

Business Name: BeeHive Homes of Collierville

Address: 1368 Wolf River Blvd, Collierville, TN 38017

Phone: (901) 286-3455

BeeHive Homes of Collierville

At BeeHive Homes of Collierville, Tennessee, we offer the finest assisted living and memory care experience available in a cozy, comfortable homelike 21 bedroom setting. Each of our residents has their own spacious room with an ADA approved bathroom and shower. We prepare and serve delicious home-cooked meals three times a day every day. We maintain a small, friendly elderly care community. We provide regular activities that our residents find fun and contribute to their health and well-being. Our staff is attentive and caring and provides assistance with daily activities to our senior living residents in a loving and respectful manner. We invite you to tour and experience our assisted living home and feel the difference.

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1368 Wolf River Blvd, Collierville, TN 38017

Business Hours

- Monday thru Sunday: Open 24 hours

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Families often explain dementia as a long series of goodbyes. Capabilities fade, habits shift, and the individual you enjoy can appear to wander in and out of reach. In the middle of that grief, practical questions require answers: where will mom live safely, who will help dad bathe, can we keep her in your home, for how long can we manage this?

For numerous, the choice utilized to feel binary. Either battle to keep a loved one at home with patchwork support, or move them into a large assisted living or memory care community that feels clinical or impersonal. Over the last twenty years, a 3rd choice has actually grown silently in many states: little assisted living homes that focus on dementia care, frequently licensed as residential care homes or board and care.

These homes lean on something that dementia consistently respects: familiarity. Familiar faces, predictable routines, a cooking area that looks like a real kitchen, not an institutional line. The goal is not just safety, however a life that still feels like life.

As someone who has actually spent years walking families through these decisions, touring communities, and troubleshooting care strategies, I have seen little homes work incredibly well for the best person. I have actually also seen them fall short when expectations do not match truth. The details matter.

This article looks closely at how and why familiar, little environments can support people coping with dementia, and what to weigh as you think about options.

Why scale and setting matter in dementia care

Dementia impacts more than memory. It alters how an individual processes sound, light, movement, and social cues. Loud dining rooms, long hallways, frequent personnel turnover and consistent activity can press an already stressed brain into overload. When that takes place, you do not just see confusion. You see falls, rejection to shower, roaming, or unexpected agitation that appears to appear "out of no place".

In bigger senior care schools, even well run ones, the environment tends to be:

- Bigger, with longer ranges between spaces and common locations
- Busier, with more people moving through common areas

Those features can be positives for some senior citizens, especially those who are still relatively independent and desire range, clubs, and occasions. For an individual with moderate to innovative dementia, the same functions can end up being stressful. By 4 in the afternoon, when "sundowning" usually heightens symptoms, I typically see homeowners clinging to doorframes or pacing near the nurses' station due to the fact that the building itself does not feel navigable or safe anymore.



Smaller assisted living homes try to turn that script. Rather of large-scale effectiveness, they trade on familiarity and repetition. When your world has actually shrunk, a smaller sized phase can be much easier to manage.

What small assisted living homes for dementia really look like

Families in some cases picture a little home as a single nurse in a 2 bedroom home. The reality, a minimum of amongst trusted companies, is more structured.

A normal residential care home that focuses on dementia care might have 6 to 12 homeowners, personal or semi private spaces, shared living and dining area, and a standard kitchen area. Legally, it is often certified as assisted living or as a comparable classification particular to that state. Staff normally consist of licensed caregivers, sometimes a med tech, and an on call nurse. Physicians, physical therapists, and hospice providers can be found in as needed.

The everyday rhythm can feel much closer to a family home than a facility. Breakfast smells drift from the kitchen area. Someone hums while folding towels at the dining table. The tv might be on a familiar game program. Homeowners wander in and out of the exact same couple of rooms all day.

For somebody with dementia, that simplicity matters. The brain does not require to re find out a maze of hallways or find out which of three dining rooms to utilize. Instead, it can conserve energy for more meaningful jobs, like consuming, strolling, or taking part in conversation.

Not every little home is the exact same. Some tilt greatly toward memory care, with safe and secure doors, controlled lighting, contrast colored toilet seats, and activity programs tailored to cognitive decline. Others market dementia care however are actually general assisted living homes willing to accept homeowners with mild problems. Arranging the difference takes careful concerns and eyes on the details.

Familiarity as a scientific tool, not a nostalgic idea

Families typically talk about familiarity in psychological terms. They desire mom "to feel comfortable" or dad "to be surrounded by his things." Those wishes matter deeply, however familiarity is not simply emotional. It operates practically like a medical tool.

Dementia damages the brain's ability to set new memories, but older, long term memories might stay reasonably undamaged for several years. Familiar objects, regimens, and designs tap into those older memory systems. When an individual recognizes their preferred armchair, the sound of a kettle boiling, or the pattern of strolling from bed room to bathroom, they need less mindful processing to function.

That has concrete effects:

- Fewer "Where am I?" episodes during the day
- Less resistance to care, because the bathroom or dining table feels predictably located
- Reduced stress and anxiety in the late afternoon, when novelty is hardest to manage

In small assisted living homes, the whole environment can be tuned to maximize that kind of recognition. The exact same caretaker offers early morning care most days. Meals occur at approximately the exact same time, at the very same table, often with the same next-door neighbors. The front door does not change, the porch furniture sits tight, the route to the bedroom is short and stable.



None of this treatments dementia. What it can do is lower the cognitive "tax" on each task, so your loved one has more bandwidth left for consuming, walking securely, or enjoying a conversation.

How little homes differ from bigger assisted living and memory care communities

The labels can puzzle anyone. Assisted living, memory care, dementia care, residential care homes, board and care, adult household homes. Various states utilize various terms, and guidelines vary. So it helps to take a look at how small homes tend to run compared to larger settings, despite legal label.

In a bigger assisted living or committed memory care neighborhood, you usually see broader passages, larger common locations, and more structured group programs. Staffing is typically divided by role: caretakers for personal care, med techs for medication, activity personnel, dining staff, house cleaning. Residents may reside in one building and stroll some range to eat or sign up with activities in another.

In a small residential setting, area and staff mix more closely. The caretaker who assists with a shower may also prep lunch, lead music, or sit to chat over coffee. Housekeeping blends into day-to-day rhythms, with homeowners often folding laundry or helping set the table as a kind of engagement. The entire home typically operates in a single, compact "loop" that a resident can walk several times a day without getting lost.

The main advantages households generally discover in small dementia focused homes include:

1. Quicker recognition of personnel and next-door neighbors, which reduces fear.
2. Shorter ranges to the bathroom and cooking area, which cuts down on falls and incontinence.
3. Easier personalization of routines, because staff are handling fewer people.
4. A typically quieter, less revitalizing atmosphere.

There are trade offs. Bigger communities may provide more comprehensive activity calendars, on website physical treatment health clubs, and in home medical clinics. Some have devoted memory care units with specific design features and higher staffing ratios than basic assisted living. For a person in earlier phase dementia who still wants variety and social choices, a larger memory care residence can work well.

The key is to match the environment to the person's existing capabilities and personality, not to a generic idea of "more care" or "more amenities".

Daily life inside a small dementia focused home

When families tour these homes with me, they nearly never ever ask right away about care plans or staff training. They ask what a normal day is like. That instinct is correct. Routines, not mission declarations, shape quality of life.

Morning often begins gradually. Some residents rise early, others oversleep, and caregivers stagger assistance to fit individual patterns. In numerous homes, breakfast is prepared to buy within a modest variety: rushed eggs, toast, oatmeal, fruit. The cooking smells alone can nudge hungers, which tend to decline as dementia progresses.

Personal care tends to be more versatile than in organizations that run on tight schedules. If Mr. K has constantly bathed after breakfast instead of before, personnel can normally adjust. If Mrs. L hates showers but tolerates sponge baths, the group can construct that into her strategy. The small scale suggests staff understand not just diagnoses and medication lists, but habits, preferences, and aching spots.

Activity in a small home seldom looks like a formal "calendar" with color coded events, however that does not imply locals sit idle. Engagement tends to blend with family life: folding towels, snapping green beans, watering plants, arranging photos, sweeping a deck. Much of these tasks are not hectic work. They reconnect people with long held roles as parents, hosts, employees, or homemakers.

Afternoons may involve brief walks in a fenced yard, seated exercises, or music. I have enjoyed residents who might barely recall their grandchildren's names sing entire verses of songs from their twenties. Personnel who understand that power keep music close at hand.

Evenings are generally quieter, which fits the needs of individuals who tire easily and may experience sundowning. Lights are reduced, tv programs are chosen thoroughly to avoid violence or complicated plots, and bedtimes follow personal rhythms when possible. Since there are fewer residents to keep an eye on, caregivers can more easily react to private requirements as they arise.

From the outside, this can look uneventful. From the inside, that steady, predictable life is precisely what many people with dementia need.

Safety and supervision in a smaller sized footprint

Families often fret that a small assisted living home will be "too casual" to be safe. That stress and anxiety is sensible. The best questions will tell you whether a home has thoughtful systems or is merely winging it.

In well run small homes, doors and gates are protected in ways that respect personal privacy while avoiding risky wandering. Alarms, chimes, and visual hints assist staff notification when somebody approaches an exit. Floorings are typically level, with very little thresholds and clutter. Bathrooms have grab bars, raised toilets, and shower chairs as needed.

Staffing ratios differ by state and by time of day, however lots of dementia focused homes aim for one caregiver for every single 3 to 5 homeowners throughout waking hours, and one overnight caregiver for the entire home. Some homes include a "floater" staff who covers meals and individual care throughout peak times.

Critically, because the physical environment is little, a single caretaker can frequently see or hear most of the home without leaving anyone entirely not being watched. Contrast that with a large building, where a fall at the end of a long hallway may go unnoticed for a number of minutes if call systems stop working or a resident can not reach a pull cord.

Medication management is another essential security concern. In certified assisted living or memory care settings, medications are stored firmly and administered on a schedule, often by specifically skilled staff or under nurse guidance. Residential homes that supply dementia care must follow similar requirements, with clear logs, check for high danger drugs, and communication with family and prescribers.

The simpleness of a little home does not replace policy. You still want to see as much as date licenses, evaluation reports, and composed policies. The difference is that in a little setting, policies tend to be lived out in full view, rather than buried in a manual.

The emotional effect on families

One of the hardest parts of moving a loved one into any senior care setting is the sense of quitting, of failing to keep a pledge about "never putting you in a home." I in some cases want we could retire that phrase entirely. It catches a worry, not a reasonable long-lasting plan for a disease that can last ten or more years.

Small assisted living homes can soften some of that emotional weight. Walking into a real house, sitting at a genuine cooking area table, seeing your mom's quilt on her bed rather of a healthcare facility style spread, all of that alters the story. Households often say, "I feel like I am visiting her at a buddy's home."

For adult kids who still work or care for their own kids, a smaller sized environment can likewise make interaction easier. You learn more about all the personnel quickly. They recognize your number when you call, and you understand who is likely to answer the door when you knock at 7 pm on a Thursday. Issues can be attended to on the area instead of routed through layers of management.

There is likewise relief. When 24 hr supervision, specialized dementia care, and routine tasks like bathing and medication are dealt with by experts, family visits can focus more on connection than crisis management.

That does not imply the move is painless or that guilt disappears. However a setting that feels familiar and human sized frequently makes the shift gentler for everyone.

Cost, schedule, and monetary trade offs

For households, finances often drive the last choice more than care approach. Small homes do not exist in every area, and where they do, rates differ widely.

In numerous markets, residential assisted living or little memory care homes charge rates comparable to mid range assisted living communities, often somewhat lower, sometimes slightly higher. Regular monthly costs typically fall somewhere in between private responsibility home care for 8 to twelve hours a day and 24 hr home care, which rapidly ends up being unaffordable for many families.

The primary elements behind cost consist of:

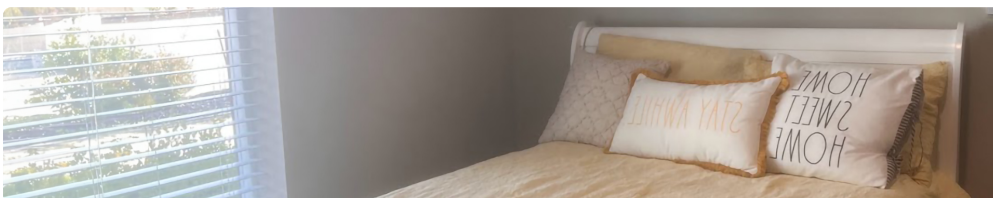
- Staffing ratios and whether there is awake overnight care
- Level of dementia care offered, especially for behaviors or complicated medical requirements
- Location and real estate costs
- Whether services like incontinence materials, transportation, and cable are bundled or billed independently

Some long term care insurance plan cover care in certified assisted living facilities, consisting of small homes if they fulfill state criteria. Medicaid coverage varies considerably. In some states, waiver programs partly fund assisted living or memory look after eligible individuals. In others, alternatives are limited or waiting lists are long.

Availability can be a barrier. A city may have dozens of big assisted living buildings however just a handful of little, licensed residential care homes that really focus on dementia care. Those homes often run near capability, with wait lists.

For households in rural areas, travel distance matters too. The perfect home 90 minutes away might be less practical than a good home 15 minutes away, especially if you want to visit frequently or need to respond rapidly in a crisis.

Financial planning for dementia care seldom follows a neat direct course. Lots of households mix options gradually: at home care and respite care early on, then a little assisted living home or memory care community as requirements intensify, and lastly hospice services layered in towards completion of life. Believing in phases rather than "one permanent solution" can reduce some of the pressure.



When a little home is an especially strong fit

Not everybody with dementia is finest served in a small residence. Some thrive in bigger memory care systems with more structured activities, on website clinics, and a sense of "hustle" that matches their outbound personalities.

From experience, the people who frequently do remarkably well in a small, familiar assisted living home are those who:

1. Become easily overwhelmed by sound, crowds, or complex environments.
2. Already program considerable disorientation in new places, even on brief visits.

3. Have a long history of valuing home, regular, and intimate social circles over big gatherings.
4. Need close guidance for security however become afraid or upset in scientific environments.
5. Have families who wish to stay involved in everyday choices and communication.

On the other hand, somebody in the extremely early stages of dementia who is still driving in your area, handling standard self care, and craving social chances might feel restricted in a 6 bed home. For that person, a larger assisted living neighborhood with excellent memory care assistance may use a better balance.

Similarly, an individual with incredibly complicated medical requirements, such as regular intravenous therapies or ventilator assistance, may need a competent nursing facility despite cognitive status. Small residential homes are usually created for assisted living level needs: aid with bathing, dressing, medications, continence, and mobility, however not extensive medical interventions.

Matching person, disease phase, and environment is challenging, and it is fine to revisit the decision as scenarios alter. A small home that feels best at moderate phase might no longer be able to manage late stage symptoms safely, especially if aggressive behaviors or innovative medical problems develop.

Using respite care to "try on" a little home

For families who are uncertain about a move, respite care can be a helpful bridge. Many assisted living and memory care suppliers, [respite care](#) including some little homes, use short term stays varying from a few days to a couple of weeks. These can cover caretaker getaways, health center discharges, or trial periods.

A respite stay in a little dementia focused home gives you real data. You can see how your loved one responds to the environment, whether they settle fairly well after a couple of days, and how personnel deal with difficult minutes. You also get a taste of life without 24 hr responsibility, which can clarify your own requirements and limits.

Not every home offers respite, particularly if they run near full tenancy. Some reserve a single room for short-term visitors, while others will just supply respite when a permanent bed takes place to be empty. If respite care is essential to you, ask about it early when you begin touring.

Even if a respite stay is not available, spending time in the home beyond a quick tour assists. Visit during a meal, drop in in the late afternoon when residents are most worn out, and watch interactions. The quieter the marketing, the more the daily truth shows.

What to search for when you tour a little dementia care home

When you step within, your impressions matter, but dig much deeper than paint colors and flowers on the patio. Basic lists can assist keep thoughts straight later.

Here is a short one you can carry in your pocket:

1. Smell: Does the home smell fairly tidy, without heavy air fresheners trying to mask smells?
2. Sound: Is the volume of television, discussions, and equipment low enough for somebody with dementia to endure?
3. Staff: Do caretakers understand locals by name, and do they speak with them, not over them?
4. Safety: Are floors clear of mess, bathrooms geared up with standard security gear, and doors secured properly?

5. Engagement: Are citizens simply parked in front of a tv, or are at least some associated with easy, significant activities?

After the tour, ask yourself how you felt sitting in the living-room for fifteen minutes. Could you envision your loved one because space, on a common Tuesday afternoon, week after week? Your body's action typically captures things your brain tries to justify away.

Bringing familiarity into any senior care setting

Even if a small assisted living home is not readily available or not the right fit, you can still apply the power of familiarity in larger assisted living, memory care, or nursing home settings.

Bring in personal products that set off long term memory: family pictures from decades back, a favorite blanket, a familiar design of lamp, the same brand name of toiletries and lotion. Re create bedtime or mealtime rituals as much as possible. If dad constantly shaved after breakfast, talk with personnel to keep that timing.

Share detailed life history with caretakers. What work did your loved one do? What foods did they delight in or dislike? What relaxes them when they are distressed? The more staff can weave familiar themes into day-to-day care, the less alien the new environment will feel.

Familiarity is not limited to physical things. It resides in voices, rhythms, jokes, and little repeated gestures. Whether in a 6 bed home, a hundred bed memory care community, or at home with limited support, those threads can anchor a person whose mind has actually ended up being unstable ground.

Choosing look after somebody with dementia is less about discovering the best building and more about discovering a place where the person can still recognize themselves. Little assisted living homes that focus on dementia care use intimacy and familiarity as their primary tools. For lots of, that method changes senior care from a series of transactions into a daily life that still feels personal and knowable.

The choice is hardly ever easy. It unfolds over conversations, trips, nights of worry, and sincere acknowledgments of what you can and can not do alone. Comprehending how little, familiar environments work offers you another solid alternative to consider, and in some cases, that alternative makes all the difference.

BeeHive Homes of Collierville provides assisted living care

BeeHive Homes of Collierville provides memory care services

BeeHive Homes of Collierville provides respite care services

BeeHive Homes of Collierville supports assistance with bathing and grooming

BeeHive Homes of Collierville offers private bedrooms with private bathrooms

BeeHive Homes of Collierville provides medication monitoring and documentation

BeeHive Homes of Collierville serves dietitian-approved meals

BeeHive Homes of Collierville provides housekeeping services

BeeHive Homes of Collierville provides laundry services

BeeHive Homes of Collierville offers community dining and social engagement activities

BeeHive Homes of Collierville features life enrichment activities

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

BeeHive Homes of Collierville promotes frequent physical and mental exercise opportunities

BeeHive Homes of Collierville provides a home-like residential environment

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

BeeHive Homes of Collierville assesses individual resident care needs

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

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

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

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

BeeHive Homes of Collierville has a phone number of (901) 286-3455

BeeHive Homes of Collierville has an address of 1368 Wolf River Blvd, Collierville, TN 38017

BeeHive Homes of Collierville has a website <https://beehivehomes.com/locations/collierville/>

BeeHive Homes of Collierville has Google Maps listing <https://maps.app.goo.gl/F1PuQmWyGT6PTGmY6>

BeeHive Homes of Collierville has Facebook page <https://www.facebook.com/BeeHiveCollierville>

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BeeHive Homes of Collierville won Top Assisted Living Homes 2025

BeeHive Homes of Collierville earned Best Customer Service Award 2024

BeeHive Homes of Collierville placed 1st for New Mexico Senior Living Communities 2025

People Also Ask about BeeHive Homes of Collierville

What is BeeHive Homes of Collierville Living monthly room rate?

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 of Collierville until the end of their life?

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?

Yes, we have a part-time nurse with an on-call nurse if needed for after hours. We also have a Med Tech on staff that can administer medications

What are BeeHive Homes of Collierville's visiting hours?

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?

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

Where is BeeHive Homes of Collierville located?

BeeHive Homes of Collierville is conveniently located at 1368 Wolf River Blvd, Collierville, TN 38017. You can easily find directions on [Google Maps](#) or call at [\(901\) 286-3455](#) Monday through Sunday Open 24 hours

How can I contact BeeHive Homes of Collierville?

You can contact BeeHive Homes of Collierville by phone at: [\(901\) 286-3455](#), visit their website at <https://beehivehomes.com/locations/collierville/> or connect on social media via [Facebook](#) or [Instagram](#)

Conveniently located near Beehive Homes of Collierville [Malco Collierville Towne Cinema Grill & MXT](#) a great movie theater with full food & drink menu. Catch a movie and enjoy some great food while you wait.