

Department of Health & Human Services
Centers for Medicare & Medicaid Services

Printed: 08/27/2026
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 14E169	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/17/2026
NAME OF PROVIDER OR SUPPLIER Winston Manor Cnv & Nursing		STREET ADDRESS, CITY, STATE, ZIP CODE 2155 West Pierce Chicago, IL 60622	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
F 0921 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Make sure that the nursing home area is safe, easy to use, clean and comfortable for residents, staff and the public. Based on observations, interviews and record reviews, the facility failed to provide clean bathrooms and an environment free of urine, feces and body odors. This applies to 15 residents (R1, R2, R3 and R6 through R17) of 17 in the sample reviewed for safe, clean and homelike environment. Findings include: OBSERVATIONS Upon exiting the elevator of the 4th floor, it smelled like strong bodily, urine and feces odors. On 6/15/2026 at 11:44 AM, the small 4th floor handicap bathroom on the left side of the hallway smelled of strong bodily odors, urine and feces. There were brown-yellowish substances that hardened or dried in drizzling formation from the rim of the toilet seat to the floor. The entire hallway smelled of those strong odors extending from the elevator going left down the hall to the last room next to the window. Two rooms from the window contained a visibly open portable toilet next to the resident's bed. On 6/15/2026 at 12:38 PM, V4 (Housekeeper) who was cleaning the 4th floor handicapped bathroom could not smell the odors in the bathroom or throughout the hallway left of the elevator. V4 said V4 could not smell strong bodily odors due to V4's sinus problems. V4 explained V4 was trying to remove the stains and drops from the toilet. On 6/15/26 the 3rd floor's small central bathroom on the left side of the hall was in disarray: no toilet paper, brown paper towels in front of toilet, and yellowish-brown substance overflow on the outside of a toilet. On 6/16/2026 at 11:42AM, V4 (Housekeeper) was again in the handicap bathroom trying to clean and remove build-up debris from the toilet. While scrubbing, V4 said I can smell it today and it smells so bad. The bathroom had a strong stench odor. The stench started upon exiting the elevator and to the left hallway down to the window. On 6/15/2026 at 11:58AM, R1 stated the facility and bathrooms smelled like feces, urine, and a sewer. R1 stated feces are all over the floors and toilets. And R1 said the bathroom floors never dry and maintenance use bed sheets to soak up the mop water which is a mixture of urine/feces pushed around. Thus, causing the odors to linger throughout the bathroom and the facility. On 6/15/2026 at 12:47 PM, R2 (who resides on a different floor) stated the showers are horrible and there are usually 8-9 cockroaches in the showers. R2 said they do not clean the shower walls and there is always a stench smell in the toilets. There were visible chunks of feces on the outer rim of the toilet in one of the stalls of the 3-section shared bathroom as R2 took the surveyor throughout the bathroom. On 6/15/2026 at 1:20 PM, R3 stated there were no offensive odors from the bathroom today but they only clean them every three days. And they usually have a bad odor. R3 said the toilets are usually disgusting and visibly soiled. On 6/16/2026 at 10:26 AM, R6 stated initially you smell the urine and feces odors in the bathroom showers, but they dissipate as the steam increases. R1's Face Sheet documents R1's diagnoses of chronic obstructive pulmonary disease with paranoid schizophrenia, post-traumatic stress disorder, hypertension, insomnia and obesity. R1's last quarterly Minimum Data Sheet (MDS) documents a Brief Interview for Mental Status (BIMS) score of 15 indicating some cognitive impairments. R2's Face Sheet documents R2's diagnoses of major depressive disorder, hypertension, anxiety, and asthma. R2's last quarterly Minimum Data Sheet (MDS) documents a Brief Interview for Mental Status (BIMS) score of 14 indicating some cognitive impairments. R4's Face Sheet documents R4's diagnoses of chronic obstructive pulmonary disease (COPD), asthma, neuropathy, and major depression. R4's last quarterly Minimum Data Sheet (MDS) documents a Brief (continued on next page)		

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
--	-------	-----------

Department of Health & Human Services
Centers for Medicare & Medicaid Services

Printed: 08/27/2026
Form Approved OMB
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 14E169	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 06/17/2026
NAME OF PROVIDER OR SUPPLIER Winston Manor Cnv & Nursing		STREET ADDRESS, CITY, STATE, ZIP CODE 2155 West Pierce Chicago, IL 60622	
For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)		
F 0921 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Some	Interview for Mental Status (BIMS) score of 10 indicating some cognitive impairments. V5 (Certified Nursing Assistant) and (V7 Registered Nurse) interviewed consecutively on 6/15/2026 starting at 12:39 PM stated they could smell the strong urine and feces odors coming from the 4th floor's elevator, hallway to the left of the elevator and the handicapped bathroom. V5 stated the 4th floor always smelled strong bodily odors. V7 pointed out a resident's room containing a portable toilet and another resident's room where urine was contained using a bed sheet that remained on top of the urine spill. 6/16/2026 at 4:21 PM, V1 (Administrator) stated it is their expectation that the facility be free of roaches, strange bugs and offensive odors because it is important that residents live in a clean sanitized homelike environment. R1, R2, R3, R6 through R17 all reside on units observed with odors and stains on toilets. Review of the facility's Resident Council Minutes for December 2025 documented request to clean the bathrooms. The facility failed to follow their Housekeeping Services policy dated 9/1/2025 that reads housekeeping and environmental surfaces will be clean and disinfected on a regularly basis when surfaces are visibly soiled and Clean spills of blood and bodily fluid as outlined in the established policy.		