

Business Name: BeeHive Homes of Crownridge Assisted Living & Memory Care

Address: 6919 Camp Bullis Rd, San Antonio, TX 78256

Phone: (210) 874-5996

BeeHive Homes of Crownridge Assisted Living & Memory Care

We are a small, 16 bed, assisted living home. We are committed to helping our residents thrive in a caring, happy environment.

[View on Google Maps](#)

6919 Camp Bullis Rd, San Antonio, TX 78256

Business Hours

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

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Families generally begin searching for assisted living or memory care after a long stretch of concern. Missed out on medications. The stove left on. A parent who was when meticulous now wearing the exact same clothes for days. By the time dementia care goes into the discussion, many households are currently emotionally broken and trying to make the "least bad" decision.

The market answers that fear with scale. Large senior care communities show you the theater, the salon, the restaurant-style dining room, the activities calendar. It looks safe and busy. For some people, it really is the best fit.

Yet in my experience, the homeowners with dementia who thrive with time tend to live in smaller sized, more intimate assisted living homes. Not due to the fact that the paint is nicer, however due to the fact that the small scale makes authentic human connection unavoidable. Staff can [dementia care beehivehomes.com](#) not conceal. Citizens can not disappear. Families feel understood, not processed.

That difference in scale shapes everything from day-to-day regimens to the method a resident is comforted during a 3 a.m. Bout of agitation. It is much easier to safeguard self-respect, identity, and relationships when less individuals share the space.

What "small" truly indicates in assisted living and memory care

"Small" is a slippery word in senior care. I have visited communities that proudly promoted "intimate neighborhoods" with 40 citizens per wing, and group homes certified for 6 individuals that felt like extended family.

Regulations vary by state, however in practice you tend to see three broad models:

- Large assisted living or memory care communities, frequently 60 to 120 residents or more, gotten into pods or "neighborhoods".
- Mid-sized homes, frequently 20 to 40 citizens, in some cases part of a larger campus.
- True small homes or residential care homes, generally 4 to 12 residents, operating out of a home or a purpose-built building sized like a home.

The sweet spot for strong relationships in dementia care is generally that last group, the real little homes. They are common in some areas and practically unnoticeable in others. Lots of households find them just after somebody silently suggests "Have you took a look at residential care homes?" or "There's a small memory care house on the edge of town that you may want to see."

The smaller sized the setting, the harder it is for a resident with dementia to be forgotten, both practically and emotionally.

Why size matters more when dementia is involved

Dementia amplifies the issues that feature living in a crowd. Sound ends up being disorienting. Long hallways end up being barrier courses. A rotating cast of caregivers ends up being a source of stress rather than comfort.

In a large assisted living setting, a resident might communicate with a dozen different staff members in a single day: caregivers, nurses, dining personnel, house cleaners, activities personnel, med techs, and floaters who cover breaks. For somebody in early-stage amnesia, that can be stimulating. For someone in moderate or sophisticated dementia, it frequently seems like a blur of brand-new faces and conflicting instructions.

Small memory care homes streamline that world. Daily life is normally anchored by a small, constant team. The person with dementia sees the same caregivers at breakfast, during bathing, and at bedtime. Actions repeat in similar methods: the same blue mug, the exact same seat at the table, the exact same mild voice directing them through the shower. That repetition constructs familiarity, and familiarity is the raw product of trust.

Trust in dementia care is not abstract. It appears in whether a resident accepts assist with toileting, whether they consume an appropriate meal, whether they let somebody touch them to assist them away from a fall threat. More powerful connections make every one of those minutes simpler and more dignified.

The architecture of connection

The physical design of a little assisted living home quietly presses individuals toward one another. I keep in mind one four-bedroom residential care home where you might stand in the cooking area and see almost everything: the front door, the open living room, the corridor to the bedrooms, and the yard patio.

The result on care was obvious. When a resident began to stand from a chair, staff discovered instantly. When someone looked lost, the caregiver chopping vegetables could call out, "Hi there Helen, we remain in here," and Helen would follow the noise of the voice. Homeowners could wander, but they could not really disappear.

In bigger structures, personnel rely greatly on technology and scheduled rounds to monitor residents. Call bells, door signals, cams in corridors. Those tools can be practical, however they are reactive. Something needs to go incorrect first.

In a small home, the design itself supports early detection. Caretakers see the subtle signs that typically precede crises: a resident circling around the same entrance a number of times, somebody who stops signing up with the table for coffee, modifications in posture or gait. Those little shifts in behavior are typically the very first flag of an infection, anxiety, pain, or a brewing fall risk.

There is another piece that seldom makes the brochure: shared space in a little home normally feels more like a family room and less like a lobby. That matters for connection. People naturally cluster where there is activity, movement, and discussion. If the main event location is the size of a living-room rather of a hotel atrium, locals are a lot more most likely to see each other, observe each other, and in time form the small, normal bonds that make life feel worth living.

How little teams develop deeper relationships

Most households underestimate just how much staffing structure affects the psychological tone of dementia care. The job title may be "caretaker" or "resident aide," however in practice these team members are the primary relationship in a resident's life, often more present than family or friends.

In large senior care neighborhoods, staff scheduling appears like a grid. Homeowners are assigned to a hall or an area; staff are designated by shift and ratio. Turnover is greater. Floaters plug staffing holes. A resident might work with one caregiver for a couple of weeks, then never see them again if schedules change.

In a little assisted living home, staffing looks more like a roster of familiar faces. The same five to 10 people cover most shifts. The owner or supervisor often works on website, not in a far-off office. If somebody calls out, you are more likely to see the supervisor rolling up their sleeves than an unfamiliar agency worker appearing at 10 p.m.

Over time, this consistency permits staff and citizens to build up mutual history. A caretaker discovers that Mr. Jackson calms down if you provide him a warm washcloth to hold while you clean his face, or that Mrs. Chen will only accept her nighttime medications after she sees the evening news. These details might never make it into a formal care plan, but they are the glue that holds daily life together.

For residents with dementia, relationships are not anchored in biography so much as in sensory memory. They may not bear in mind that a caretaker's name is Maria, but they keep in mind "the one who sings while she makes my coffee" or "the male who wears the plaid shirts." Small homes make it much easier for those sensory signatures to become stable and soothing.

Families feel the difference too. In a large building, it is simple to feel like you are disrupting someone's workflow whenever you ask questions. In a little home, the group is typically delighted, even relieved, to sit at the kitchen area table and hear comprehensive stories about your mother's routines and choices. The more they know, the simpler their work becomes.

Everyday life: small rituals, huge impact

When individuals imagine memory care, they typically think of structured activities: bingo, exercise class, art treatment. These can be useful, however in small homes, the strongest connections typically form around common, repeated tasks.

I have actually watched a resident with severe dementia aid fold washcloths every afternoon at a little memory care home. She sat at the table, matching corners with extreme concentration, then stacking the cool squares. Personnel might have folded that laundry in 5 minutes. Instead, they turned it into a day-to-day ritual that gave her a sense of function and belonging.

In a small setting, there is space for that type of sluggish, relationship-focused care. The line in between "task" and "activity" blurs. Mealtimes stretch out into social time. A caregiver can stand at the range preparing rushed eggs while chatting with 3 citizens seated nearby, inquiring about favorite breakfast foods from their childhood. Citizens smell the food, hear the clatter of pans, and take part in conversation, even if their words are fragmented.

These micro-rituals serve a number of roles at the same time:

They anchor the day with foreseeable rhythms. They provide staff and citizens shared reference points. They invite residents into participation instead of passive observation. Within that duplicated structure, individual connections strengthen.

In a big building, security and performance typically press against this type of versatile, relational technique. When a dining room serves 60 people, you can not reasonably let residents remain near the grill or aid with seasoning. Meals become shifts to carry out, not shared experiences to endure together.

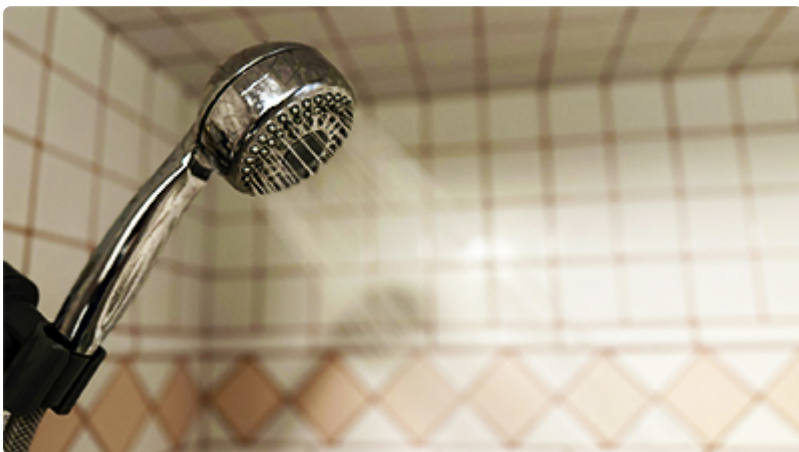
Family involvement and the role of respite care

For numerous families, the path into a small assisted living home or memory care house begins with respite care. A partner or adult kid is exhausted, however not yet all set to devote to a permanent move. They might arrange a couple of week stay so they can travel, recover from surgery, or merely rest.

Short-term stays in a small home can be a discovery. The person with dementia is not lost in a crowd. Staff often have the bandwidth to communicate in information, not just with crisis updates.

I keep in mind a hubby who reluctantly positioned his wife for a two-week respite in a six-bed residential care home. He showed up each morning at 9, beinged in the typical location, and enjoyed everything. By day three, he was no longer hovering. He was asking the caretakers how they got his better half to accept a shower so calmly. By day 7, he admitted, "She is more relaxed here than she is at home."

The size of the home made his participation easy. There was constantly a chair, always a caretaker offered to address questions, constantly a natural entry point for him to sit with his partner without seeming like he remained in the way.



Family participation generally looks different in smaller settings:

You tend to see much shorter, more regular visits instead of long, exhausting marathons. Families learn more about not only the staff but likewise the other citizens, and sometimes their relatives. That cross-connection develops a sense of community and shared watchfulness that is difficult to replicate in a big facility where you seldom face the same individuals at the very same time.

When a crisis does happen, such as a hospitalization or a major modification in behavior, those existing relationships make preparing much easier. You are not speaking with strangers about your loved one; you are talking to individuals who have peeled oranges for them, chuckled with them during music hour, and viewed their nightly habits.

Emotional security and behavioral symptoms

People in some cases assume that little assisted living homes are best for "easy" citizens which those with more extreme behavioral concerns from dementia require the infrastructure of a bigger memory care system. The reality is more complicated.

Behavioral expressions like agitation, wandering, shadowing, or calling out typically soften in environments where the person feels seen and safe. Small homes are especially good at producing that emotional safety.

Consider roaming. In a big community, a resident who continuously strolls the halls is considered as a fall danger and a guidance obstacle. Personnel may attempt diversion activities, medications, and even secured units. In a little home with enclosed outside area, that same walking can be reframed as "Mr. Thompson's daily path." Personnel know his pattern, walk with him often, and keep subtle eyes on him when he is in the yard.

When citizens feel less overwhelmed by noise and crowds, their nerve systems run cooler. That alone can lower the need for psychotropic medications. It is not a cure, and little homes definitely have locals with difficult behaviors, but the baseline tension is frequently lower.

There are trade-offs. Some small homes are not geared up for residents with severe physical aggressiveness, two-person transfer needs, or complicated medical gadgets. Bigger communities may have specialized memory care wings with more robust staffing ratios, on-site nurses, and access to treatment services. The secret is not to glamorize little homes as wonderful areas where dementia ends up being easy, however to acknowledge that their really scale modifications how habits manifest and how relationships shape the response.

When a bigger community might be a better fit

Small does not equivalent better for every individual or every household. There are situations where a larger assisted living or committed memory care neighborhood can offer advantages.

If your loved one has a very high social drive and is still in earlier-stage dementia, they may delight in the variety and bustle of a larger setting, with more structured activities and more individuals to meet. Some big neighborhoods offer specific programs, on-site physical therapy, going to professionals, and transport alternatives that little homes can not match.

Families who desire a strong line in between "home" and "care" often feel more comfortable with a larger, more official environment. In a small residential care home, the intimacy can feel too close for some family characteristics. You might feel obligated to participate in events or address more individual concerns about household history than you would in a huge building where privacy is easier.

Cost can cut either way. In some markets, little homes are more budget friendly than large communities; in others, they are priced as premium memory care. Insurance coverage, veterans' advantages, and Medicaid waivers may use differently depending on state policies and licensure categories.

The most sincere method to think of size is not as a moral ranking but as a set of trade-offs. If you know that deep, constant relationships are essential for your loved one, then little homes deserve a major look, even if you also tour bigger senior care campuses.

Questions to ask when exploring little assisted living homes

A tour tells you a lot, but just if you understand where to look. When you visit a small assisted living or memory care home, a couple of targeted concerns can reveal how well the setting in fact supports strong connections in

dementia care:

- How lots of residents live here, and what is the normal staff-to-resident ratio on days, evenings, and nights?
- How long have the majority of your caretakers operated in this home, and how do you deal with turnover or staffing gaps?
- Can you explain a common day for somebody with dementia who lives here, from awakening to bedtime?
- How do you be familiar with a new resident's life story, regimens, and preferences, and how is that details shared amongst staff?
- When a resident is upset or declining care, what are the very first 3 things your team usually attempts before considering medication or outside intervention?

Pay attention to how rapidly employee utilize homeowners' names, who they present you to, whether residents make eye contact, and whether anyone seems parked in front of a television for long stretches. Notification the smells from the kitchen, the tone of background noise, and how staff respond if a resident disrupts your tour.

The greatest little homes can respond to comprehensive questions without defensiveness, and they will typically offer stories that show their technique instead of relying just on policy language.

Bringing it back to what matters

Families typically come to me asking about features, licensing, and care levels, but the questions that ultimately form their peace of mind are quieter: Who will observe if my mother appears off? Who will sit with my spouse when he is terrified at night and can not remember why? Who will commemorate the small success that only matter if you truly know the person?

Small assisted living homes and residential memory care houses are distinctively positioned to respond to those questions with something more than a brochure line. Their scale makes indifference more difficult and connection most likely. Staff and homeowners do not simply share space; they share a life rhythm.



Assisted living, memory care, and respite care are not interchangeable labels. They are various setups of time, attention, and relationship. When dementia is part of the image, that setup matters more than almost anything else. A smaller sized setting does not remove the losses that feature cognitive decrease, however it does make room for something simply as real: the continuous, daily experience of being known.

BeeHive Homes of Crownridge Assisted Living has license number of 307787

BeeHive Homes of Crownridge Assisted Living is located at 6919 Camp Bullis Road, San Antonio, TX 78256

BeeHive Homes of Crownridge Assisted Living has capacity of 16 residents

BeeHive Homes of Crownridge Assisted Living offers private rooms

BeeHive Homes of Crownridge Assisted Living includes private bathrooms with ADA-compliant showers

BeeHive Homes of Crownridge Assisted Living provides 24/7 caregiver support

BeeHive Homes of Crownridge Assisted Living provides medication management

BeeHive Homes of Crownridge Assisted Living serves home-cooked meals daily

BeeHive Homes of Crownridge Assisted Living offers housekeeping services

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BeeHive Homes of Crownridge Assisted Living provides life-enrichment activities

BeeHive Homes of Crownridge Assisted Living is described as a homelike residential environment

BeeHive Homes of Crownridge Assisted Living supports seniors seeking independence

BeeHive Homes of Crownridge Assisted Living accommodates residents with early memory-loss needs

BeeHive Homes of Crownridge Assisted Living does not use a locked-facility memory-care model

BeeHive Homes of Crownridge Assisted Living partners with Senior Care Associates for veteran benefit assistance

BeeHive Homes of Crownridge Assisted Living provides a calming and consistent environment

BeeHive Homes of Crownridge Assisted Living serves the communities of Crownridge, Leon Springs, Fair Oaks Ranch, Dominion, Boerne, Helotes, Shavano Park, and Stone Oak

BeeHive Homes of Crownridge Assisted Living is described by families as feeling like home

BeeHive Homes of Crownridge Assisted Living offers all-inclusive pricing with no hidden fees

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BeeHive Homes of Crownridge Assisted Living earned Best Customer Service Award 2024

BeeHive Homes of Crownridge Assisted Living placed 1st for Senior Living Communities 2025

People Also Ask about BeeHive Homes of Crownridge Assisted Living

What is BeeHive Homes of Crownridge Assisted Living monthly room rate?

Our monthly rate depends on the level of care your loved one needs. We begin by meeting with each prospective resident and their family to ensure we're a good fit. If we believe we can meet their needs, our nurse completes a full head-to-toe assessment and develops a personalized care plan. The current monthly rate for room, meals, and basic care is \$5,900. For those needing a higher level of care, including memory support, the monthly rate is \$6,500. There are no hidden costs or surprise fees. What you see is what you pay.

Can residents stay in BeeHive Homes of Crownridge Assisted Living 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.

Does BeeHive Homes of Crownridge Assisted Living have a nurse on staff?

Yes. Our nurse is on-site as often as is needed and is available 24/7.

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What are BeeHive Homes of Crownridge Assisted Living & Memory Care visiting hours?

Normal visiting hours are from 10am to 7pm. These hours can be adjusted to accommodate the needs of our residents and their immediate families.

Do we have couple's rooms available?

At BeeHive Homes of Crownridge Assisted Living & Memory Care, all of our rooms are only licensed for single occupancy but we are able to offer adjacent rooms for couples when available. Please call to inquire about availability.

What is the State Long-term Care Ombudsman Program?

A long-term care ombudsman helps residents of a nursing facility and residents of an assisted living facility resolve complaints. Help provided by an ombudsman is confidential and free of charge. To speak with an ombudsman, a person may call the local Area Agency on Aging of Bexar County at 1-210-362-5236 or Statewide at the toll-free number 1-800-252-2412. You can also visit online at https://apps.hhs.texas.gov/news_info/ombudsman.

Are all residents from San Antonio?

BeeHive Homes of Crownridge Assisted Living & Memory Care provides options for aging seniors and peace of mind for their families in the San Antonio area and its neighboring cities and towns. Our senior care home is located in the beautiful Texas Hill Country community of Crownridge in Northwest San Antonio, offering caring, comfortable and convenient assisted living solutions for the area. Residents come from a variety of locales in and around San Antonio, including those interested in Leon Springs Assisted Living, Fair Oaks Ranch Assisted Living, Helotes Assisted Living, Shavano Park Assisted Living, The Dominion Assisted Living, Boerne Assisted Living, and Stone Oaks Assisted Living.

Where is BeeHive Homes of Crownridge Assisted Living & Memory Care located?

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How can I contact BeeHive Homes of Crownridge Assisted Living & Memory Care?

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Conveniently located near [Santikos Palladium](#) a amazing upscale movie theater with full food & drink menu. Catch a movie and enjoy some great food while you wait.