

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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People often focus on décor, activity calendars, and meal strategies when exploring memory care. Those matter, however if you wish to understand how a community in fact keeps citizens safe and comfy, ask about the technology under the hood. The best systems decrease risk without feeling restrictive. The incorrect ones develop noise, confusion, and blind spots that just appear when something fails, like a missed out on medication or a fall after hours.



I have walked countless hallways with executive directors and directors of nursing to trace the course a resident takes in a regular day. Where do they tend to wander, and how does staff understand they are safe at 2 a.m.?

What happens when a family contacts us to ask if Mom took her night dose? Which doors lock, when, and why? The very best operators can reveal, not simply tell. Their tools fit the rhythms of dementia care and senior care, and staff can explain them without scripts.

Why the technology matters

Memory care blends hospitality with medical alertness. Residents deal with cognitive modifications that impact judgment, balance, sleep, and hunger. One missed hint can cascade into a hospitalization. Thoughtful use of technology gives groups a second set of eyes, reduces reaction times, and streamlines documents. When it is calibrated well, residents rarely notice it. They feel free to stroll to the garden or sit near a window, yet crucial dangers are seen silently in the background.

There is also a privacy and dignity line that neighborhoods should appreciate. Not every option that can be installed, should be. A cam can reassure a family, but it can also undermine trust if used without clear approval and borders. Good operators lean into informed choice, transparency, and the minimum efficient security needed for safety.

Safety principles, where the physical environment fulfills digital systems

Safety starts with the layout, lighting, and hardware, then encompasses sensors and software application. In a well created area, residents can move in loops that naturally bring them back to staff locations. Visual cues guide transitions rather than locked doors at every turn. Technology needs to reinforce this flow, not combat it.

Door hardware matters. Delayed egress hardware gives personnel a defined window to react if a resident attempts to leave. Roam management bands can nudge a door to stay locked when a specific resident approaches, while enabling visitors and personnel to come and go. The trick is alignment: the very same resident profile in the electronic health record should inform who uses a tag, who has a specific care plan to accompany outdoor walks, and when the plan changes.

Night lighting is another low tech, high return solution. Motion triggered, warm spectrum lights that run at shin level reduce falls from bed to restroom. Pair that with non invasive bed or chair sensing units connected to nurse call, and the structure ends up being a safeguard that catches small issues before they end up being big ones.

Wander management without a prison feel

Families frequently ask whether the doors will keep their loved one within. That is the incorrect very first concern. The better concern is how the neighborhood supports purposeful wandering, which is common and healthy for lots of people dealing with dementia.

Modern wander management includes discreet wearable tags, geofencing within the residential or commercial property, and software application that discovers resident patterns. If Mr. K likes to walk the garden path for 15 minutes after breakfast, staff ought to see that as green. If his walk extends to 45 minutes near sundown, when he tends to get disoriented, the system can push a caregiver to check in. Search for solutions that highlight changes from baseline, not simply raw locations.

Door informs need to go to the right people at the correct time. I have seen systems that page every caretaker on every door event, which numbs the group to real dangers. Much better neighborhoods route informs to the closest readily available personnel, log response times, and run weekly reviews to tune thresholds. They likewise

have clear procedures for prepared outings. A resident who enjoys monitored strolls must not be flagged as a threat each time they approach a gate with their child on a Sunday.

Ethics and approval contribute here. Homeowners who can still weigh threats ought to be part of the decision to use a tag. Families should comprehend where geofencing applies and how information is saved. Personnel needs to know how to remove or silence gadgets during showers or treatment, then validate they are back on.



Fall prevention and faster response

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Every operator will inform you they appreciate falls. The standouts can indicate specifics. Bed and chair sensors that distinguish restlessness from true egress. Motion sensing units that cover blind corners near bathrooms. Floor materials that lower impact in case a fall takes place. These are not theoretical. In one community, shifting to softer underlayment and shin height lighting in three spaces reduced overnight restroom related falls by more than a 3rd over two months, without any modification in staffing.

Acoustic tracking has grown too. Instead of blaring alarms, newer systems listen for patterns that correlate with agitation or distress and send out a silent alert to staff handhelds. Even better, the alert links to a care timely: offer water, check toileting requires, or guide the resident to a familiar seat with a comfort item.

Response time is what homeowners and households feel most acutely. A dependable nurse call system that routes to mobile phones, timestamps recommendations, and tracks completion is worth the investment. Ask what the average and 90th percentile action times are on day shift and night shift. Numbers in the 2 to 5 minute variety are attainable with good design and training. If a community can not produce the last month's metrics, they probably are not using their system to its potential.

Medication security and medical systems that speak with each other

Medication mistakes in dementia care can spiral quickly. A strong electronic medication administration record, typically called eMAR, is fundamental. The workflow must be barcode driven, with the resident wristband or photo match and the medication plan both scanned before administration. When a dose is held, the reason must be caught and noticeable to the nurse and the doctor, not just buried in a log.

Automated dispensing carts decrease diversion and tighten up control for illegal drugs. Pharmacy combination assists as well. If the neighborhood's eMAR gets updates directly from the drug store system, dosage changes are

less likely to be missed throughout shifts. This is not just a technical nicety. I have seen Sunday evening dose modifications for antibiotics stop working to show up on paper up until Tuesday, with predictable results. A clean interface shortens that space to minutes.

Clinical documentation ought to be accessible at the point of care. If a caretaker notices a new swelling or cravings change, they should be able to tape it on the spot, connect a quick photo with permission, and flag it for the nurse. Over time, analytics can surface patterns, like a resident whose hydration dips on hot days or whose agitation peaks when a preferred team member is off. The goal is not to bury personnel in checkboxes, but to record a couple of high value observations that drive action.

Cybersecurity and personal privacy you can explain in plain language

Senior care runs in a regulative soup. HIPAA covers secured health information, state guidelines add layers, and households rightly anticipate discretion. You do not need a lecture on file encryption, however you want to hear a crisp story about how the community protects data.

Access should be function based. Caregivers see what they require for everyday jobs, nurses see scientific information, administrators see metrics and staffing. Logins need to utilize multi factor authentication for managers and scientific leads. Audit logs must record who viewed or changed records, and those logs ought to be examined, not simply stored.

The network must be segmented. Resident Wi Fi belongs in its own lane, separate from medical systems. Visitors should not share a password with personnel gadgets. Software application and firmware updates need to be on a schedule, with maintenance windows and a fallback strategy in case an update breaks something. When a vendor needs remote gain access to, the community needs to approve it just for the time needed, with visibility into what the vendor does.

Finally, inquire about personnel training. Phishing e-mails do not care that a structure has a warm lobby. I have actually seen good teams almost thwarted by a fake invoice link that set up malware on a shared workstation. Quarterly refreshers and quick drills cut that risk.

Cameras and audio: where security satisfies dignity

Cameras are a hot button topic in memory care. There is a world of difference in between public location electronic cameras that hinder theft and aid rebuild events, and cameras in resident spaces. The latter need explicit consent, clear policies, and strong safeguards. Even with permission, video cameras must never tape bathrooms, and audio ought to be off unless a resident and family accept it in composing for a specified time and purpose.

Ask who can see video, the length of time it is retained, and how requests are managed. Excellent practice retains clips for a limited duration, normally 14 to one month, with longer holds just when an incident takes place. Gain access to should need a supervisor's approval and be logged. If a family wants an electronic camera in a space, neighborhoods should set guideline: who can see, when, and what takes place if caregivers require to offer individual care. Limits protect everyone.

Family connectivity without overwhelm

An excellent family website lightens the load on the front desk and reinforces trust. Day-to-day notes, meal intake summaries, and a few photos every week assure households without flooding personnel with additional

actions. Video visits help when distance makes personally visits rare, however the schedule must respect resident regimens. A calm resident at 10 a.m. Can be agitated at 7 p.m., and technology ought to not override that reality.

Consent once again matters. A resident who still has capacity should decide who sees their updates. For those who have actually designated decision makers, the care plan must define who gets gain access to and how typically they are updated. Operator judgment appears in the tone and cadence. A one line note that a resident "refused care" informs a family little bit. A brief note that "Mrs. A declined a shower this morning, accepted a warm wash and hair brush, and walked the patio area after lunch" signals that personnel are addressing comfort and dignity.

The facilities you do not see

A memory care neighborhood's network must be as dependable as its water supply. Watch for telltales. Are there access points in hallways at routine periods, or is there one router tucked behind the receptionist's chair? Do staff handhelds show strong signals in resident spaces? If the Wi Fi stops working, what is the plan? Lots of buildings utilize cellular failover. That is fine, but just if the signal is strong and tested.

Power durability is non flexible. Vital systems, like nurse call, wander management, and eMAR gadgets, need to ride on battery backups and, for longer outages, a generator. The test is not whether the structure has a generator. It is whether the generator kicks in, the last load test passed, and personnel understand which outlets are on emergency situation power. I have actually stood in spaces with 2 similar outlets, just one of which stayed hot in an outage. Caretakers should not be guessing.

Data backups and catastrophe healing complete the picture. If a server stops working or a vendor cloud goes dark, how does the neighborhood keep running? Paper fallback packs for medications and care plans are a smart safety net. Drills expose whether those packs are current or collecting dust.

Data governance and analytics without surveillance creep

Operators like dashboards. Families appreciate outcomes. The sweet area utilizes a handful of steps that connect back to resident well being. Falls per 1,000 resident days, average nurse call reaction times, medication mistake rates, and unintended hospital transfers inform a functional story. Add a qualitative layer, like sleep quality notes and engagement levels, and staff can prepare much better days.

Surveillance creep is a danger. Even if a system can track a resident's every step does not imply it should. Communities need to define a function for each data stream, limit retention to what is needed, and provide homeowners or their decision makers a say. If analytics discover that a resident's steps drop sharply on weekends, the action must be a strategy to support mild activity, not a tighter geofence.

Staff training and modification management, where excellent tools end up being good care

Technology does not run itself. The most classy system fails when a new caretaker does not understand how to silence an incorrect bed alarm. The very best communities bake training into onboarding, run short refreshers monthly, and designate extremely users on each shift. They also encourage feedback. If a door alarm chirps for 5 seconds every time a staff individual travels through on rounds, that is a dish for alarm fatigue. Frontline caregivers normally understand where the friction lies. Leadership needs to listen and adjust.

Change management also indicates beginning small. Pilot a new sensing unit suite in 4 spaces for two weeks. Step the signal to sound ratio. Count genuine helps and false positives. Meet households to explain the purpose

and gather impressions. Then scale with eyes open.

A useful checklist for tours

- Show me the nurse call system in action, from a resident space to a caretaker's device, and the last 1 month of action time data.
- Walk me through how roam management works for one resident who enjoys strolling outside, and how staff document those outings.
- Let me see a medication pass, including barcode scanning and how a held dose is recorded and communicated to the nurse or physician.
- Describe your network and power strength, including generator testing dates and which systems stay up during an outage.
- Explain your privacy practices for cams, family portals, and data gain access to, and how authorization is obtained and recorded.

Red flags that should have follow up

- Staff who can not silence or explain an alarm, or who dismiss regular alerts as typical background noise.
- Paper medication sheets utilized as a main record, or eMAR entries that lag hours behind actual administration.
- One Wi Fi router serving an entire floor, or dead zones where handhelds lose connection.
- Vague answers about who can see camera footage or the length of time information is kept.
- Leaders who can not produce fundamental safety metrics, or who depend on anecdote rather of data to explain performance.

Costs and agreements, the overall cost of ownership lens

Communities face genuine budget plan constraints. Excellent operators look beyond price tag. A low-cost roam system that floods staff with false alerts expenses more in turnover and missed out on real occasions. So does a proprietary platform that locks you into one supplier for every element. Ask whether systems are open to basic combinations, how updates are dealt with, and what support appears like after year one.

Leasing hardware can smooth capital, but inspect the replacement and refresh terms. Wearable tags and batteries require foreseeable upkeep cycles. Supplier contracts must define uptime service levels, action times, and remedies if those are missed out on. Do not neglect training. A bundle that includes on website training for all shifts, plus refreshers after 6 months, is worth a modest premium.

Pilots decrease regrets. Smart neighborhoods run time boxed trials, define success metrics, and consist of caretakers and households in examinations. You can ask about the last technology trial the building ran and what they found out. If the response is blank stares, that tells you how they approach change.

Respite care, brief stays, and the rate of onboarding

Respite care brings a compressed version of all these options. Households drop a loved one off for a week while they take a trip or recuperate. The structure needs to onboard quickly, fit a wearable, go into medications precisely, and explain communication norms, all in a day. This is where tight workflows and friendly, positive personnel make a huge difference.

I have enjoyed a group fail and be successful in the very same week. On Monday, a respite admission reached 5 p.m. With hand composed med lists and no recent physician orders. The eMAR did not match, and the first night dose was held while the nurse called the household and the drug store. Tension all around. On Thursday, a new respite arrival included electronic orders from the physician, the drug store combination pulled them in within an hour, the wearable was fitted during a welcome tour, and the family website was configured before supper. The distinction was not luck. It was a process that expected gaps and closed them fast.



Dementia care progresses, therefore must the toolkit

Early phase dementia requires various assistances than late phase. In earlier stages, technology ought to preserve independence: calendar cues, wayfinding signs with photos, mild reminders on a tablet that a resident currently utilizes. In later stages, sensory comfort, quiet nighttime tracking, and simplified interaction take concern. A one size fits all technology stack usually serves nobody well.

Skilled teams review care strategies routinely. When roaming shifts from purposeful walks to exit looking for late during the night, they adjust. When a resident ends up being sensitive to beeps or bracelets, they attempt acoustic monitoring with less noticeable gear. Innovation that is modular and versatile shines in these transitions.

What excellent appear like, a day in a well run memory care home

Picture a morning start. Movement lights radiance as citizens wake, sufficient to assist feet securely to slippers. A caretaker steps into Mrs. Lee's room after a silent timely that her bed sensing unit showed sustained movement. She welcomes her gently by name and offers a warm washcloth. The wearable on Mrs. Lee's wrist is lightweight and soft, the clasp easy to clean. It does not buzz or blink.

Medication time techniques. In the little dining room, a med cart parks discreetly near the tea station. The nurse scans Mrs. Lee's wristband and the medication bundle. A prompt appears: hold the multivitamin up until after breakfast due to nausea kept in mind yesterday. A tap records the adjustment. When Mr. Ortiz decreases his stool softener, the nurse selects "refused," includes a brief note, and schedules a tip to reassess in the afternoon.

Midday, Mr. K begins his routine walk. The course is bright but not hot. Staff see his dot on a map, green as usual. After 20 minutes, the dot moves amber since his path deviates towards a less traveled corner. A nearby caregiver gets a gentle buzz and walks out, provides water, and chats as they circle back. No public statement, no blaring alarm.

After lunch, a child checks the family website. She sees two notes and a picture of her mother organizing flowers with an employee. The note points out excellent cravings and a pointer to bring a favorite cardigan. That night, a

brief acoustic alert prompts a caretaker to examine Mr. Ortiz, who has been abnormally uneasy. A five minute conversation, a warm blanket, and dimmer lights settle him. No alarm fatigue, simply a nudge at the ideal time.

At 3 a.m., the power flickers. Emergency outlets stay live, access points on battery keep the network up, and important systems continue. In the early morning, the maintenance lead logs the occasion, keeps in mind generator run time, and schedules a test.

That is innovation serving care, not the other method around.

Bringing it together

When you tour a memory care community, innovation and security are not side notes. They are the quiet equipment that shapes security, self-respect, and staff efficiency. Strong programs mix simple environmental style with targeted systems: wander management that respects autonomy, fall detection that lowers noise, scientific tools that avoid medication errors, and facilities that stays up when it matters most. Personal privacy and consent threads run through it all.

The most telling indication is how with confidence frontline personnel utilize their tools. If caretakers can reveal you how a door alert routes to them, if a nurse can pull up action time metrics without calling IT, if the executive director understands the last generator test date, you are looking at a building that treats technology as part of care. Combine that with warm interactions and a clear understanding of dementia care, and you have found a location where your loved one can live, not just be kept safe.

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](#)

Conveniently located near Beehive Homes of Levelland [Alamo Drafthouse Cinema Lubbock](#) a great movie theater with full food & drink menu. Catch a movie and enjoy some great food while you wait.