

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.

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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 home for an older parent or relative is one of those decisions you feel in your stomach. It is monetary, medical, emotional, and relational, all at once. Households often wait until a fall, a hospitalization, or caretaker burnout requires the issue, then scramble to examine choices rapidly. That is when people make compromises they later regret.

A mindful, methodical method makes a big difference. With the right preparation, you can move from unclear fear and regret to a clear understanding of what your loved one needs, what different communities actually offer, and how to evaluate quality beyond glossy brochures.

I have actually walked this path with families who were overwhelmed, upset, and exhausted, and I have seen what helps. The information below are practical, not theoretical, drawn from years of dealing with senior care groups, residents, and relatives who wanted the best for individuals they love.

Start by comprehending what "assisted living" really means

Many households think of assisted living as "a nursing home lite" or just "a location with help readily available." In truth, it occupies a particular niche in the senior care spectrum.

Assisted living is developed for older grownups who still have some independence but require constant assist with everyday activities. Those activities consist of bathing, dressing, toileting, moving, eating, and medication

management. Homeowners generally reside in private or semi-private houses and share common areas such as dining-room, activity areas, and outside courtyards.

Medical care is not as intensive as in a proficient nursing center. A lot of assisted living homes have nurses on-site or on call, but they are not set up for people who require day-and-night medical monitoring, complex wound care, or regular IV treatments. The focus is on assistance with daily life, security, social connection, and a structured environment.

You will likewise see marketing terms like "senior living," "retirement community," or "memory care." These can mean:

- Independent living: for fairly healthy seniors who want social life and convenience but little to no hands-on care.
- Assisted living: for senior citizens needing assist with daily jobs however not complete nursing care.
- Memory care: safe and secure systems or separate neighborhoods for citizens with dementia who require specialized guidance and programming.
- Skilled nursing: medical facilities offering 24/7 nursing care and rehabilitation.

Understanding the distinctions prevents you from touring a neighborhood that looks stunning however is not scientifically appropriate, or from paying too much for more medical capacity than your loved one really needs.

Clarify your loved one's genuine needs, not simply what they confess to

Most older grownups underreport just how much help they require. Pride and worry of "being put away" drive them to say, "I'm fine, I simply require a little aid," even when falls, missed out on medications, or unsettled expenses inform a different story.

Before you take a look at any particular assisted living home, take a sober stock in 4 locations: physical, cognitive, psychological, and practical.

Physically, note movement, balance, strength, continence, and stamina. Does your loved one use a walking stick or walker? Can they leave a chair securely? Do they tire after short strolls? Have there been falls, even unexplained ones? Falls are frequently the genuine tipping point for requiring assisted living, even if the person can still shower and dress individually most days.

Cognitively, take notice of memory, judgment, and orientation. Individuals with early dementia may sound sharp in other words discussions however battle with multi-step tasks like managing medications or finances. Have you observed repeated stories, forgotten appointments, or food spoiling on the counter? Did they ever get lost on a familiar path? Mild cognitive decline does not immediately require memory care, but it impacts which assisted living set-up will be safe.

Emotionally and socially, consider state of mind, isolation, and coping. Depression in older adults is frequently masked as "decreasing." If your loved one hardly ever leaves home, prevents activities they once delighted in, or calls you multiple times a day out of solitude, they may benefit from a community with strong social programs. On the other hand, an extremely shy person may feel overloaded in a big, busy structure and do better in a smaller, quieter home-like setting.

On the practical side, examine what you or other caretakers are currently doing. Who handles medications, drives to consultations, look for groceries, cleans up, cooks, and does laundry? Make a list on your own, even if you

never ever reveal it to anybody. That list becomes your baseline to compare to what each assisted living community realistically provides.

Families that skip this self-assessment typically tour based on look and place alone. They might fall in love with a facility that has charming gardens, only to discover later on that it can not handle much heavier care requirements when those needs inevitably arise.

A basic structure for narrowing options

It helps to filter the universe of senior care options into a manageable shortlist before you start visiting. Here is a succinct framework many households discover useful:

1. Define care level: Match your loved one's health, movement, and cognition to the best level of care: independent living, assisted living, assisted coping with memory care, or skilled nursing.
2. Set a sensible budget: Include regular monthly charges, expected increases in time, and any "levels of care" additional charges. Do not forget to factor in existing costs that will disappear, such as utilities, home upkeep, and groceries.
3. Choose a geographical radius: Choose how close the home should be to family, medical providers, and familiar neighborhoods. More frequent visits typically matter more than a prominent zip code.
4. Consider community size and culture: Review your loved one's character. Would they grow in a busy 150-unit building with a jam-packed activities calendar, or a 20-resident board-and-care home that feels like a huge shared house?
5. Screen for deal-breakers: Animal policies, smoking cigarettes rules, religious association, language assistance, and the capability to age in place are all reasons to remove a neighborhood from your list before setting foot inside.

Once you go through these filters, you typically go from a long, frustrating list of options to three to five viable candidates. That number is much easier to evaluate thoroughly.

What to pay attention to when you tour

Brochures and websites show you décor, facilities, and smiling homeowners. A tour shows you how the location works when nobody is seeing. When I visit a new assisted living neighborhood, there are numerous things I focus on before I even take a seat with the marketing director.



Walk slowly through the lobby, typical areas, and halls. Look at locals' faces. Are individuals engaged and engaging, or plunged in chairs facing a television? Combined moods are regular, but if a lot of locals look

withdrawn or ignored for long stretches, that informs you something.

Notice smells, however do not overreact to a single incident. A short smell near a room may merely indicate personnel is in the process of altering somebody. A heavy, consistent odor of urine or strong cleansing chemicals in typical locations signals chronic understaffing or poor housekeeping routines.

Watch personnel habits. Are they strolling quickly yet calmly, or rushing previous residents without eye contact? Do you hear personnel speaking respectfully, using names and describing what they are doing? Or are there raised voices, impatience, or a great deal of "sweetie" and "honey" in location of real names? Culture shows in these small moments.

If you can, ask to see the dining room during a meal rather than at 3:00 p.m. When it is empty and spotless. How is the food served? Exist choices, and do citizens get help if they appear confused or physically restricted? Is anybody sitting alone who looks like they would choose company? Mealtimes are central to mood and nutrition in elderly care, and you can discover more in 30 minutes there than in an hour of sales talk.

Finally, observe security and safety with the same crucial eye. Are exits plainly significant and alarmed if needed, particularly in memory care areas? Are handrails and grab bars put where you would expect? Are there jumbled hallways that might trigger falls? You do not need to be a structure inspector to get a strong gut sense of whether security is taken seriously.

Staffing: the heart of quality senior care

Buildings do not provide care, individuals do. The most lovely assisted living facility on paper can fail your loved one if staffing is too thin or too unstable.

There are three elements to examine: staffing ratios, staff training, and turnover.

Staffing ratios in assisted living are not managed as securely as in medical facilities or nursing homes, and numbers on a page can be deceptive. A neighborhood may declare a "1 to 8" ratio, however that may consist of housekeeping or administrative staff throughout certain shifts. Ask specifically how many direct care staff are on responsibility throughout days, evenings, and nights, and the number of locals they cover. A night shift with one caregiver for 30 locals who require assistance to the restroom is a recipe for falls and accidents.

Training matters just as much. Licensed nursing assistants (CNAs), personal care assistants, and med techs ought to all get regular training on dementia interaction, safe transfers, infection control, and emergency response. Do not be afraid to ask how new personnel are oriented and how frequently they get refresher training. A community that invests in training generally has better outcomes and less crises.

Turnover offers you a sense of culture and stability. Every center has some staff turnover, especially in lower-wage functions. What you want to see is a core of long-time staff members who know locals by history, not simply by space number. If the director of nursing and the administrator have both changed three times in two years, consider that a warning sign.

Families often underestimate how reliant their loved ones will end up being on a few essential staff members. Familiar caretakers can relax agitation, notice subtle modifications in health, and supporter for citizens in ways that no policy manual can replicate.

Using respite care and trial remains to minimize risk

Many assisted living neighborhoods use respite care, implying short-term stays that last from a couple of days to a couple of weeks. These are important when you doubt whether your loved one is ready for a move, or when

you need a safe place while recuperating from caretaker burnout or a hospitalization.

Think of respite care as a test drive. Your loved one can experience the routines, food, and social environment without the mental weight of "I live here now." You acquire real information on how the staff responds to their specific peculiarities and needs.

For example, I as soon as dealt with a family whose father constantly insisted he did not require help, then secretly called next-door neighbors at all hours. He grudgingly accepted "two weeks of respite while my daughter travels for work." By day 5 he was playing cards every afternoon and sleeping through the night. The household and staff might then talk about a permanent relocation based on his real experience, not speculation.

Not every respite stay is a perfect fit, which is details too. If your loved one returns home unpleasant and you find the problems match what you observed: bland food, rigid schedules, staff who appeared hurried, then you know that particular neighborhood is wrong. Much better to learn that in two weeks than after offering a house and signing a long lease.

Reading the contract and comprehending the money

Financial structure is where many families get undesirable surprises. Assisted living prices can look simple on the surface area, yet be complex underneath.

Most communities have a base month-to-month rate that covers housing, standard energies, some housekeeping, and standard meals. On top of that come "levels of care" or "service bundles" based upon just how much support your loved one requirements. Every assistance task, from medication administration to escorts to the dining room, can be tied to a point or tier system.

Ask for a composed breakdown of just what is consisted of in the base rate, and what sets off extra fees. If your loved one currently requires assist with a couple of everyday activities, ask what the estimated expense will be if they later require help with four or five. Their needs will often increase over time.

Pay attention to:



- Rate increase history over the last five years.
- Policies on holding a room throughout a healthcare facility stay.
- Refund terms for deposit or community fees.
- Charges for transport, incontinence products, and additional housekeeping.

Funding sources matter too. Long-term care insurance coverage may repay part of the cost, but only if the policy's requirements are met and the community documents care appropriately. Some states supply Medicaid

waivers for assisted living, however not all facilities accept them, and areas are limited. Veterans might have access to Aid and Presence advantages that can help balance out senior care expenses.

The time to sort out these information is before a crisis, not after an abrupt stroke or a damaged hip. Households who go in with clear eyes and a cushion for future needs deal with transitions with far less stress.

Matching culture and activities to the person, not the brochure

Activities calendars in assisted living brochures frequently look impressive: yoga, art classes, live music, trips, conversation groups. The concern is not the number of products appear on the list, but how well they fit your loved one.



If your mother has actually never taken pleasure in group crafts, she will not suddenly welcome them since they happen in a nice activity space. If your father lights up when talking about history or gardening, you desire a community that uses genuine outlets for those interests, not simply bingo 3 times a week.

During your tour, ask to see citizens throughout an activity, not simply a schedule on paper. Are individuals really engaged, or do they look like they are participating in due to the fact that there is nothing else to do? Are quieter alternatives readily available for those who do not like loud group occasions? Exist options on evenings and weekends, when solitude can intensify?

Spiritual and cultural fit likewise matter. Some neighborhoods have strong religious identities, with regular services or pastoral care. Others are more secular. Language and food culture can be essential for citizens from diverse backgrounds. A community that appreciates and reflects your loved one's identity supports self-respect and psychological health in manner ins which are difficult to measure however easy to feel.

Family participation and communication

No matter how great an assisted living home is, family remains part of the care group. The healthiest circumstances I have seen are partnerships, where personnel, residents, and relatives interact freely and often.

Ask how the community keeps families notified. Do they call you only when something fails, or do they proactively share updates? Exists a designated point individual, such as a care coordinator or nurse, whom you can reach when you have issues? Are care strategy meetings arranged regularly, and can you join by phone or video if you live far away?

Clarify expectations about visits. Some communities encourage families to sign up with meals, outings, or activities. Others are more hands-off. If you plan to stay heavily included with bathing, meals, or transportation, discuss this freely. Assisted living homes need precise assumptions about what your loved one will receive from household, both so they can prepare staffing and to prevent misunderstandings later.

When interaction breaks down, small concerns like a misplaced sweatshirt or a minor medication change can deteriorate trust quickly. Neighborhoods that welcome questions and respond without defensiveness tend to manage larger challenges better.

Red flags that deserve your attention

Not every defect is a deal-breaker. A little outdated carpet or limited parking may be irritating but tolerable. Other indication must prompt serious pause.

Be mindful if you see regular call lights going unanswered for long periods, residents calling out for assistance without reaction, or personnel who appear inflamed or dismissive when locals are confused. Remember if you ask particular questions about staffing, care treatments, or event reporting and receive vague, scripted responses rather of concrete information.

High administrative turnover, opaque monetary practices, or hesitation to share state examination reports are also worrying. Every facility has citations and missteps, however how leadership discuss past problems informs you whether they learn and enhance or just patch and move on.

Trust your instincts. Families typically observe an undercurrent of tension, neglect, or lack of organization that they can not instantly articulate. When you leave a tour feeling uneasy, listen to that sensation and investigate further.

Key concerns to ask on every tour

To keep your visits focused and equivalent, it assists to use a constant set of questions. You can adapt the phrasing, however the core topics should not be skipped:

1. How do you evaluate a brand-new resident's requirements, and how often are those care strategies updated?
2. What is your normal staff-to-resident ratio on day, night, and graveyard shift, specifically for hands-on caregivers?
3. What happens if my loved one's needs increase? Can they remain here, and how are additional costs calculated?
4. How do you manage medical emergencies, hospital transfers, and communication with households throughout those events?
5. Can you share current state inspection results or any substantial deficiencies, and how you resolved them?

Write down the responses as quickly as you leave, while information are fresh. After visiting a number of places, those notes will help you cut through the blur of quite lobbies and similar-sounding promises.

Helping your loved one accept the move

Even when you discover an outstanding assisted living home, the psychological piece stays. Older adults seldom say, "I can not wait to leave my home and move into assisted living." They may fear losing autonomy, buddies,

and familiar regimens. Some also carry stigma from earlier ages when institutional care implied stark, hospital-like nursing homes.

Start conversations early, preferably before a crisis. Frame assisted living as a method to maintain independence safely, not as a punishment or a final chapter. For instance, "If you remain in a place with staff around, you can keep taking walks and mingling without us hovering in worry."

Involve your loved one in choices whenever possible. That might imply letting them choose between two neighborhoods you have actually already vetted, selecting their own room design, or deciding which familiar personal belongings to bring. Even small choices can bring back a sense of agency.

Expect uncertainty and some pushback. I have actually seen individuals who were upset and withdrawn for the first 2 weeks slowly change when they understood they were not losing their household, just their unsafe seclusion. Regular visits at the starting aid, as does keeping outside relationships and regimens when possible, such as participating in the very same church or hosting family dinners on-site.

If your loved one has cognitive problems, decisions might ultimately rest with you or another legal proxy. In those cases, concentrate on what you know of their enduring values. Did they always say, "I never wish to end up in a nursing home"? That does not instantly suggest they would oppose assisted living, which can feel extremely various. Translate their desires because of existing truth and safety.

The first months: what to enjoy and when to adjust

The shift period after moving into assisted living is critical. Locals and families require time to adapt to new routines, people, and expectations. At the very same time, this is when you are most likely to observe mismatches between what was promised and what is delivered.

In the first 30 to 90 days, take notice of:

Energy and mood. Some preliminary tiredness is typical as your loved one adjusts to more stimulation, however relentless withdrawal, weight loss, or agitation are worthy of attention. Ask staff what they are seeing and whether adjustments to activities, roommates, or care regimens may help.

Care follow-through. Are the services recorded in the care strategy in fact taking place? For example, if your mother [senior living](#) was supposed to get assist with showers 3 times a week, does she feel clean and comfortable, or is she still scared of falling in the bathroom?

Communication patterns. Are staff connecting to you properly when there are changes in condition, medication, or habits? Do your calls get returned? Early patterns frequently anticipate long-lasting experience.

If something feels off, address it early and particularly. A lot of assisted living homes prefer to fix issues rapidly rather than let frustration simmer into bitterness and talk of leaving. In some cases a small change, such as adjusting medication times or seating plans at meals, significantly improves quality of life.

In unusual cases, you might understand that a neighborhood simply is not the ideal fit. When that happens, do not view the move as a failure. You learned important info about what your loved one truly requires and what they are sensitive to. Usage that insight to select more carefully the 2nd time.

Choosing an assisted living home is not about finding perfection. It has to do with discovering a location where your loved one can be safe, supported, and known as an individual, not a space number. If you make the effort to understand their requirements, ask clear concerns, observe thoroughly, and trust both proof and instinct, you provide and yourself something precious: the opportunity to move into this new season of elderly care with less fear and more confidence.

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>
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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?

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 BeeHiveHomes 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?

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?

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 Andrews located?

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](#) Monday through Sunday 9:00am to 5:00pm

How can I contact BeeHive Homes of Andrews?

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

Conveniently located near Beehive Homes of Andrews [Cinemark Century Odessa](#) a great movie theater with full food & drink menu. Catch a movie and enjoy some great food while you wait.