NON-CORE ISSUES

Facility	License #	Physical Address	Phone Number
Copper Springs	RC-1318	3570 E Amity Rd	(208) 888-7030
Administrator	City	Zip Code	Survey Date
Michael Crowley	Meridian	83642	06/05/2025
Survey Team Leader	Survey Type		Response Due
Wilson, Jeremy	Fire Life Safety and Sanitation Licensure		07/05/2025

Item #	Rule (16.03.22)	Description
1	.161.04. Designated Smoking Areas.	Observed gazebo in middle courtyard between all buildings as designated smoking area, containing non-combustible snorkel style ash trays. Area was not clearly marked and policy did not state this area as the designated smoking area.
2	.250.10.d. Heating, Ventilation, and Air-Conditioning (HVAC).	Facility could not provide documentation of smoke/fire dampers, located in building 4, were tested/inspected within the last 4 years. Annual fire alarm report stated a deficiency that 9 of the dampers would not close upon the alarm being activated. During facility tour it was observed that 3 dampers were in the fully closed position located in the corridor between room # 102 and #128. Dampers shall be in accordance with NFPA 80, Chapter 19, Section 19.5 through 19.5.3.2.
3	.330.15. Fire and Life Safety Records.	Facility could not provide documentation of internal investigation of fire suppression piping, pressure gauge replacement or calibration or check valve internal investigation being conducted within the last 5 years in accordance with NFPA 25, Chapter 13, section 13.2.7.2, 13.4.2.1, and Chapter 14, Section 14.2 and 14.2.1.1.
4	.330.15.b. Fire and Life Safety Records.	Facility could not provide documentation for annual and/or semi-annual inspection and testing of fire suppression wet

		systems located in building #4, building #2, and building #1.
5	.330.15.c. Fire and Life Safety Records.	Facility installed portable fire extinguishers were missing the monthly inspection for the month of April 2025 for all extinguishers in all buildings.
6	.403. FIRE AND LIFE SAFETY STANDARDS FOR EXISTING BUILDINGS LICENSED FOR THREE THROUGH SIXTEEN RESIDENTS.	Life Safety Code standards and requirements for buildings housing three through sixteen residents, were not met, as evidenced by the following: 1. Annual fire alarm inspection reports did not list locations of all devices tested that are interconnected to the fire alarm panels (manual pull stations, heat detectors, smoke detectors, etc.) in accordance with NFPA 72, Chapter 7, Section 7.6.6 and Chapter 14, Section 14.6.2.4. 2. Facility could not provide documentation of wet system pressure gauges checks on a monthly basis in accordance with NFPA 101, Chapter 32, Section 32.2.3.5.8.2 and NFPA 25, Chapter 13, Section 13.2.7.1.1. 3. Documentation provided identified the facility failed to conduct 30 second monthly testing of emergency lighting in all buildings before August of 2024, or after January of 2025. Emergency lights shall be tested in accordance with NFPA 101, Chapter 7, Section 7.9.
7	.404. FIRE AND LIFE SAFETY STANDARDS FOR EXISTING BUILDINGS LICENSED FOR SEVENTEEN OR MORE RESIDENTS AND MULTI-STORY BUILDINGS.	Life Safety Code standards and requirements for buildings housing 17 or more residents, were not met as evidenced by the following: 1. Annual fire alarm inspection reports did not list locations of all devices tested that are interconnected to the fire alarm panels (manual pull stations, heat detectors, smoke detectors, etc.) in accordance with NFPA 72, Chapter 7, Section 7.6.6 and Chapter 14, Section 14.6.2.4. 2. Facility could not provide documentation of wet/dry system pressure gauges checks on a monthly basis in accordance with NFPA 101, Chapter 32, Section 32.2.3.5.8.2 and NFPA 25, Chapter 13, Section 13.2.7.1.1. 3. Facility failed to provide documentation/evidence of

		repaired deficiencies of the dry suppression system, annual report states the air compressor kicks on every 15-20 minutes due to possible leaks, no air leakage test was performed. No documentation was provided of an air leakage test being conducted within the last 3 years in accordance with NFPA 25, Chapter 4, Section 4.1.5 to 4.1.5.2 and Chapter 13, Section 13.4.3.2.5. 4. Documentation provided identified the facility failed to conduct 30 second monthly testing of emergency lighting before August of 2024, or after January of 2025. Emergency lights shall be tested in accordance with NFPA 101, Chapter 7, Section 7.9. 5. Facility could only provide documentation for 1 of 2 semi-annual hood suppression inspections/testing, UL listed hood suppression systems shall be inspected at least every 6 months in accordance with NFPA 96, Chapter 11, Section 11.2.1. 6. Facility could only provide documentation for 1 of 2 semi-annual hood cleaning inspections. UL listed hoods shall be inspected for grease accumulation at least semi-annually in accordance with NFPA 96, Chapter 11, Section 11.4, 11.6 and 11.6.1. 7. Identified in room #217, stored items in closet were approximately 4" away from sprinkler pendant, stored items shall be no less than 18" away from sprinkler pendants in accordance with NFPA 25, Chapter 5, Section 5.2.1.2.1.
8	.405.01.a. Electrical Installations and Equipment.	Identified in room #209, a multi-plug adapter was in use to power a lamp, charger, chair and other devices. Multi-plug adapters are prohibited in any capacity.
9	.405.02.c. Prohibited Applications.	1. Identified in building #4, room #316, a microwave and mini fridge was being supplied power by a RPT. 2. Identified in the riser room of building #1 a mini fridge was being supplied power by a RPT. The use of RPT's to power appliances is prohibited.
10	.405.04. Prohibited Applications.	Facility has a gas fireplace located in the main sitting area of

		building #4, provided fuel-fired heating inspections/testing did not include the fireplace within the inspection. All fuel-fired heating devices shall be inspected on an annual basis.
11	.410. REQUIREMENTS FOR EMERGENCY ACTIONS AND FIRE DRILLS.	Facility provided documentation for conducted fire drills identified the facility failed to conduct fire drills on a bi-monthly basis with at least 6 being conducted with 2 of those 6 being during normal sleeping hours. Last conducted fire drill based on documents provided was conducted December 31, 2024, in all 4 homes. Drills for building #2 last conducted February 23, 2024.