

Business Name: BeeHive Homes of Levelland

Address: 140 County Rd, Levelland, TX 79336

Phone: (806) 452-5883

BeeHive Homes of Levelland

Beehive Homes of Levelland 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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140 County Rd, Levelland, TX 79336

Business Hours

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

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Picking a memory care neighborhood is not simply a real estate choice, it forms the last chapters of someone's life. Families reach this crossroad for lots of reasons. A parent has actually begun roaming at night. A spouse with dementia can no longer be safely raised after a fall. The main caregiver is tired after months of interrupted sleep. Good memory care reduces these stress. It stabilizes security with autonomy, and clinical oversight with everyday pleasure. The difficult part is discriminating between polished marketing and a place that will truly meet your loved one's needs.

This guide [assisted living](#) makes use of years of deal with families, nurses, and administrators inside senior care. It concentrates on what to try to find, what to ask, and how to judge trade-offs that seldom show up on glossy brochures.

What memory care is, and what it is not

Memory care is a specific type of senior care created for people dealing with Alzheimer's illness and other dementias. It is generally housed within an assisted living neighborhood or a freestanding structure. Compared to traditional assisted living, memory care uses protected environments, more personnel training in dementia care, structured day-to-day regimens, and customized activities that reduce anxiety and confusion.

It is not a healthcare facility, even if there is a nurse on website. Memory care bridges two requirements that typically pull in opposite directions: safety and normalcy. The very best neighborhoods keep individuals safe without making them feel put behind bars. They support choice making without setting locals up to fail.

If you are unsure whether it is time, consider risk. Repeated wandering outside, range fires, frequent falls, weight-loss from missed meals, incontinence that overwhelms home resources, and aggressive behaviors that put someone at danger, all point toward the requirement for specialized dementia care. Respite care, which is a brief stay in a memory care setting, can help you evaluate the fit and capture your breath without committing to a long lease. Lots of families utilize respite care after a hospitalization or during a caregiver's medical leave to see how their loved one responds to the structure and staff.

The care design under the hood

Every tour will discuss person-centered care. What matters is the machinery behind the phrase. The heart of the model is staffing, scientific oversight, and how the team responds to habits and health changes.

Staffing ratios. There is no single national standard for memory care staffing, since policies vary by state. Virtually, try to find daytime caregiver ratios in the series of 1 to 5 or 1 to 8, depending upon skill, and greater ratios during the night, often 1 to 10 or 1 to 15. Ratios alone do not inform the full story. Ask how personnel are deployed. A ratio of 1 to 6 on paper can feel unsafe if half the group is on break or drifting to another unit. Excellent operators schedule predictable breaks and float protection so locals are not left waiting throughout meals and bathing.

Training. Dementia care is not instinctive. Quality neighborhoods provide at least 8 to 16 hours of specialized onboarding on dementia communication, redirection techniques, and understanding of different dementias like Lewy body and frontotemporal disease. Ongoing in-services, usually monthly, keep abilities fresh. Training must include nonpharmacologic approaches to agitation, safe transfers, infection acknowledgment, and how to engage people with aphasia. Ask to see a sample training calendar, not simply a brochure.

Clinical oversight. Memory care is typically managed by a nurse, typically a registered nurse who leads care planning and supervises medication technicians. Some buildings also host visiting medical care providers, psychiatric nurse professionals, physical and occupational therapists, and hospice teams. The very best setups consist of weekly or biweekly rounding by a doctor who can adjust medications and catch infections or dehydration early. A nurse who knows the residents will discover when a quiet individual ends up being quieter, or when a chatty person's words lose focus, and will link those changes to possible medical issues.

Medication management. Behavior in dementia is frequently a form of communication. Medications that sedate can quiet the habits but likewise strip away movement and cognition. Seasoned teams utilize antipsychotics and benzodiazepines with caution and track adverse effects weekly throughout the very first month. They work with prescribers to taper, and they trial environmental repairs initially. Door camouflage, soothing music before sundown, pain control, bowel programs, and walking programs can minimize the really habits that set off medication use.

The environment tells the truth about priorities

Design can either soothe or confuse. Walk the corridors gradually and view how residents move.

Layout and wayfinding. Memory care units with loops allow locals to walk without dead ends that can trigger frustration. Short sightlines to dining-room and activity spaces assist people get involved. Try to find clear, large-print signs, contrasting colors on restroom thresholds and toilet seats, and shadow boxes or memory displays by doors that hint space ownership. Customized entrances show the group values identity, not simply space numbers.

Lighting and noise. Bright, natural light decreases sundowning and improves sleep. Ask whether the community uses circadian lighting or a minimum of avoids severe fluorescent glare. Noise matters. Television volume in typical spaces that overwhelms conversation is a red flag. The spaces should hum, not roar.

Safety functions. Secure yards supply safe access to fresh air. Fencing ought to mix in, not feel punitive. Doors might be alarmed or use code pads. Wander management systems, like discreet bracelets, enable liberty within set zones. Fire defense, smoke barriers, and sprinklers should be apparent and code certified. Floors need to be matte, not shiny, considering that glare can look like water or holes to individuals with dementia-related visual changes.

Privacy and dignity. Take a look at bathrooms. Are they clean, bright, and equipped with incontinence products in such a way that does not advertise a resident's obstacles to every passerby. Exist lift systems or ceiling tracks in rooms where locals need two-person transfers. If not, how do staff protect backs and hips, both theirs and locals'.

Life between breakfast and bedtime

Programs that look lively at 11 a.m. And dead by 3 p.m. Frequently rely too much on a single activities director. Real life needs rhythm. Individuals with dementia do finest with predictable regimens, little group engagement, and significant tasks.

Activities. Great calendars are not the objective. Involvement is. Search for mixed activities across the day: baking, garden walks, chair yoga, singalongs, and individually visits for those who prevent groups. Cognitive stimulation can be as basic as arranging nuts and bolts for a retired mechanic or folding towels for a former housewife who found pride in a neat linen closet. Ask how the group engages individuals who decline activities or nap throughout the day. A competent aide will welcome, not require, and will adjust the task so the person feels successful.

Meals. Food brings convenience. Examine whether meals are served family design or plated. Finger foods assist those who struggle with utensils. High caloric density matters for individuals who rate. Watch a meal if you can. Do staff sit and hint, or do they hover at a range. Are adaptive cups and plates readily available. Hydration stations with fruit-infused water or tea work, but just if personnel timely sips throughout the day.

Bathing and personal care. Bathing can trigger stress and anxiety. The most efficient approach is versatile scheduling and a calm speed. Look for non-slip seating, hand-held shower heads, and warmed towels. Ask how the group interprets refusal. Is it a hard no, or does somebody try once again later with a various assistant who has better relationship. The answer exposes whether self-respect is practiced or just preached.

Sleep. Nights can be agitated for individuals with dementia. Some communities run calming late-evening programs, like quiet music, hand massages, and dimmed lights. Others turn off the lights and expect the very best. If your loved one wanders in the evening, ask how they are supervised in between midnight and 5 a.m., when staffing is thinnest.

Culture appears in little moments

You can sense culture in how staff welcome each other and homeowners. Do aides know the names of relative. Do they laugh with citizens without mocking them. Are managers visible outside of tours and meetings.

Leadership stability matters. High administrator or nurse turnover normally ripples through the structure. A team that has actually collaborated for years prepares for problems before they swell. Ask how long the executive director, nurse leader, and department heads have actually remained in place. Short tenures are not immediately

bad if the operator is purchasing a turn-around, however you need to penetrate what altered and what is improving.

Communication standards matter too. Memory care is a three-way relationship between the resident, the group, and the household. Neighborhoods that schedule quarterly care strategy conferences, return calls the same day, and share small wins develop trust. One neighborhood I dealt with sent out a weekly photo and two-sentence upgrade to households. It was easy, yet it brought down stress and anxiety and hospitalizations because member of the family stayed engaged.

Health combination, hospice, and hospital use

Dementia care does not take place in a bubble. Locals still get urinary system infections, pneumonia, heart failure, and fractures. Try to find a care design that can react inside the structure whenever possible. Point-of-care laboratory draws, telehealth with the medical care team, and relationships with mobile x-ray services can reduce disruptive ER trips.

Hospice and palliative care are not failures. They are tools. A great memory care neighborhood partners with hospice agencies and comprehends when to refer. If your loved one is dropping weight, withdrawing from activities, or experiencing frequent infections, palliative conversations can align care with comfort. Ask where end-of-life care normally happens. Many people choose to pass away in place, with familiar personnel and family close by. That takes training, coordination, and a clear prepare for symptom management.

Falls take place. What matters is how the neighborhood learns from them. Incident evaluations should be routine. Was the flooring damp. Were shoes appropriate. Did a new medication cause lightheadedness. Neighborhoods that track patterns can lower repeat falls without resorting to unneeded restraint, that includes chemical restraint.

Cost, contracts, and what the fine print hides

Memory care is pricey. In lots of regions, month-to-month base rates vary from 5,000 to 10,000 dollars, in some cases higher in significant metro locations. Pricing designs vary:

- Some neighborhoods use complete rates, where the base rate covers room, board, and most care.
- Others utilize tiered care levels, adding fees as support requires increase, for example an additional 800 dollars for help with two-person transfers or incontinence care.
- Medication management can be included or billed per medication pass.
- Respite care is typically billed per day or week at a slightly higher rate but without a long-term commitment.

Ask about annual rate boosts. Typical ranges are 3 to 7 percent annually, but inflationary spikes can press higher. Clarify what triggers a relocate to a higher care tier. If your loved one develops habits that need additional staffing, the month-to-month costs might climb up quickly. Contracts should define notice durations for moving out, refund policies, and what takes place during hospitalizations. Some communities hold the space at complete or partial rate during a healthcare facility stay, others permit momentary holds at a decreased fee.

Insurance seldom spends for space and board. Long-term care insurance may compensate part of the expense if the policy consists of memory care. Medicaid protection for memory care differs by state and is typically tied to assisted living waivers. Veterans and making it through partners may get approved for Aid and Presence advantages. Credible administrators help families browse these programs without overpromising.

How to read quality information without getting misled

Unlike nursing homes, numerous memory care systems sit inside assisted living and are not ranked by a federal Luxury system. Quality oversight depends on state licensing. You can request state survey reports, which note deficiencies and restorative actions. A shortage is not constantly a deal-breaker. Repeated patterns matter more than a one-time citation for a documentation lapse. Ombudsman offices can share complaint patterns and assist families resolve concerns.

Online examines capture extremes. Look previous star ratings and check out for specifics. Constant styles, like bad interaction or frequent staff turnover, should have weight. Beware about confidential rants that do not line up with what you see throughout a visit.

Touring strategy that saves time and exposes truth

Tours arranged mid-morning on a weekday are often the community's best foot forward. You should see that variation, however likewise its opposite. Visit once again throughout dinner or on a weekend. Listen for how personnel react to buzzers, who sits with homeowners throughout meals, and whether managers exist or reachable.

Consider utilizing respite care for a week or 2 if the community offers it. A brief stay reveals how your loved one reacts to the environment. You will find out more from 3 bath attempts, two meals, and a Sunday afternoon than from any brochure.

Here is a concise tour-day list to keep you focused:

- Arrive unannounced for a 2nd visit at a various time of day and watch a meal.
- Ask three direct-care assistants for how long they have worked there and what training they get.
- Request to see the activity in a little group space, not simply the centerpiece in the lobby.
- Review the last state study and ask what changed in response.
- Walk the yard and check whether exits are safe however still feel humane.

Red flags you must not ignore

- Strong urine or fecal odors that linger beyond a specific occurrence, which frequently indicates chronic understaffing or poor infection control.
- Residents parked in wheelchairs along corridors with no engagement for long stretches.
- Staff who discuss locals in front of them as if they are not there.
- Confused medication practices, like unsecured med carts or hurried passes with frequent errors.
- Leadership that can not articulate staffing ratios, training hours, or how they deal with escalating behaviors.

Family participation and the rhythm of care planning

Families understand histories that do not always suit medical charts. The bio of a former instructor who soothes when given reading material, or the Army veteran who reacts to structure and clear instructions, can change daily results. Bring that understanding. Lots of neighborhoods utilize a life story kind. Exceed preferred foods. List subjects that trigger stress and anxiety, spiritual choices, music that relieves, and previous regimens. If mornings were always sluggish, pressing a 7 a.m. Shower might backfire.

Expect a care plan within one month of move-in, then a minimum of quarterly or after any substantial change. These meetings should move from problems to useful actions. If weight is down 5 pounds, who will cue 2nd

aidings. If hostility takes place during bathing, what time of day and which team member yields much better outcomes. After the meeting, verify the strategy in writing so shift changes and new hires do not eliminate progress.

Communication needs to be two-way. Neighborhoods that share little triumphs build trust, and households that share upcoming medical appointments or travel strategies help the team plan staffing and engagement.

Moving day, regret, and what a soft landing looks like

The hardest part is often psychological, not logistical. Families often carry guilt, even when home care is unsafe. It assists to frame the move as an extension of care, not a surrender of it.

Preparation smooths the landing. Bring familiar products that cue identity, like a preferred chair, quilt, or wall photos put at eye level. Avoid clutter that confuses navigation. Label clothing plainly. If your loved one constantly kept a watch on the left-nightstand, place it there. Routines matter on day one. If coffee at 9 a.m. Was spiritual, inform the team.

Expect a wobble. Many homeowners are more baffled or agitated for the first one to 2 weeks. Good teams increase one-on-one time during this window, schedule reassuring check-ins, and minimize huge group needs. You can help by going to sometimes that align with calm durations, not during bathing or shift change. If the person asks to go home, prevent arguing facts. Validate the sensation and redirect to something tangible, like a walk in the courtyard or an image album.

Respite care as a bridge and a barometer

Short remains serve several purposes. They give caregivers time to recover, and they provide data. If your loved one needs more prompting than the building can deliver even throughout respite, it may signify that the environment or staffing level is not adequate. On the other hand, if sleep improves and roaming eases, the structured regimen might be working. Usage respite care to observe details, like how the team manages incontinence and whether skin remains undamaged. Request for a short discharge summary after respite, noting what worked and what did not. You can bring those lessons back home or into a longer placement.

Special circumstances that require sharper questions

Younger-onset dementia typically comes with physical vitality and behavioral signs that outpace typical memory care programs. Ask about secure outside space for paced walking, staff training in de-escalation, and access to neuropsychiatry assistance. You may need a neighborhood that accepts greater acuity, with more robust staffing and a strong clinical partner.

Couples deal with a difficult calculus. Some neighborhoods let a partner reside on website in assisted living while the partner lives in memory care, alleviating visits and meals together. It can work if both areas coordinate schedules. If the healthy spouse tries to end up being the main caretaker inside the building, burnout follows. Clarify boundaries and support.

Cultural positioning matters. Language access, faith practices, and food customs are not bonus. A resident who can speak with an aide in their mother tongue will accept care more easily. Inquire about multilingual staff, pastor assistance, and menu flexibility. Tour on a day when cultural programming is running if it is very important to your family.

A quick story from the trenches

A child I worked with, Elena, toured four communities for her father, Luis, who had mid-stage Alzheimer's. Two looked lovely. One had a rooftop garden. Elena selected the least fancy structure. Her reasons were simple. The nurse had actually been there 9 years and welcomed three locals by name, then asked one how his grandson's baseball video game went. A caretaker showed Elena how they utilized an easy apron with Velcro closures to maintain self-respect during mealtime. The courtyard had a loop path with a bench every twenty feet. The administrator did not flinch when Elena requested for state study results and strolled her through a recent medication error and the re-training that followed.

Luis moved in on respite take care of two weeks. He slept through the night by day 4 because personnel rerouted his 9 p.m. Pacing with a brief walk and cocoa, then a photo album of his woodworking jobs. Elena extended to an irreversible stay. A year later on, when Luis needed hospice, the exact same group managed his pain and kept his favorite Spanish guitar music playing softly in the space. Elena said the place never ever felt like a hotel, which was the point. It felt like individuals who knew her father.

Bringing it all together

Quality memory care exposes itself through constant staffing, thoughtful style, and day-to-day practices that protect self-respect. Marketing can not phony the method a caregiver crouches to eye level to speak with a resident, or how quickly someone reacts to a call light. If you construct your evaluation around staffing, environment, every day life, and health integration, and you check your impressions with a second visit or a respite stay, you will see the distinction in between guarantees and practice.



There is no perfect choice. Trade-offs are inescapable. A smaller sized structure might provide intimacy but less on-site therapies. A larger school might provide features but feel overstimulating. Your job is to match the location to the individual in front of you, not the individual they were ten years back. Ask plain concerns. Look past chandeliers to bathroom grab bars and meal hints. Trust what you observe more than what you are told.

Most households do not regret moving too early. They regret moving too late, after injury or caregiver collapse. If you reach the point where security, sleep, and health are falling apart, a well-chosen memory care neighborhood can restore balance for everybody included. Respite care can be your stepping stone. And when the time pertains to lean on hospice, a strong group will assist you keep the focus where it belongs, on comfort, connection, and the individual you love.

BeeHive Homes of Levelland provides assisted living care

BeeHive Homes of Levelland provides memory care services

BeeHive Homes of Levelland provides respite care services

BeeHive Homes of Levelland supports assistance with bathing and grooming

BeeHive Homes of Levelland offers private bedrooms with private bathrooms

BeeHive Homes of Levelland provides medication monitoring and documentation

BeeHive Homes of Levelland serves dietitian-approved meals

BeeHive Homes of Levelland provides housekeeping services

BeeHive Homes of Levelland provides laundry services

BeeHive Homes of Levelland offers community dining and social engagement activities

BeeHive Homes of Levelland features life enrichment activities

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

BeeHive Homes of Levelland promotes frequent physical and mental exercise opportunities

BeeHive Homes of Levelland provides a home-like residential environment

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

BeeHive Homes of Levelland assesses individual resident care needs

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

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

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

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

BeeHive Homes of Levelland has a phone number of (806) 452-5883

BeeHive Homes of Levelland has an address of 140 County Rd, Levelland, TX 79336

BeeHive Homes of Levelland has a website <https://beehivehomes.com/locations/levelland/>

BeeHive Homes of Levelland has Google Maps listing <https://maps.app.goo.gl/G3GxEhBqW7U84tqe6>

BeeHive Homes of Levelland Assisted Living has Facebook page <https://www.facebook.com/beehivelevelland>

BeeHive Homes of Levelland Assisted Living has YouTube page <https://www.youtube.com/@WelcomeHomeBeeHiveHomes>

BeeHive Homes of Levelland won Top Assisted Living Homes 2025

BeeHive Homes of Levelland earned Best Customer Service Award 2024

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

People Also Ask about BeeHive Homes of Levelland

What is BeeHive Homes of Levelland 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 Levelland located?

BeeHive Homes of Levelland is conveniently located at 140 County Rd, Levelland, TX 79336. You can easily find directions on [Google Maps](#) or call at [\(806\) 452-5883](tel:(806)452-5883) Monday through Sunday 9:00am to 5:00pm

How can I contact BeeHive Homes of Levelland?

You can contact BeeHive Homes of Levelland by phone at: [\(806\) 452-5883](tel:(806)452-5883), visit their website at <https://beehivehomes.com/locations/levelland/>, or connect on social media via [Facebook](#) or [YouTube](#)

Visiting [Taqueria Guadalajara](#) offers familiar Mexican comfort food that residents in assisted living, memory care, senior care, elderly care, and respite care can enjoy during relaxed dining outings.