

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 neighborhood is among those choices that is both practical and deeply psychological. You are weighing security, medical needs, and money, but also self-respect, identity, and the texture of daily life. Households often tell me they want they had a clearer roadmap before they started touring locations and reading glossy brochures.

What follows is a structured, real-world checklist constructed from years of working in senior care, listening to families, and seeing what really matters as soon as someone moves in. Utilize it as a guide, not a stiff rulebook. Everyone and every household has its own non-negotiables.

A quick 5-step list at a glance

Use this as your high-level roadmap. The rest of the post dives deep into each step.

1. Clarify requirements, choices, and timing
2. Understand spending plan, advantages, and financial restraints
3. Build a brief, practical list of assisted living alternatives
4. Visit, observe, and compare care quality and daily life
5. Review contracts, plan the transition, and reassess after move-in

Most households return and forth between these actions instead of following them in a perfect straight line. That is normal. The point is to keep your decision anchored in a structured procedure rather of whatever center

returns your call initially or has the shiniest lobby.

Step 1: Clarify requirements, preferences, and timing

If you skip this step, everything else gets harder. You will hear sales language from assisted living communities that might or might not match what your parent or loved one in fact needs.

Start with function and safety, not age. 2 82-year-olds can have entirely different assistance requirements. One might still drive, cook, and handle medications, while the other battles with dressing, remembering doses, and falls.

A useful method to think of this is to look at:

- Activities of everyday living (ADLs): bathing, dressing, toileting, moving, consuming, and continence
- Instrumental activities of daily living (IADLs): cooking, shopping, managing financial resources, transportation, housework, handling medications

Even if you never use these terms with a center, having your own rough sense of whether your parent requires light, moderate, or heavy support with ADLs and IADLs will permit you to ask sharper questions.

It frequently helps to have an objective assessment. This can originate from:

A primary care doctor or geriatrician who knows their medical history.

A health center discharge organizer, if you are transitioning after a hospitalization. A care manager or social employee who specializes in senior care or elderly care.

If your loved one has memory loss, ask directly about cognitive concerns. Early dementia can show up as confusion about time, trouble managing money, or duplicated medication mistakes. Not all assisted living facilities are set up for significant memory impairment. Some offer devoted memory care systems, with locked but home-like settings and personnel trained specifically in dementia.

Alongside practical requirements, write down preferences. These matter for lifestyle:

Location: close to family, familiar community, near a specific hospital.

Size: smaller, home-like buildings vs big schools with more amenities. Culture: peaceful and low-key vs active and social. Spiritual or cultural alignment. Pets, outside area, personal privacy, visiting hours.

Finally, be truthful about timing. Are you planning ahead, or are you responding to a crisis such as a fall or caregiver burnout at home? If it is urgent, you might require respite care first, then transition to permanent assisted living once everyone can breathe and plan.

Step 2: Understand spending plan, benefits, and monetary constraints

Money shapes the sensible menu of choices. Families often underestimate total costs, then feel blindsided later.

Assisted living is usually personal pay. Medicare generally does not cover space and board in assisted living facilities, though it might cover certain medical services offered there. Medicaid coverage differs by state and frequently has waitlists, eligibility requirements, and restricted getting involved facilities.

Start by clarifying:

What earnings and properties are offered month-to-month and over the next 3 to 5 years.

Whether there is a long-term care insurance plan, and what it really covers. Eligibility for veterans' advantages, such as Help and Attendance, which can offset some assisted living costs. Whether selling a home is on the table, and if so, on what timeline.



Facilities typically price quote a base rate and then add tiered care charges. For instance, the base might consist of lease, utilities, basic housekeeping, and some meals. Extra costs might apply for medication management, incontinence care, additional escorts, or improved monitoring at night. Two residents in the exact same building can pay really different month-to-month amounts.

Ask yourself what trade-offs you want to make. A center that seems costly in the beginning glimpse might offer higher personnel ratios, better nursing oversight, or a more powerful track record handling complex conditions. A less expensive option that relies heavily on outdoors home-health agencies for even fundamental care can become more pricey and fragmented over time.

It is an error to focus only on the first year. If your loved one has a progressive disease such as Parkinson's or dementia, care needs will rise. You desire a senior care setting that can adjust without requiring yet another disruptive move in a year or two.

Step 3: Construct a short, sensible list of assisted living options

Once you understand requirements and budget plan, resist the urge to tour every assisted living facility within 50 miles. You will stress out, and information will blur.

Start with 3 or 4 candidates that:

Fit within a realistic price range, even after including most likely care fees.

Offer the level of care your loved one needs now, and potentially soon. Remain in places that work for the relative most associated with care.

Information sources include online directory sites, state regulatory websites, regional senior centers, doctors, and word of mouth. Beware with online evaluations. Problems can show one dissatisfied family out of numerous locals, or they may expose patterns such as chronic understaffing or poor food quality.

A useful filter is to look at whether a facility is licensed for assisted living just, or if it also supplies memory care or experienced nursing on the exact same school. Continuing care neighborhoods can reduce shifts as requirements change, but they can also have greater entrance fees and more complex contracts.

Call each facility and take note not just to the content, however to the tone and responsiveness. How rapidly do they return calls? Does the individual on the phone listen, or just recite a script about features? The way a community handles you as a prospective resident often mirrors how they manage families once somebody has moved in.

Ask for basic realities before arranging a tour:

Current base rates and normal total monthly variety for locals with similar needs.

Whether they accept respite care stays, and on what terms. Staffing patterns, especially the existence and hours of certified nurses on site. Any recent ownership or management changes.

If a center declines to supply even broad prices ranges before you visit, recognize that as an information point. Openness at this phase conserves everyone time.

Step 4: Visit, observe, and compare daily life

Tours are typically thoroughly choreographed. The trick is to look past the staged exercise class and fresh flowers.

Plan at least one unhurried visit for each candidate. If possible, address different times of day: a weekday morning and a weekend afternoon expose various truths. Ask if your loved one can join for a meal or an activity, so you can see how they respond.

Here is where you switch from checking out marketing products to utilizing your own senses.

First, notice how you feel when you walk in. Is the atmosphere warm and lived-in, or cold and hotel-like? Do personnel greet residents by name? Are locals sitting in corridors looking disengaged, or are there pockets of activity at various practical levels?

Second, view personnel behavior. Do caretakers seem rushed and stressed, or calm and attentive? Personnel turnover is an important indicator. Every structure has some churn, but constant change can be a red flag. Ask directly how long normal caretakers and nurses stay.

Third, take notice of health and security:

Cleanliness of common areas and bathrooms.

Smells that might suggest poor incontinence management. Lighting, flooring, and handrails that impact fall risk. How personnel assist residents with walkers or wheelchairs.

Fourth, take a look at how medications are dealt with. Medication management is one of the most crucial services in assisted living, and mistakes can have serious repercussions. You want clear systems: locked medication spaces or carts, documented administration, and noticeable oversight by nursing staff.

Finally, assess meals and social life. Food in elderly care is more than nutrition; it is convenience and regimen. Try a meal if possible. Ask whether they can accommodate unique diet plans, such as low sodium or diabetic. Observe whether staff actually assist homeowners who need cueing or physical aid to consume, rather than leaving trays and strolling away.

Many households find it beneficial to bring a short list of questions. Keep it practical and avoid being swayed just by amenities that sound good but might never ever be used.

Here is one focused list of questions to direct your tour conversations:

1. What is the staff-to-resident ratio on days, nights, and overnight, and how is it changed when requires increase?
2. How are care plans established, who takes part, and how frequently are they updated?
3. How do you deal with falls, unexpected illness, and modifications in condition, consisting of when to call 911 or a relative?
4. Can you explain a normal day here for someone with my loved one's capabilities and interests?
5. How do you communicate with households about concerns, occurrences, or gradual decline?

Write responses down. After a few visits, every building's sales pitch starts to sound similar. Your notes assist you compare truths, not marketing language.

Step 5: Assess care quality, staffing, and medical support

The expression "assisted living" covers a wide variety of models. Some communities are greatly hospitality-focused, with gorgeous decor however limited medical depth. Others have strong nursing leadership but less frills. You desire the ideal blend for your situation.

Care quality depends upon staffing patterns, training, guidance, and relationships with external providers.

Ask about:

Who is in fact delivering day-to-day care. A lot of hands-on tasks are done by caretakers or qualified nursing assistants, not nurses or doctors.

Whether there is a nurse in the structure 24/7, just during organization hours, or on call after hours. How frequently medical providers, such as going to doctors or nurse specialists, come on site. What happens when a resident's needs intensify beyond the initial care plan.

If your loved one has complicated conditions, such as cardiac arrest, COPD, insulin-dependent diabetes, or advanced dementia, you will want a community with more powerful clinical capabilities. This might impact cost, but it minimizes frequent healthcare facility journeys and unexpected moves.

Medication management systems vary widely. Some facilities charge per medication pass, others bundle it. For people on several medications, clarify who fixes up brand-new prescriptions after hospitalizations, how they avoid duplication, and how they keep track of for side effects.

Respite care can be a useful tool throughout this stage. A short, time-limited assisted living stay lets you evaluate how a community deals with medications, behaviors, and day-to-day routines without committing to a long-term contract. I have seen families find during a two-week respite stay that an apparently small dementia issue really requires a memory care environment. That discovery, while hard, avoided a bad long-term placement.

Finally, inquire about end-of-life assistance. Even if it feels early, understanding whether a center partners well with hospice, and what residents can remain in location for, tells you something about their approach of care. A senior care company who talks easily and concretely about later stages is typically more experienced and realistic.

Step 6: Read the agreement like a skeptic

Once you have a front-runner, resist the desire to hurry through the documentation. The assisted living agreement is where expectations, rights, and duties live. Problems normally occur not from bad people, but from misunderstandings buried in great print.

Block out peaceful time to read:

How the base charge is specified, and exactly what services it includes.

How care levels or point systems work. There is frequently a schedule that appoints points for each type of support, then equates points into a care tier and fee. Policies on rate boosts, both yearly and due to increased care needs. What sets off discharge or transfer to another level of care.

Pay unique attention to the sections on:

Refunds or credits if your loved one vacates or dies partway through a month.

Resident rights, including complaint processes and how issues can be escalated. Obligation for individual belongings and damage.

It is frequently worth having another trusted person read the agreement as well. If something is uncertain, request a plain-language description and get it in composing, even in the type of an email.

Also clarify the role of outside services. Numerous citizens receive physical therapy, occupational therapy, or nursing through home-health agencies while living in assisted living. Who organizes those services? Where will they happen? How do they interact with the facility about preventative measures and follow-up?

If your loved one is moving in from home, inquire about how they manage the first 30 days. Some communities have informal "trial" periods or additional check-ins as the resident adjusts. Others anticipate households to provide more presence initially, especially if there is anxiety or confusion.

Step 7: Strategy the relocation and the first few weeks

The shift itself can make or break the experience. You are not simply changing an address; you are re-building everyday life.

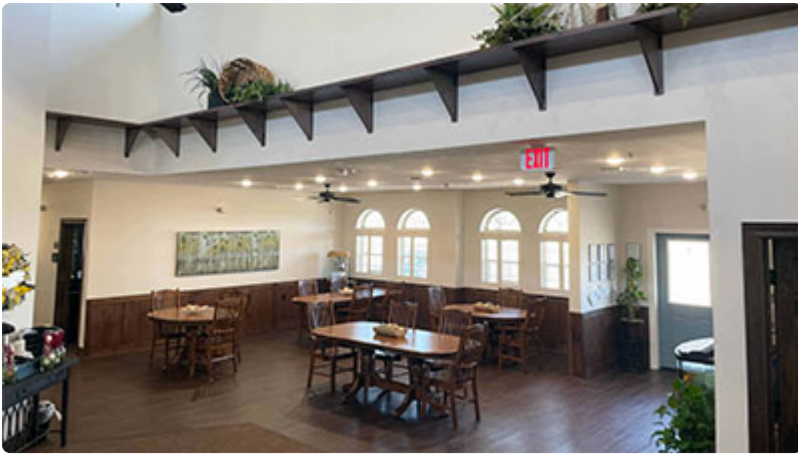
Involve your loved one as much as they can manage. Even somebody with moderate cognitive problems may have the ability to pick favorite chairs, photos, or bedding to bring. Familiar items reduce the shock of a brand-new environment. Attempt to keep treasured possessions, such as a comfortable recliner chair or quilt, even if they are not stylish.



Coordinate with the facility about:

Furniture measurements and what they supply vs what you should bring.

Move-in scheduling to prevent excessively hurried or late-day arrivals, which can be difficult for someone with dementia.



Medication handoff, including having enough doses on hand and updated prescriptions.

For the very first couple of weeks, anticipate emotions. Homeowners might reveal regret, anger, or [beehivehomes.com](https://www.beehivehomes.com) assisted living andrews tx unhappiness. Caretakers in your home may feel guilt or relief, in some cases both at the same time. I have actually seen families interpret a rough first week as a sign the positioning was a mistake, when in truth it was a regular adjustment.

Stay visible, but likewise give staff space to develop their own relationship. Daily visits in the beginning can comfort your loved one, however attempt not to intervene in every small demand. Rather, use that initial period to observe patterns: Is your parent dressed, groomed, and engaged? Do staff seem to know their regimens and quirks?

If your loved one came from home with a very stretched household caregiver, consider using respite care language even for a longer stay. Framing the move as "attempting this out" can minimize the emotional weight, even if you anticipate it to be permanent.

Step 8: Screen, review, and advocate

Choosing a facility is not a one-time decision. It is a continuous relationship. The very best results occur when families remain involved, respectful, and properly assertive.

Keep an eye on:

Changes in appearance, weight, mood, or mobility.

Patterns of falls, infections, or hospitalizations. How quickly and plainly the facility communicates when something happens.

Most assisted living neighborhoods have regular care conferences. Attend them if you can. Use those conferences to upgrade the group on what you are seeing and what matters to your loved one. For example, if your mother is most likely to shower in the evenings due to the fact that she constantly did so, share that. Small information can make care more successful.

When concerns occur, start with the person closest to the problem, such as the nurse or care manager, and intensify stepwise if required. Facilities usually respond much better to specific, factual concerns than to broad allegations. "I have actually found three unopened medication packets in her space in the last month" is more actionable than "you never handle her medications right."

Sometimes, after all efforts, you may understand the fit is incorrect. Possibly your loved one needs a dedicated memory care unit, or a various culture, or a place closer to another member of the family. Moving once again is hard, but staying in a setting that can not fulfill developing needs can be harder. Use what you have actually learned from the very first experience to make a more targeted option the 2nd time.

Balancing safety, autonomy, and quality of life

The heart of assisted living is a fragile balance. You are trying to provide sufficient support to be safe, without stripping away self-reliance and significance. Excessive guidance can feel infantilizing; too little can be dangerous.

In practice, the very best facilities treat homeowners as partners rather than issues to manage. They appreciate long-standing practices, even when those practices are inconvenient. They understand that quality senior care is not just about avoiding falls or managing blood pressure, however also about laughter at lunch, a familiar hymn in the background, or a team member who keeps in mind exactly how somebody takes their coffee.

As you move through this list, provide equal weight to your head and your gut. Numbers and agreements matter. So does the subtle feeling you get when you see staff joking carefully with a resident or taking an additional moment to sit at eye level. Assisted living and elderly care have to do with relationships at their core. If the relationships look right, and the concrete details line up with needs and budget plan, you are most likely very near to the ideal place.

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?

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?

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](tel:(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](tel:(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.