STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0035782	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING	(X3) DATE SURVEY COMPLETED 01/08/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WINSTON MANOR CNV & NURSING	**2155 WEST PIERCE , CHICAGO, Illinois, 60622**

(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) COMPLETION DATE
S0000	Initial Comments Complaint Investigations: 25810122/2644520 2589893/2639945	S0000		
S9999	Final Observations Statement of Licensure Violations: 300.610a) 300.1210b) 300.1210d)6) Section 300.610 Resident Care Policies a) The facility shall have written policies and procedures governing all services provided by the facility. The written policies and procedures shall be formulated by a Resident Care Policy Committee consisting of at least the administrator, the advisory physician or the medical advisory committee, and representatives of nursing and other services in the facility. The policies shall comply with the Act and this Part. The written policies shall be followed in operating the facility and shall be reviewed at least annually by this committee, documented by written, signed and dated minutes of the meeting. Section 300.1210 General Requirements for Nursing and Personal Care b) The facility shall provide the necessary care and services to attain or maintain the highest practicable physical, mental, and psychological well-being of the resident, in accordance with each resident's comprehensive resident care plan. Adequate and properly supervised nursing care and personal care shall be provided to each resident to meet the total nursing and personal care needs of the resident. d) Pursuant to subsection (a), general nursing care shall include, at a minimum, the following and shall be	S9999		

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

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S9999	Continued from page 1 practiced on a 24-hour, seven-day-a-week basis: Based on interviews and record review, the facility failed to ensure that the residents' bathroom floor was dry and free of a liquid substance. This failure has resulted in one resident (R1) slipping on the bathroom floor and sustaining fractures to her ankle. 6) All necessary precautions shall be taken to assure that the residents' environment remains as free of accident hazards as possible. All nursing personnel shall evaluate residents to see that each resident receives adequate supervision and assistance to prevent accidents. Based on interviews and record review, the facility failed to ensure that the residents' bathroom floor was dry and free of a liquid substance. This failure has resulted in one resident (R1) slipping on the bathroom floor and sustaining fractures to her ankle. Findings include: R1 is 58-year-old with diagnoses including but not limited to: morbid obesity, epilepsy, vitamin D deficiency, type 2 diabetes mellitus and hypertension. R1 has a BIMS (Brief Interview of Mental Status) score of 15, which indicates cognitively intact. On 1/5/26 at 2:43 PM, R1 stated the following, "I was discharged from the Hospital on October 9, 2025, and am now at a different nursing facility. My ankle was broken in three places while in the last nursing home (named facility). I was going to the restroom in the middle of the night about 2:00 AM. The bathroom is down the hall from my bedroom. I was walking into the bathroom and there was no light or wet floor sign. The floor was really wet with water. I slipped and fell and began to yell for help. When I slipped and fell, the CNAs (Certified Nurse Assistants) called 911 and the EMTs (Emergency Medical Technicians) got me off the floor and transferred me to the hospital. The x-rays at the hospital revealed that my ankle was broken in several places. I am still recovering from the fracture." On 1/7/26 at 11:28 am, V2 DON (Director of Nursing) stated the following, "I was told that R1 slipped and fell on the bathroom floor on water. The agency nurse (V28) told me that the bathroom floor was wet. I would expect the nursing staff to get the water up from the floor and place a wet sign there to prevent a patient from falling. I cannot contact V28 (agency nurse). She	S9999		

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S9999	Continued from page 2 (V28) is the nurse that was assigned to R1 on the night of the fall." On 1/8/26 at 12:25 pm, V29 (Nurse Practitioner) stated the following, "fall prevention should be in place for all residents. The floors should be free of waste, rugs or carpets. Liquid on the floor is considered a fall risk. The liquid is a risk because resident can slip and fall on the liquid." Some long-term effects of a bone fracture may include weakness in extremity, difficulty walking, chronic pain and low bone density." Un-witnessed Fall report dated 10/5/25 documents the following nurse's description by V28, during rounds, RN (Registered Nurse/ V28) was alerted by the sound of someone calling for help emanating from the bathroom. The resident (R1) was found lying on the floor, the fall was unwitnessed. An immediate physical assessment was conducted. The resident (R1) reported experiencing pain and exhibiting a limp left foot. Emergency Department Provider note dated 10/5/25 documents, R1 states she lives in named nursing facility and was walking to the restroom. During this time, R1 states that the floor was wet and that she (R1) tripped and fell, landing on her ankle. Emergency Department Provider noted dated 10/5/25 documents the following: Left ankle deformity and ecchymosis present; tenderness present; decreased range of motion. Emergency Department Imaging results dated 10/5/25 documents, left ankle trimalleolar fracture with mild posterior displacement of the distal fibula fracture fragments. Facility policy titled Housekeeper Job Description documents the following as part of essential duties and responsibilities: clean floors, to include sweeping, damp/ wet mopping, stripping, waxing, buffing and disinfecting in accordance with proper safety precautions. (A)	S9999		