

**Business Name:** BeeHive Homes of Andrews

**Address:** 2512 NW Mustang Dr, Andrews, TX 79714

**Phone:** (432) 217-0123

## BeeHive Homes of Andrews

Beehive Homes of Andrews assisted living care is ideal for those who value their independence but require help with some of the activities of daily living. Residents enjoy 24-hour support, private bedrooms with baths, medication monitoring, home-cooked meals, housekeeping and laundry services, social activities and outings, and daily physical and mental exercise opportunities. Beehive Homes memory care services accommodates the growing number of seniors affected by memory loss and dementia. Beehive Homes offers respite (short-term) care for your loved one should the need arise. Whether help is needed after a surgery or illness, for vacation coverage, or just a break from the routine, respite care provides you peace of mind for any length of stay.

[View on Google Maps](#)

2512 NW Mustang Dr, Andrews, TX 79714

### Business Hours

- Monday thru Sunday: 9:00am to 5:00pm

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Choosing an assisted living community is among those choices that feels both useful and deeply individual at the very same time. You are not simply buying a service. You are helping to choose a home, a day-to-day rhythm, and a circle of people who will exist for your parent or loved one when you are not.

I have walked through lots of communities with households, sometimes with a sense of relief, sometimes in tears, sometimes in quiet resignation after a health center discharge left them no time at all to strategize. The difference between a great fit and a bad one shows up in small information: how personnel welcome citizens, whether call lights are addressed without delay, whether somebody notifications that your mother hates carrots and quietly swaps them out without fuss.

This guide is implied to assist you observe those information and ask sharper concerns, so you can assess assisted living and other senior care choices with clear eyes rather than glossy brochures.

## Start With Requirements, Not With the Brochure

Before you tour a single assisted living structure, take a seat and write out what everyday [respite care](#) support is really required. Households typically start with an unclear sense of "Mom needs more help" or "Dad is lonesome," then feel overwhelmed by all the features and sales language.

Think in concrete, observable terms. For instance: "She needs assistance bathing and getting dressed every early morning," or "He forgets his medications a minimum of twice a week," or "She can not manage stairs safely."

For most families, the core factors to check out assisted living or other types of elderly care fall under a couple of broad classifications:

- Personal care: assist with bathing, grooming, dressing, toileting, getting in and out of bed or chairs.
- Health and medication: medication tips or administration, chronic illness tracking, assistance after hospitalization or surgery.
- Safety: fall threat, wandering, leaving the range on, mixing up medications, driving issues.
- Daily structure: routine meals, social contact, hydration, activities, sleep routine.
- Caregiver pressure: a partner or adult child is exhausted or physically not able to continue supplying the needed level of care.

Even a brief composed summary of these requirements will keep you and any sales representative on track. It also helps differentiate whether assisted living, memory care, or a different kind of senior care may fit much better. An individual who is mostly independent however separated may flourish with meals, housekeeping, and social activities. Somebody with advanced dementia or heavy medical requirements may need a various setting like memory care or knowledgeable nursing.

Bring that needs list with you on tours, and see whether the community talks about their services in such a way that connects straight to your particular scenario, not just to generic "elderly care."

## Understanding What Assisted Living Actually Provides

Families in some cases assume that assisted living is either "simply a home with meals" or "almost like a nursing home." In reality, it beings in the middle, and that middle varies by state and by provider.

Most assisted living communities concentrate on:

- Providing a home or suite with some level of privacy.
- Offering meals, housekeeping, and laundry.
- Supporting homeowners with individual care jobs and medication.
- Supporting socializing through activities, trips, and shared spaces.

Assisted living is normally *not* created for locals who need 24-hour hands-on nursing, ventilators, comprehensive wound care, or extensive behavior management. Laws differ by state, but the general viewpoint is to support as much self-reliance as possible with a safeguard, instead of to run like a small hospital.

Ask straight: "What *cannot* you safely care for here?" The sincere neighborhoods will have a clear response. For instance, they might say they can not safely support residents who are bedbound, who need two personnel to transfer at all times, or who have unchecked aggressiveness. You wish to know where the limits are before a crisis occurs.

## Using Respite Care as a Test Drive

Many assisted living neighborhoods use respite care: short stays that can last from a couple of days up to a few weeks, in some cases longer. These can be exceptionally useful.

I have seen respite stays utilized for numerous functions:

- A safe location for an older adult while a spouse has surgical treatment or travels.
- A "trial run" to see whether common living is an excellent fit.

- A bridge after hospitalization when going straight home feels risky.

Unlike long-term moves, respite care is usually furnished, much shorter term, and complete. You get a look into real life there: how staff speak with residents at night, how frequently activities happen as set up, how the food tastes on a Tuesday, not just at a grand opening event.

If you are unsure whether your parent will accept the idea of assisted living, framing it as a "short stay while you get stronger" or "an opportunity to rest while the family regroups" is often less threatening. Some homeowners who withstood the move later tell their families, "I believe I will stay, actually. It is much easier here."

When you ask about respite, clarify whether respite homeowners get the same level of staffing and attention as long-term locals. They should. If the respite rooms are on a various flooring, visit that area specifically. It tells you a lot about how the community works with short-stay residents and, by extension, future long-term residents.

## **Staffing: The Distinction You Feel at 7 p.m., Not on the Tour**

The glossy lobby does not assist when somebody requires aid to the restroom and nobody addresses the call bell. Personnel levels and culture are where assisted living is successful or fails.

Salespeople typically price quote staff-to-resident ratios, however these can be misleading or cherry-picked. Dig deeper.

Ask specific questions such as:

- How many caregivers are on each shift, including over night, and how many locals do they care for?
- Are nurses on website 24/7, or on call after certain hours?
- How often are firm or temporary personnel used?
- What is the typical length of employment for caretakers and nurses here?

I as soon as explored a beautiful assisted living neighborhood with a family. The director proudly shared their activity calendar and restaurant-style dining. When we silently asked caregivers in the hall how long they had actually worked there, 2 said "simply begun today" and another stated "less than a month." There had been turnover in leadership and personnel, which meant even the very best policies on paper were not yet in practice. The family carefully chose to wait and watch how things stabilized.

Also take note of how staff engage with current locals. Do they know names without taking a look at charts? Do they crouch down to be at eye level when speaking? Do locals appear unwinded when personnel go into, or tense and guarded?

A structure can compensate for some drawbacks with a strong, steady team. The reverse is seldom true.

## **Safety, Health, and Medication Management**

Safety is often the tipping point that brings families to assisted living, so it deserves more than a checkbox.

On your visit, try to find useful information: grab bars in restrooms, non-slip floor covering, hand rails along hallways, adequate lighting, and clear signage that a person with moderate cognitive problems can follow. Observe whether residents use their walkers and walking sticks consistently, or whether you see many walking unassisted however unsteady. A culture that stabilizes the use of movement aids tends to prevent more falls.

Medication management is another foundation of senior care. Some communities merely advise homeowners to take prefilled pills, while others completely manage prescriptions, reordering, and administration. Clarify:

- Who sets up and administers medications, and what training do they have?
- How are medication errors reported and tracked?
- What takes place if a resident declines medications?
- Can the community deal with injectables like insulin, or complex regimens?

Another crucial location is how the neighborhood manages immediate medical issues. They are not hospitals, but they ought to have clear procedures. Ask how typically they call 911, what takes place if a resident falls overnight, and how they inform households. Ask whether a nurse examines residents after every fall or health occurrence, or whether that depends upon the situation.

Pay attention to how candid the personnel are. You desire a community that admits that falls and health problems happen, but takes avoidance and follow-up seriously.

## **Lifestyle: Every day life Beyond the Amenities Sheet**

A complete activity calendar looks excellent, however the reality you want is basic: does your parent have genuine chances each day to be engaged, comfy, and, occasionally, delighted?

Try to visit throughout a mealtime and one other time, such as mid-morning or mid-afternoon. Notification whether:

Residents are present and engaged, or mostly in their rooms with doors closed.

Activities seem happening as set up, with more than a couple of participants. Staff carefully welcome quieter residents to sign up with, or focus only on the most outbound.

Think about your specific loved one. A retired engineer may delight in brain video games, conversation groups, or a woodworking club more than crafts. An introvert may value a peaceful library and a walking course over big group bingo. An older adult with visual impairment might care more about audiobooks and large-print materials than live entertainment.

Ask if they adjust activities for mobility and cognition. A great activity director can adapt a card video game for someone with unsteady hands, or involve a resident who tires easily for simply twenty minutes instead of a full hour.



Do not neglect the quieter aspects of daily living: how the community manages mail, whether there is a place for citizens to garden, whether animals are allowed, and how laundry is marked to avoid mix-ups. These small patterns form lifestyle much more than the periodic special event.

## Rooms, Shared Areas, and Dining

Apartments in assisted living range from easy studios to two-bedroom units with kitchenettes. Some households focus heavily on square footage, yet the design often matters more than raw size.

Visit at least two room types. Take note of:

Natural light and window views. These impact state of mind much more than individuals expect.

Bathroom layout, especially the area for walkers or wheelchairs, height of toilets, and presence of grab bars.

Closet space and how simple it will be to organize clothes and personal products.

Shared spaces inform you how people actually live in the structure. Are residents utilizing lounges and outdoor patio areas, or are these primarily for show? Exists a peaceful location for reading or a noisy TV blasting in every common space? Can residents get a cup of coffee or tea without asking personnel for each step?

Dining frequently makes or breaks a resident's satisfaction. Attempt to eat a meal there. Taste matters, but so do consistency, versatility, and self-respect. Ask whether meals are plated in the cooking area or at the table, whether special diet plans like low sodium or diabetic meals are offered, and how they manage citizens with swallowing difficulties.

A red flag: residents waiting a very long period of time to be served while staff chat amongst themselves, or plates removed before people complete. For somebody who consumes slowly, rushed meal service can quickly cause weight loss.

## Money, Prices Designs, and Contracts

Assisted living is costly. Total month-to-month costs typically equal a home loan, and they are typically private pay, at least initially. Understanding how prices works is critical, both for today and for future years.

Most communities use among three models:

1. All-inclusive: One rate covers lease, meals, and a set level of care. Increases happen occasionally, in some cases annually.
2. Base rate plus care levels: Rent and standard services are one cost, then care is billed as "Level 1, Level 2, Level 3," each with its own cost.
3. A la carte: Each service such as medication management, bathing help, or escorts to meals has its own line item.

Ask them to stroll you through a sensible regular monthly total for your parent as they are *right now*, not the minimum package. If they state, "Most people pay in between X and Y," ask what functions differ in between those quantities. Ask how typically care level evaluations take place and how they notify you of increases.

This is where the fine print matters. It deserves producing a brief contract review list for yourself.

Here is a focused list of contract details that usually are worthy of careful attention:

- Notice needed for rent or care level boosts, and the normal size of past increases.
- Conditions under which the community can require a move to a higher level of care or a various setting.
- Refund or credit policy if a resident vacate or passes away mid-month.
- Responsibility for personal property, including theft or damage, and any requirement for tenant's insurance.
- Minimum stay requirements, deposit terms, and any non-refundable fees.

If you feel forced to sign rapidly with guarantees that "we can always change things later," slow down. The reputable neighborhoods anticipate concerns. They can plainly discuss what is negotiable and what is not.

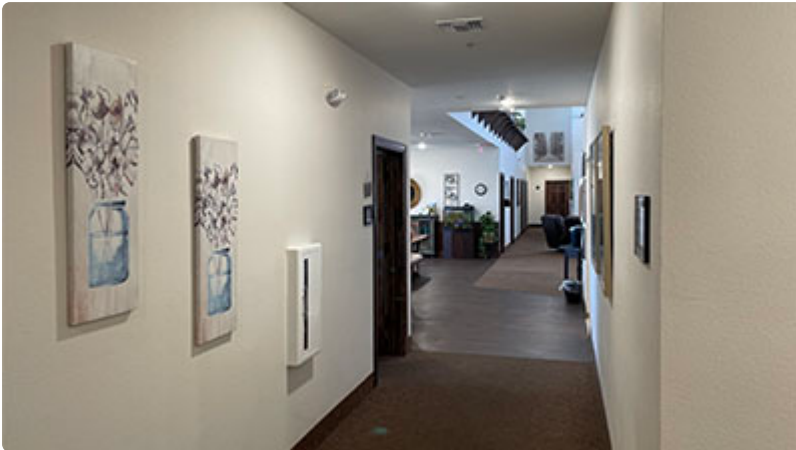
## Red Flags to View For

Assisted living trips are developed to show the very best side of a community. Your job is to discover the spaces in between the marketing and the lived reality.

Some indication are subtle; others must stop you in your tracks:

Repeated strong odors of urine or feces in common areas, not simply occasional accidents.

Citizens parked in wheelchairs in hallways without any engagement for long stretches.



Staff discussing residents in front of them as if they are not there. Activity calendars filled with events that clearly are not occurring during your visit. Baffled or contradictory answers from various personnel about fundamental procedures.

Another red flag is bad interaction when you merely attempt to arrange a tour. If messages are not returned, if nobody can address standard concerns about expenses, or if your visit feels chaotic and hurried, envision what that appears like on a regular weekday evening when there is no prospective new client watching.

Trust your impulses. Families in some cases say, "I can not put my finger on it, but something felt off." Notification that, then back it up with more questions.

## When Dementia or Cognitive Modification Becomes Part Of the Picture

Many residents in assisted living have some degree of memory loss or cognitive modification, whether formally detected or not. That truth needs to inform what you look for.

If your loved one currently has a diagnosis of dementia, ask straight how many locals in the building have similar requirements and how personnel are trained to support them. Some neighborhoods have protected memory care systems; others serve individuals with moderate to moderate dementia in routine assisted living.

Key concerns include:

How they deal with wandering or exit-seeking.

How they redirect homeowners who are upset, nervous, or repetitive. How they partner with households on behavioral changes or development of illness.

Look for visual hints such as memory boxes outside home doors, contrasting colors in between floors and walls to assist depth understanding, and basic signs. These details reveal whether the community has thought about cognitive aging beyond lip service.

Ask whether they expect your loved one to stay in assisted living throughout the course of dementia, or whether there is a point at which a transfer to memory care or skilled nursing would be needed. Planning for that possibility now is far less uncomfortable than reacting in a crisis.

## **Working With Your Own Limits As a Caregiver**

Many families walk into assisted living guilt-ridden. A partner may feel they are "breaking a pledge" to look after their partner at home until the end. Adult children sometimes see a parent's relocation as a reflection by themselves schedule or love.

Here is the difficult reality gained from years in senior care: physical care requirements and security threats do not stop briefly to safeguard household pledges. Eventually, what one person can safely do in your home, even with outside assistance, is simply not enough.

A great neighborhood does not change you. It expands the group. It gives structure to the parts of care that are hardest to sustain every day: the night-time bathroom journeys, the constant medication tips, the meals, the tracking for falls. That releases you to focus more on your relationship and less on being the only safety net.

If you use respite care for a trial stay, take note not just to how your parent does, however also to how you feel. Sleep. Notification whether your own health or state of mind begins to improve. Those are data points, not extravagances. Burned-out caregivers make more mistakes, and that affects everyone.

## **Practical Strategies for Visiting Communities**

A couple of small strategies can make your visits more helpful and less overwhelming.

Consider this succinct on-site list when you stroll through a possible assisted living neighborhood:

- Arrive fifteen minutes early and wait in a common area to observe unfiltered interactions.
- Ask to see a space that is ready however not specifically staged and another presently occupied (with the resident's permission).
- Stop and chat with a minimum of two present residents and one member of the family if possible.
- Visit at least as soon as at night or on a weekend when fewer managers are present.
- Take composed notes within an hour of leaving, while impressions are fresh.

If a community is reluctant to let you consult with existing citizens or insists you can just visit throughout narrow "tour times," probe the reasons. There might be a legitimate description, but it deserves understanding.

Whenever possible, bring your parent or loved one on at least one visit. Even when cognition is impaired, individuals typically pick up on atmosphere. They may not keep in mind details, however they keep in mind how they felt. See body language. Do they unwind, smile, engage with others, or withdraw and tighten up?

## **Bringing Everything Together**

Choosing assisted living, respite care, or any senior care setting is seldom a clean, direct choice. Requirements alter. Household characteristics matter. Finances shape choices. There is no best choice, just the best fit readily available within your real-world constraints.



Use what you see, hear, and feel: the concrete details about staffing and security, the legal small print, and the quieter observations from hallways and dining-room. Balance the amenities versus what your loved one actually worths. Treat respite care as a powerful tool, not a last resort.

Above all, remember that you are not simply purchasing a bed and a meal strategy. You are choosing partners in elderly care, people who will witness small, intimate moments in the final chapters of a life story. Take the time to find those who appreciate that duty as much as you do.

BeeHive Homes of Andrews provides assisted living care

BeeHive Homes of Andrews provides memory care services

BeeHive Homes of Andrews provides respite care services

BeeHive Homes of Andrews supports assistance with bathing and grooming

BeeHive Homes of Andrews offers private bedrooms with private bathrooms

BeeHive Homes of Andrews provides medication monitoring and documentation

BeeHive Homes of Andrews serves dietitian-approved meals

BeeHive Homes of Andrews provides housekeeping services

BeeHive Homes of Andrews provides laundry services

BeeHive Homes of Andrews offers community dining and social engagement activities

BeeHive Homes of Andrews features life enrichment activities

BeeHive Homes of Andrews supports personal care assistance during meals and daily routines

BeeHive Homes of Andrews promotes frequent physical and mental exercise opportunities

BeeHive Homes of Andrews provides a home-like residential environment

BeeHive Homes of Andrews creates customized care plans as residents' needs change

BeeHive Homes of Andrews assesses individual resident care needs

BeeHive Homes of Andrews accepts private pay and long-term care insurance

BeeHive Homes of Andrews assists qualified veterans with Aid and Attendance benefits

BeeHive Homes of Andrews encourages meaningful resident-to-staff relationships

BeeHive Homes of Andrews delivers compassionate, attentive senior care focused on dignity and comfort

BeeHive Homes of Andrews has a phone number of (432) 217-0123

BeeHive Homes of Andrews has an address of 2512 NW Mustang Dr, Andrews, TX 79714

BeeHive Homes of Andrews has a website <https://beehivehomes.com/locations/andrews/>

BeeHive Homes of Andrews has Google Maps listing <https://maps.app.goo.gl/VnRdErfKxDRfnU8f8>

BeeHive Homes of Andrews has Facebook page <https://www.facebook.com/BeeHiveHomesofAndrews>

BeeHive Homes of Andrews has an YouTube page <https://www.youtube.com/@WelcomeHomeBeeHiveHomes>

BeeHive Homes of Andrews won Top Assisted Living Homes 2025

BeeHive Homes of Andrews earned Best Customer Service Award 2024

BeeHive Homes of Andrews placed 1st for Senior Living Communities 2025

## **People Also Ask about BeeHive Homes of Andrews**

### **What is BeeHive Homes of Andrews Living monthly room rate?**

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The rate depends on the level of care that is needed. We do an initial evaluation for each potential resident to determine the level of care needed. The monthly rate is based on this evaluation. There are no hidden costs or fees

### **Can residents stay in BeeHive Homes until the end of their life?**

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Usually yes. There are exceptions, such as when there are safety issues with the resident, or they need 24 hour skilled nursing services

### **Do we have a nurse on staff?**

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No, but each BeeHive Home has a consulting Nurse available 24 – 7. if nursing services are needed, a doctor can order home health to come into the home

### **What are BeeHive Homes' visiting hours?**

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Visiting hours are adjusted to accommodate the families and the resident's needs... just not too early or too late

### **Do we have couple's rooms available?**

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Yes, each home has rooms designed to accommodate couples. Please ask about the availability of these rooms

# Where is BeeHive Homes of Andrews located?

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BeeHive Homes of Andrews is conveniently located at 2512 NW Mustang Dr, Andrews, TX 79714. You can easily find directions on [Google Maps](#) or call at [\(432\) 217-0123](tel:(432) 217-0123) Monday through Sunday 9:00am to 5:00pm

## How can I contact BeeHive Homes of Andrews?

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You can contact BeeHive Homes of Andrews by phone at: [\(432\) 217-0123](tel:(432) 217-0123), visit their website at <https://beehivehomes.com/locations/andrews/>, or connect on social media via [Facebook](#) or [YouTube](#)

[Florey Park](#) provides shaded seating and open areas ideal for assisted living and memory care residents during senior care and respite care visits.