

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 145241	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 11/14/2025
NAME OF PROVIDER OR SUPPLIER Helia Southbelt Healthcare		STREET ADDRESS, CITY, STATE, ZIP CODE 101 South Belt West Belleville, IL 62220	

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 0689 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents. (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
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<p>F 0689</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on interview and record review, the Facility failed to ensure residents only smoke in designated, safe areas and tobacco and smoking supplies are kept in secure locations for 1 of 3 residents (R2) reviewed for accidents and hazards in the sample of 7. Findings include:R2's Face Sheet documents R2 was admitted to the facility on [DATE] with diagnoses including type 2 diabetes mellitus, cerebral infarction, and nicotine dependence. R2's Minimum Data Set (MDS) dated [DATE] documented R2 was cognitively intact and ambulated independently.R2's Care Plan initiated 9/22/25 documents, Resident is exhibiting non-compliance behavior by smoking in his room.R2's Care Plan initiated 10/15/25 documents, Resident wishes to smoke cigarettes and has been assessed as potentially being unsafe to smoke independently after smoking observation was completed. He has broken smoking protocols by smoking in his room.R2's Grievance dated 9/30/25 documents, Resident unhappy about cigarettes put in safe spot for smoking. On 11/13/25 at 11:57 AM, V1, Administrator, stated R2 has been caught smoking in his room. He has been told he cannot smoke in his room, but he still tries to sneak in there, and staff have found ashes.On 11/13/25 at 1:05 PM, V6, Certified Nursing Assistant (CNA), stated R2 smokes in his room all the time. R2 is in the hospital now, but if he was here, you would probably smell it. On 11/13/25 at 1:09 PM, V8, Nurse Manager, stated R2 has been caught smoking in his room numerous times. We educate him and show him where cigarettes are supposed to be kept, but he will not follow the rules. On 11/13/25 at 2:40 PM, V2, Director of Nursing (DON), stated multiple staff have smelled smoke and seen ashes in R2's room. She stated, It's a problem.On 11/14/25 at 7:55 AM, V11, Licensed Practical Nurse (LPN), stated, (R2) has been caught smoking in his room so many times. We smell it on him and in the air in the hallway. When we come in, he tries to flush it down the toilet and says he doesn't have anything on him.On 11/14/25 at 8:00 AM, V12, Registered Nurse (RN), stated R2 does his own thing and smokes in his room, not in the designated smoking areas. Staff tell him the rules, but he is not cooperative. V12 stated people can smell it out in the hallway, and she has also seen him with a lit cigarette in the hallway. Cigarettes are supposed to be locked up, but R2 gets them when he leaves the facility, or visitors bring them in for him.On 11/14/25 at 9:29 AM, V5, RN, stated R2 has been educated multiple times regarding the importance of not smoking in his room, but he does not follow the rules. She has smelled smoke in his room and has found tobacco rolling tubes in his room. Administration is aware, but it keeps happening.R2's 8/28/25 Progress Note documents R2's room and bathroom smelled like smoke. There were ashes in the bathroom sink and pieces of tobacco on the toilet seat.R2's 8/31/25 Progress Note documents R2 went into the 300 Hall shower room which smelled of strong cigarette smoke odor after he left.R2's 9/10/25 Progress Note documents R2 was smoking a cigarette in the 300 Hall bathroom and flushed the cigarette as staff were entering the room. R2 stated he was not smoking as clouds of cigarette smoke and tobacco smell filled the room with him.R2's 9/30/25 Progress Note documents R2 had cigarettes and a lighter. V13, LPN, told R2 he needed to return the items, but he used profanity and instead kept the items. R2's 10/10/25 Progress Note documents R2's bathroom smelled like cigarette smoke, and there were ashes on the toilet seat. R2's room was searched, and a box of rolling tubes were found.R2's 10/14/25 Progress Note documents R2 was found with tobacco and rolling tubes on the floor between the bed and the wall.R2's 10/15/25 Progress Note documents R2's bathroom smelled like smoke, and there were ashes on his toilet seat.R2's 10/20/25 Progress Note documents resident was smoking in the bathroom.R2's Smoking Risk assessment dated [DATE] documented R2 was a Potentially Unsafe Smoker and should Follow Facility Policy.On 11/14/25 at 9:08 AM, V1 stated residents are not allowed to smoke in their rooms and cigarettes should be locked up when not in use for resident safety.The Facility's Smoking Policy and Procedure revised October 2015 documents the purpose of the policy is to assure all residents are safe while smoking. Smoking materials must be secured at the nurses' station when not in use and will not be kept in resident rooms. Smoking will only be allowed in the designated smoking areas of the facility.The Facility's Undated Smoke Times documents smoking will take place outside in the courtyard, weather permitting.</p>		