p>Please call to discuss if that would be easier to fully explain.</p>
32	<input checked="" type="checkbox"/>	<p>Confirm the exhausts KEF-1, KEF-2 and EF-7 are a minimum 10 feet from the RTU-2, MAU-2 and MAU-3.</p> <p>2015 IMC 501.3.1(1).</p> <p>Ref sheet M202, Provide specs on the new units about their intake locations in relation to the Exhaust fans.</p> <p><i>Response 05.18.2020 – Confirmed, locations of exhaust fans and outdoor air intakes meet Mechanical Code requirements. Clarifying note has been added to Sheet M202, see updated drawings.</i></p> <p>Approved 06.04.2020 – based on the response above and the note added to the plans.</p>
33	<input checked="" type="checkbox"/>	<p>Provide a specification to confirm food storage racks are a minimum of 6 inches off the ground to allow cleaning below. WAC 246-215-03351 (1)(c) Food Code</p> <p><i>Response 05.18.2020 – Shelving is adjustable and can be set at any height. Typical heights set for the first shelf to be 10" AFF. Please refer to the attached shelving specification sheets.</i></p> <p>Approved 06.04.2020 – based on the response above. The spec sent does not identify the first shelf set point. <u>This will be verified during site inspection.</u></p>
34	<input checked="" type="checkbox"/>	<p>Signage shall be provided on the exhaust hood or system cabinet, indicating the types and arrangement of cooking appliances protected by the automatic fire-extinguishes system. Signage shall indicate appliances from left to right, be durable, and the size, color, and lettering shall be approved. IFC 904.12 WA State Amendment</p> <p><i>Response 05.18.2020 –Updated signage at the existing exhaust hood or system cabinet</i></p>

			<p><i>will be provided Cascade Fire & Security maintains this system.</i></p> <p>Approved 06.04.2020 – based on the response above. <u>This will be verified during site inspection.</u></p>
35		<input checked="" type="checkbox"/>	<p>Confirm Grease duct cleanouts for the Type I hood are not more than 20’ apart. IMC 506.3.8</p> <p><i>Response 05.18.2020 – Confirmed per site review and existing as-built drawings.</i></p> <p>Not Approved 06.04.2020 – Provide a copy of the as-built plans showing the locations of the grease duct clean-outs.</p>
36	<input checked="" type="checkbox"/>		<p>Verify that all electrical outlets located in the kitchen are protected with Ground-Fault Circuit-Interruptioners. Section 210.8(B), 2014 NFPA 70.</p> <p><i>Response 05.18.2020 – Confirmed, all receptacles in kitchen will be GFCI-protected. Refer to General Kitchen Note C on Sheet E401.</i></p> <p>Approved 06.04.2020 – based on the response above and note C on sheet E401.</p>
37			<p>Additional comments may be forthcoming once a response is received to each of the comments above.</p>

Compliance with the comments above provided by the Department of Health, Construction Review Services, are necessary for this facility to meet the cited requirements of the applicable licensing regulations found in the Washington State Administrative Code and associated references. These comments, authorization to begin construction or final project approval do not relieve the facility from the responsibility to meet the requirements of any applicable federal, state or local regulations. In the event of conflicts between other jurisdictions and these written comments, the most stringent shall apply. The building owner or operator is ultimately responsible for safety and insuring the building is in compliance with all applicable laws.