
Delivery via email to: mbaggett@baptistvillage.org

June 15, 2023

License Number: AL7259

Mr. Monty Baggett, Administrator
The Neighborhoods At Baptist Village Of Broken Arrow
2801 N Birch
Broken Arrow, OK 74012

RE: Survey Event ID: S5UG11

Dear Mr. Baggett:

Enclosed is a report of the inspection conducted at your Assisted Living Center on **June 7, 2023**. No deficiencies were cited. Oklahoma Statutes 63-1-1910 require that this report be made available for public inspection within the facility for the next three years.

If you have any questions concerning this report, please call me at (405) 426-8200.

Sincerely,



Lisa Calvin
Long Term Care Enforcement Analyst
Oklahoma State Department of Health

Oklahoma State Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL7259	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 06/07/2023
NAME OF PROVIDER OR SUPPLIER THE NEIGHBORHOODS AT BAPTIST VILLAGE OF BR		STREET ADDRESS, CITY, STATE, ZIP CODE 2801 N BIRCH BROKEN ARROW, OK 74012		
(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
C 000	INITIAL COMMENTS A re-licensure survey was conducted on 06/06/23 and 06/07/23. No deficient practice was cited.	C 000		

Oklahoma State Department of Health

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE