STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	MHL023002	A. BUILDING: _____ B. WING _____	05/14/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CLEVELAND VOCATIONAL INDUSTRIES, INC.	650 NORTH POST ROAD SHELBY, NC 28150

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
V 000	INITIAL COMMENTS An annual and complaint survey was completed on May 14, 2018. The complaint was unsubstantiated (intake # NC00138678). A deficiency was cited. This facility is licensed for the following service categories: 10A NCAC 27G .5500 Sheltered Workshops for Individuals of All Disability Groups 10A NCAC 27G .2300 Adult Developmental and Vocational Programs for Individuals with Developmental Disabilities	V 000		
V 288	27G .5503 Sheltered Workshop - Operations 10A NCAC 27G .5503 OPERATIONS (a) Hours. Each facility shall be available for client attendance at least six hours per day (exclusive of transportation time), five days per week. (b) Business Practices: (1) Supplies, materials or tools, if provided by the sheltered workshop, shall be identified as a separate amount in the bid price. (2) Wages paid to clients shall be on a piece rate or hourly commensurate wage basis. (3) Each client involved in productive work shall receive a written statement for each pay period which indicates gross pay, hours worked and deductions. (4) Prices for goods produced in the facility shall be equal to or exceed the cost of production (including commensurate wages, overhead, tools and materials). (5) Clients shall be counseled concerning their rights and responsibilities in such matters as wages, hours, working conditions, social security, redress for injury and the consequences of their own tortious or unethical conduct.	V 288		

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V 288	Continued From page 1 (c) Safety Committee. A safety committee comprised of staff members and client representatives shall be appointed to review accident reports and to monitor the facility for safety. The committee shall meet at least quarterly. Minutes shall be kept of all meetings and submitted to the Program Director. (d) Handbook. Each facility shall have a client handbook including, but not limited to, information about services and activities. (1) The client handbook shall be written in a manner comprehensible to clients and reflective of adult status. (2) Each client shall be given a handbook, and the handbook shall be reviewed with the client. This Rule is not met as evidenced by: Based on interview and record review, the facility failed to ensure operation of a safety committee that met at least quarterly and maintained meeting minutes. The findings are: Review on 5/10/18 of Client #1's record revealed: Date of admission: 7/1/16 Diagnoses: Moderate Mental Retardation, History of Seizures -A goal in Client #1's Individual Support Plan (ISP) dated 4/1/18 to increase safety skills by taking steps during disaster and fire drills to demonstrate knowledge of reporting to designated place. Review on 5/10/18 of Client #2's record revealed: Date of admission: 1/17/18 Diagnoses: Mild Mental Retardation, History of traumatic injury, Disruptive Dysregulation	V 288		

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V 288	Continued From page 2 Disorder, Anxiety, Seizure Disorder, High Cholesterol, Diabetes, Gastroesophageal Reflux Disease (GERD), Hyperlipidemia, Pruritus, Anemia, Hypertension -A goal in Client #2's Day Support Plan dated 3/15/18 to improve safety skills at facility and in the community by being aware of safety regulations and rules. Review on 5/10/18 of Client #3's record revealed: Date of admission: 4-15-97 Diagnoses: Dysthymic Disorder, Mild Mental Retardation, History of Seizures, High Cholesterol -A goal in Client #3's Personal Care Plan dated 1/16/18 was to follow the safety rules at the facility. Review on 5/10/18 of Client #4's record revealed: Date of admission: 6/1/07 Diagnoses: Severe Mental Retardation -Goals in Client #4's Personal Care Plan dated 11/28/17 included: -Demonstrate safety awareness in all areas; -Follow safety procedures (wearing gloves during job duties). Interview on 5/10/18 with Client #1 and Client #4 revealed: -Both uncertain or did not know if fire and disaster drills conducted at facility and what would happened if anyone got hurt at work; -Client #1 shrugged his shoulders; -Client #4's verbal responses were difficult to understand due to his speech impediment. Interview on 5/10/18 with Client #3 revealed: -Fire drills were done at the facility but she could not remember the last time one was done; -She guessed staff would take care of the person if anyone got hurt at work;	V 288		

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V 288	Continued From page 3 -She did not remember any incidents of a coworker getting hurt or injured. Review on 5/14/18 of the facility's Fire and Disaster Drill log revealed: -5/4/17 at 2:45 pm- Fire drill; -6/16/17 at 2:30 pm- Tornado drill; -3/28/18 at 11:30 am- Tornado drill. Review on 5/10/18 of facility incident reports for 3 months revealed: -2/15/18 at 8:25 am of a client fall to the floor with staff having responded to the client and implemented precautions to minimize reoccurrence; -3/14/18 at 1:20 pm of a client having tripped over a flowerbed pot and client checked by staff for injury; -3/22/18 at 2:00 pm of a client fall from a van and staff checked client for injury; -5/8/18 at 12:05 pm of a client seizure with staff having responded to client for safety while 9-1-1 was called and client taken to hospital; -5/9/18 at 9:29 am of a client complaint of being touched by another client. Interview on 5/14/18 with the Human Resources Director revealed: -No safety committee meeting minutes for the last quarter to present (January-May); -"We had a safety committee and it fizzled out"; -Could not recall date of last safety committee meeting; -Facility was working on reestablishing a safety committee comprised of clients and staff. Interview on 5/14/18 with the Facility Director revealed: -There was not an active safety committee in operation at the facility;	V 288		

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V 288	Continued From page 4 -"We have a semi-safety committee"; -No facility safety committee meeting minutes provided; -He was in the process of getting a safety committee fully re-established.	V 288		