

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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Families looking for senior care frequently image long hallways, big dining-room, and a calendar of activities pinned to a bulletin board system. That describes many conventional assisted living neighborhoods. They have their strengths, but they are not the only design. Over the past decade, small assisted living homes, often called residential care homes or board and care homes, have ended up being an essential alternative for everyday elderly care.

I have actually walked into large, wonderfully embellished structures where a resident might go a whole early morning without speaking with the exact same staff member twice. I have actually likewise beinged in the kitchen of a six-bed home where the caregiver understood exactly how one resident liked her tea and which jokes would make another roll his eyes. Both can provide good assisted living, yet the daily experience is really different.

This post looks carefully at why these smaller homes can work so well for day-to-day elderly care, what trade-offs they bring, and how families can evaluate whether this model fits their situation.

What "small assisted living homes" in fact are

Terminology differs a lot by state. A small assisted living home might be certified as a residential care home, personal care home, board and care home, or similar label. Below the regulatory language, the idea is simple: a house-sized setting where a small number of older adults get support with day-to-day living.

Typical features include private or semi-private bedrooms, shared living and dining areas, and 24-hour staffing. Licensing guidelines cover staffing ratios, medication management, security functions, and training requirements. In lots of areas, these homes are capped at 4 to 16 citizens, though exact numbers depend on local law and zoning.

Families in some cases worry that "home" equals "unregulated" or "informal." That is not the case for reputable service providers. They typically follow the same assisted living regulations as bigger communities, but they apply them in a residential rather than institutional setting. Asking direct questions about licensing, assessments, and staff training quickly reveals who takes compliance seriously.

The everyday rhythm: where small homes shine

When people relocate to assisted living, what shapes their quality of life is not the sales brochure. It is the everyday rhythm: who assists them out of bed, how often somebody checks if they are hungry or restless, whether personnel have sufficient time to observe a modification in mood or mobility.

In smaller homes, that rhythm tends to feel more like extended family life. Staff spend more minutes per resident merely due to the fact that there are fewer citizens contending for attention. A caretaker who helps with the early morning routine may be the exact same individual who sits down during a peaceful afternoon to view a favorite show, and later helps prepare for bed. Familiarity develops quickly.

I as soon as worked with a gentleman who moved from a big assisted living to a six-resident home after a stroke. In the huge structure, timers governed the schedule. Showers had actually repaired days. Meals served on the dot. Activities printed weeks ahead. That predictability helped some residents, but he felt rushed and frequently avoided group programs. In the smaller home, his day moved. Breakfast became "whenever he roamed into the kitchen area in between 7 and 9." The caretaker would greet him with, "Toast day or oatmeal day?" That basic option, at his own pace, did as much for his sense of dignity as any official care plan.

Caregivers in small homes likewise tend to see the complete arc of a resident's day. If someone is unusually sleepy, has less cravings, or goes to the bathroom three times more than usual, it stands out. In bigger buildings, those pieces of info may be spread amongst numerous team member and various departments. In a home with eight locals, the overnight aide can easily tell the morning shift, "Mrs. J was up more than normal, watch on her," and understand she will be heard.

None of this indicates large assisted living can not use warm day-to-day care. Lots of do. The point is that small scale makes sure quality practices more natural and automatic.

Personalization that actually sticks

Every assisted living community speak about "customized care." The difference in small homes is how often care strategies really associate everyday practice.

Personalization in a small residential home usually appears in small, unglamorous details. Which side of the bed someone prefers to leave from. Whether they like to move using a specific chair arm instead of a walker. How much prompting they need to remember their listening devices. In a home with 6 or 8 residents, staff can keep in mind these preferences without browsing a binder.



Families often tell me they are impressed when, within the first week, personnel in a small home call their parent by a nickname just relatives generally use. Not since they pulled it from a chart, but because there has been time to talk, reminisce, and listen. Those conversations are not "additional." They are the medium through which excellent elderly care happens.

This level of familiarity particularly benefits residents with dementia. A confused person fares much better when the faces around them are consistent and the regimens versatile enough to adjust to that individual's mood. In a smaller setting, a resident having a rough morning can remain in pajamas a bit longer, consume breakfast in the living-room rather than the dining table, or rate the very same corridor without feeling exposed in front of lots of others.

Personalization also extends to cultural and spiritual practices. I have seen small homes adjust weekly menus around one resident's long-held Friday fish tradition, or silently set up transport for a regular monthly worship service since they understood how deeply it mattered. In a huge structure, even when personnel care, the sheer size can bury such gestures under workload and schedules.

Social life on a human scale

Families often presume that larger buildings imply much better social life. More locals, more potential pals. In some cases that is true, especially for very extroverted elders who flourish on a jam-packed calendar. Nevertheless, lots of older grownups do not always desire ten alternatives a day. They want 2 or 3 significant contacts that feel natural, not forced.

In a small assisted living home, social interaction tends to take place in shorter, more regular bursts. A resident strolling through the open kitchen area will undoubtedly talk with whoever is cooking. Somebody reading in the living room may spontaneously join a puzzle another resident has begun. Staff can easily see who invests too much time alone and casually loop them into discussion without making it an official "activity."

For individuals who have actually grown more private with age or who fatigue quickly, this softer social fabric can be less daunting than big, structured events. One retired engineer I worked with utilized to avoid most scheduled activities in his previous big neighborhood. In the small home he moved to later on, his social life gradually reconstructed through simple regimens: examining the mail with another resident, listening to baseball on the radio with a caretaker who was a real fan, feeding the house feline together. None of that appeared on an activities calendar, yet it mattered.

Of course, there are trade-offs. Small homes rarely have on-site fitness centers, theaters, or comprehensive clubs. Numerous partner with recreation center, going to artists, and volunteers to use variety, however the scale is different. Households should consider their loved one's social design. A very gregarious person who enjoys big

crowds and occasions might discover a small home quiet after a while. Others discover that the calmer environment decreases stress and anxiety and makes social interaction feel more manageable.

Staffing, oversight, and genuine accountability

One of the greatest benefits of a small setting is how noticeable everything is. Locals, staff, and management share the same space. There is less room, actually and figuratively, for issues to hide.

From a staffing point of view, ratios frequently favor the resident. In a normal residential care home, you might see one caregiver for every 3 to 6 citizens during the day, and a single awake or sleep-over staff individual at night, often with an on-call backup. In a big assisted living, the ratio can be greater, specifically over night, where one or two aides may cover lots of locals spread out throughout several wings.



More essential than raw numbers is connection. In small homes, the very same staff typically work consistent shifts for the very same group of citizens. That stability builds deep knowledge. It also makes turnover more obvious. If a precious aide disappears and new faces appear continuously, households observe quickly and can ask why.

Owners or administrators of small homes tend to be really present. Many live neighboring or even on site. I have seen owners personally drive locals to specialist appointments, attend care conferences, or help fix behavior modifications since they genuinely know the individual. When something fails, such as a fall or medication mistake, there are less layers between the front line and choice makers. Course corrections can [respite care](#) be faster.

Oversight is not perfect in any setting. A small home can be run inadequately, simply as a large structure can. Families must always ask about examination histories, grievance records, and personnel training. Yet in a small setting, continuous household involvement is typically more practical. Dropping in unannounced, sharing a meal, or sitting quietly in the living-room for an hour reveals a lot. You see how personnel speak to locals, how quickly calls for help are addressed, and whether the environment feels calm or frantic.

Practical differences in day-to-day care

To understand whether a small assisted living home will serve your household well, it helps to visualize the day from waking to bedtime. A number of patterns tend to vary from bigger settings.

Mornings typically stagger naturally. Rather than dozens of individuals trying to bathe, dress, and line up for breakfast at a set time, residents in small homes wake according to their own rhythms, within reason. Caregivers are not racing a group dining schedule, so they can allow a bit more time for slow movers or nervous bathers. A resident who has never been an early morning person does not require to unexpectedly end up being one.

Meals feel more like household dining. Food cooks in a genuine cooking area. Odors drift into bed rooms and the living room. Homeowners can watch, comment, help set the table, or chop veggies if they are able. Portion sizes adjust casually. Someone who desires a smaller lunch and a more considerable night meal can be accommodated without a long demand process.

Medication management is usually centralized but visible. Staff may utilize locked cupboards in the kitchen or a devoted med room, yet administration often occurs in typical locations where citizens currently are. This lowers the sense of "going to the nurse's station" and enables personnel to keep an eye on residents for any immediate responses or side effects.

Personal care, such as toileting, bathing, and dressing, typically has more flexibility. A resident who is frightened of showers may move to sponge baths for a time, then slowly reestablish brief showers with familiar staff. It is simpler to experiment when there is not pressure to move a long line of other residents through the very same routine.

Family involvement tends to be casual and welcome. Grandchildren can curl up on the sofa for a visit. Buddies can share a cup of coffee in the kitchen. Pets are frequently permitted, within safety limitations. The environment invites visitors to remain a while instead of hover in a lobby or formal going to area.

When small homes support greater needs

Many families presume that small assisted living homes are only for reasonably independent senior citizens. In reality, a great variety of these homes are set up to support residents who have higher care requirements, sometimes near what a nursing facility might offer, depending upon state rules.

For example, I have seen small homes successfully care for:

Residents with moderate to sophisticated dementia who require frequent cueing, mild redirection, or close supervision so they do not roam out of safe areas.

Residents who are physically frail, maybe needing two-person assistance or mechanical lifts for transfers, in partnership with home health or hospice services.

Residents with intricate medication regimens, involving insulin injections, inhalers, and multiple everyday tablets, managed under nurse oversight.

This greater skill care works well in small homes when 3 conditions meet: stable staffing, great external medical support, and clear interaction with families. Because staff see each resident so frequently, modifications in condition are usually discovered early. A resident who strolls a bit slower, eats a little less, or seems off balance will draw fast attention.

However, small homes are not an intensive care unit. Particular medical scenarios still require nursing homes or healthcare facility care. Large injury care requirements, frequent IV medications, or complicated medical devices can stretch the capacity of a residential setting. That is where truthful evaluation and clear contracts matter. A reliable small home will be very explicit about what they can and can not safely handle, and will not be reluctant to recommend a greater level of care when appropriate.

Respite care: evaluating the fit without a long commitment

Respite care is a short-term stay that provides household caregivers a break while their loved one receives professional elderly care. Many small assisted living homes provide respite stays keyed around a day-to-day or weekly rate, often with a minimum of a couple of days.

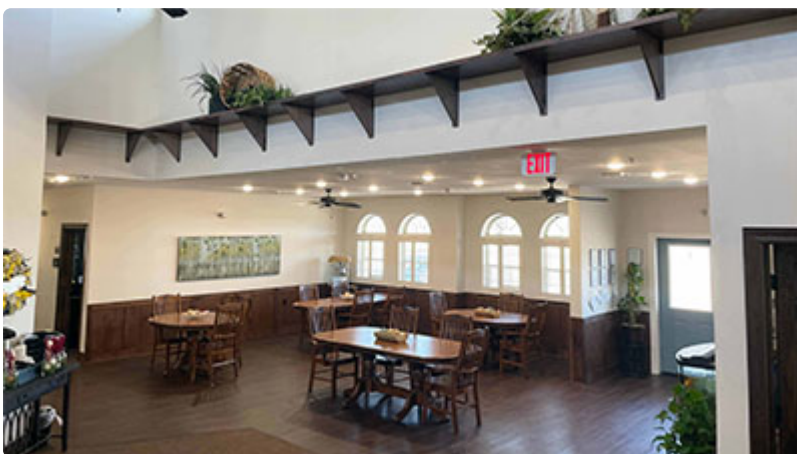
For caregivers who are uncertain whether a small home design will suit their parent, respite care supplies a low-risk trial. The resident gets to experience day-to-day routines, meet personnel, and check the physical environment. Families see how communication feels, how well the home handles medications and individual care, and whether the resident's mood modifications for better or worse.

I often encourage caretakers who are on the fence in between a big community and a small home to use respite strategically. Set up a a couple of week remain in each kind of setting, if possible, separated by a long time at home. Pay attention not just to your loved one's feedback, however also to your own stress levels, just how much details you receive from personnel, and how quickly you can reach somebody who understands what is going on day to day.

Respite care also matters when a main family caretaker deals with surgical treatment, a business trip, or easy burnout. A small home can feel less disorienting to a frail elder than a big building, particularly if they are coming straight from a personal home. The transition from "my home" to "a house that appears like a huge household's house" frequently feels less jarring.

Key benefits of small assisted living homes at a glance

Here is a succinct introduction of benefits numerous families see when picking a smaller residential home for senior care:



- More individualized attention due to the fact that staff take care of less citizens and see them throughout the day
- Home like environment that reduces institutional feel and can ease anxiety or confusion
- Stronger relationships amongst homeowners, staff, and families, which supports trust and better communication
- Easier tracking of subtle health or behavior changes, frequently capturing problems earlier
- Flexible day-to-day regimens that can adapt to long-lasting routines, cultural practices, and altering capabilities

Trade offs and truthful limitations

No senior care alternative is ideal. Small assisted living homes bring trade-offs that deserve clear eyes.

Space and amenities are restricted by the physical size of a home. There is hardly ever room for a devoted fitness center, theater, or several activity spaces. Corridors might be narrower, which can matter for homeowners using large devices. Outside access generally means a backyard or outdoor patio rather than extensive premises. For lots of seniors, this comfortable scale is reassuring, however anybody used to long indoor walks or huge group occasions may feel constrained.

On site medical presence is usually lighter. Bigger neighborhoods in some cases have nurse professionals checking out frequently, on-site therapy fitness centers, or partnerships with centers. Small homes rely more on visiting nurses, therapists, and physicians. That works well when coordination is strong, but can falter if communication lines break down or regional providers are stretched thin.

Costs differ more than many people anticipate. Some small homes offer very competitive rates relative to huge neighborhoods, especially when you consider the level of hands-on care included. Others, particularly in high-demand neighborhoods, can be more expensive. Since there are less residents, the expense of staffing, lease, and energies spreads out across a smaller base. It is important to get an in-depth charge schedule and ask exactly what is covered and what triggers added costs.

Coverage by insurance and public programs may likewise differ. Long-term care policies generally cover licensed assisted living regardless of size, however you should confirm home eligibility. Medicaid waivers, where readily available, frequently have specific agreements with particular providers. Not every small home gets involved. Households relying on public financing need to inspect those details early.

Lastly, not all families are comfortable with the level of intimacy that small homes create. Siblings might disagree on whether a parent requires that much oversight. Some senior citizens choose the anonymity of a large structure where they can blend in and pick when to engage. Personality, history, and family characteristics matter as much as the care model itself.

How to examine a small assisted living home

When you step into a prospective home, the first impression typically tells you more than the tour script. Take notice of what you feel in your body. If your shoulders drop and your breathing slows, that is information. Still, sensations gain from structure. During visits, lots of families discover it useful to keep a simple psychological checklist focused on five areas:

- Safety and cleanliness: clear pathways, grab bars, smoke alarm, safe exits for residents with dementia, no strong odors masked by air freshener
- Staffing truth: variety of personnel on responsibility, how they talk to homeowners, whether they appear rushed or present, and whether an administrator or owner is easily obtainable
- Resident experience: facial expressions, whether individuals look engaged or withdrawn, how personnel react to call bells or spoken requests
- Daily life: what is cooking in the kitchen area, whether anybody is talking or listening to music, how flexible routines seem, and whether individual items are visible in locals' rooms
- Communication routines: how particular staff are when answering questions about care, medication schedules, bathing regimens, and household updates

After the visit, compare notes amongst member of the family. Frequently someone notifications the physical environment, another picks up social cues, and a third zeroes in on personnel professionalism. That composite view supplies a much better photo than any single perspective.

Matching the model to your household's reality

Assisted living, respite care, and broader senior care choices typically emerge from tension: a fall, a hospitalization, a caregiver reaching completion of their rope. Under pressure, it is tempting to grab the first alternative a discharge organizer suggests. Taking a step back to ask, "What kind of every day life would my parent really flourish in?" can alter the trajectory.

Small assisted living homes excel when a person worths familiarity, calm, and close relationships, and when their care needs gain from regular observation and versatile routines. They fit families who wish to be involved and present, but who require reputable partners to share the weight of elderly care. They are especially effective when utilized attentively for respite care to check fit and foster trust before a long-term move.

For some senior citizens, the busier environment and extensive facilities of a larger neighborhood line up much better with their character and goals. That is not a failure of the small home design, just a various match.

What matters most is not the size of the building. It is whether, in that place, your loved one is seen, heard, and assisted to live the fullest variation of life that their health enables. Small assisted living homes, when well run, typically make that sort of attentive, human-scale care simpler to deliver day after day.

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

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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](#)

Take a drive to [Dairy Queen](#) . Dairy Queen offers a familiar, quick dining option ideal for assisted living, memory care, senior care, elderly care, and respite care treats or casual meals.