

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 housing decision, it forms the last chapters of somebody's life. Families come to this crossroad for many factors. A parent has begun wandering during the night. A partner with dementia can no longer be safely lifted after a fall. The main caregiver is tired after months of interrupted sleep. Great memory care eases these stress. It stabilizes safety with autonomy, and clinical oversight with everyday happiness. The difficult part is discriminating in between refined marketing and a place that will truly meet your loved one's needs.

This guide draws on years of deal with households, nurses, and administrators inside senior care. It concentrates on what to look for, what to ask, and how to judge trade-offs that rarely show up on glossy brochures.

What memory care is, and what it is not

Memory care is a specific type of senior care developed for people dealing with Alzheimer's illness and other dementias. It is typically housed within an assisted living neighborhood or a freestanding structure. Compared with standard assisted living, memory care offers secured environments, more personnel training in dementia care, structured daily regimens, and tailored activities that reduce anxiety and confusion.

It is not a healthcare facility, even if there is a nurse on site. Memory care bridges two needs that frequently yank in opposite directions: security and normalcy. The best neighborhoods keep individuals safe without making them feel locked up. They support choice making without setting residents as much as fail.

If you are not sure whether it is time, think about danger. Repeated roaming outside, range fires, frequent falls, weight loss from missed meals, incontinence that overwhelms home resources, and aggressive habits that put somebody at danger, all point toward the requirement for specialized dementia care. Respite care, which is a short stay in a memory care setting, can help you test the fit and capture your breath without committing to a long lease. Many households use respite care after a hospitalization or during a caretaker's medical leave to see how their loved one reacts to the structure and staff.

The care model under the hood

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

Staffing ratios. There is no single national standard for memory care staffing, because policies vary by state. Virtually, look for daytime caregiver ratios in the range of 1 to 5 or 1 to 8, depending on acuity, and higher ratios during the night, typically 1 to 10 or 1 to 15. Ratios alone do not tell the complete story. Ask how personnel are deployed. A ratio of 1 to 6 on paper can feel hazardous if half the group is on break or floating to another unit. Great operators schedule foreseeable breaks and float protection so homeowners are not left waiting during meals and bathing.

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

Clinical oversight. Memory care is typically supervised by a nurse, typically a RN who leads care planning and monitors medication technicians. Some buildings likewise host going to medical care companies, psychiatric nurse specialists, physical and physical therapists, and hospice groups. The very best setups include weekly or biweekly rounding by a medical professional who can adjust medications and catch infections or dehydration early. A nurse who understands the homeowners will observe when a quiet person ends up being quieter, or when a chatty individual's words lose focus, and will link those modifications to possible medical issues.

Medication management. Behavior in dementia is typically a kind of communication. Medications that sedate can quiet the behavior but also strip away mobility and cognition. Seasoned teams use antipsychotics and benzodiazepines with caution and track negative effects weekly during the first month. They work with prescribers to taper, and they trial environmental repairs initially. Door camouflage, calming music before sundown, discomfort control, bowel programs, and strolling programs can minimize the really habits that set off medication use.

The environment tells the fact about priorities

Design can either soothe or puzzle. Stroll the hallways slowly and enjoy how residents move.

Layout and wayfinding. Memory care systems with loops permit homeowners to stroll without dead ends that can spark disappointment. Brief sightlines to dining rooms and activity spaces assist people get involved. Try to find clear, large-print signage, contrasting colors on restroom limits and toilet seats, and shadow boxes or memory display screens by doors that cue room ownership. Customized entrances show the team values identity, not just space numbers.

Lighting and noise. Intense, natural light minimizes sundowning and improves sleep. Ask whether the community uses circadian lighting or at least avoids extreme fluorescent glare. Noise matters. TV volume in common rooms that overwhelms discussion is a warning. The spaces ought to hum, not roar.

Safety features. Safe and secure yards provide safe access to fresh air. Fencing must mix in, not feel punitive. Doors might be alarmed or utilize code pads. Wander management systems, like discreet bracelets, enable freedom within set zones. Fire protection, smoke barriers, and sprinklers should be apparent and code compliant. Floorings need to be matte, not glossy, considering that glare can look like water or holes to individuals with dementia-related visual changes.

Privacy and dignity. Look at restrooms. Are they tidy, bright, and equipped with incontinence products in such a way that does not promote a resident's challenges to every passerby. Are there lift systems or ceiling tracks in spaces where citizens require two-person transfers. If not, how do personnel protect backs and hips, both theirs and residents'.

Life in between breakfast and bedtime

Programs that look vibrant at 11 a.m. And dead by 3 p.m. Often rely excessive on a single activities director. Reality needs rhythm. People with dementia do best with [senior care](#) predictable regimens, little group engagement, and meaningful tasks.

Activities. Excellent calendars are not the goal. Involvement is. Try to find mixed activities across the day: baking, garden strolls, chair yoga, singalongs, and individually visits for those who prevent groups. Cognitive stimulation can be as basic as sorting nuts and bolts for a retired mechanic or folding towels for a former housewife who discovered pride in a tidy linen closet. Ask how the team engages people who refuse activities or nap throughout the day. An experienced aide will invite, not force, and will adjust the task so the person feels successful.

Meals. Food brings convenience. Inspect whether meals are served household design or plated. Finger foods help those who have problem with utensils. High caloric density matters for individuals who rate. See a meal if you can. Do staff sit and hint, or do they hover at a range. Are adaptive cups and plates available. Hydration stations with fruit-infused water or tea are useful, but just if personnel prompt sips throughout the day.



Bathing and personal care. Bathing can set off anxiety. The most effective technique is versatile scheduling and a calm rate. Look for non-slip seating, hand-held shower heads, and warmed towels. Ask how the group interprets rejection. Is it a tough no, or does somebody try again later with a different assistant who has much better connection. The answer reveals whether self-respect is practiced or just preached.

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

Culture shows up in little moments

You can sense culture in how staff greet each other and residents. Do assistants know the names of member of the family. Do they laugh with citizens without buffooning them. Are supervisors visible outside of tours and meetings.

Leadership stability matters. High administrator or nurse turnover usually ripples through the structure. A team that has interacted for several years anticipates problems before they swell. Ask for how long the executive director, nurse leader, and department heads have actually been in place. Short tenures are not instantly bad if the operator is investing in a turn-around, however you should penetrate what changed and what is improving.

Communication norms matter too. Memory care is a three-way relationship in between the resident, the group, and the family. Communities that schedule quarterly care strategy meetings, return calls the very same day, and share little wins develop trust. One neighborhood I dealt with sent a weekly image and two-sentence update to households. It was simple, yet it brought down anxiety and hospitalizations because family members stayed engaged.

Health combination, hospice, and medical facility use

Dementia care does not occur in a bubble. Residents still get urinary tract infections, pneumonia, heart failure, and fractures. Search for a care model that can react inside the building whenever possible. Point-of-care lab draws, telehealth with the primary care group, 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 community partners with hospice agencies and understands when to refer. If your loved one is dropping weight, withdrawing from activities, or experiencing frequent infections, palliative conversations can line up care with convenience. Ask where end-of-life care usually takes place. Many individuals prefer to pass away in location, with familiar personnel and family nearby. That takes training, coordination, and a clear prepare for sign management.

Falls occur. What matters is how the neighborhood gains from them. Incident reviews ought to be routine. Was the flooring wet. Were shoes appropriate. Did a brand-new medication cause dizziness. Communities that track patterns can reduce repeat falls without turning to unneeded restraint, that includes chemical restraint.

Cost, agreements, and what the small print hides

Memory care is expensive. In lots of areas, regular monthly base rates vary from 5,000 to 10,000 dollars, sometimes greater in major metro areas. Rates designs vary:

- Some communities use extensive pricing, where the base rate covers room, board, and most care.
- Others utilize tiered care levels, including charges as support requires increase, for example an extra 800 dollars for assist with two-person transfers or incontinence care.
- Medication management can be consisted of or billed per medication pass.

- Respite care is generally billed each day or week at a slightly greater rate however without a long-term commitment.

Ask about yearly rate increases. Typical ranges are 3 to 7 percent annually, however inflationary spikes can push greater. Clarify what activates a move to a higher care tier. If your loved one establishes habits that need additional staffing, the month-to-month costs may climb up rapidly. Agreements ought to specify notice durations for moving out, refund policies, and what takes place throughout hospitalizations. Some neighborhoods hold the space at complete or partial rate throughout a hospital stay, others permit momentary holds at a reduced fee.

Insurance rarely pays for room and board. Long-term care insurance coverage might compensate part of the cost if the policy consists of memory care. Medicaid coverage for memory care differs by state and is often connected to assisted living waivers. Veterans and making it through spouses might receive Help and Attendance benefits. Reputable administrators help families browse these programs without overpromising.

How to read quality data 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 upon state licensing. You can request state survey reports, which list shortages and restorative actions. A shortage is not always a deal-breaker. Repetitive patterns matter more than a one-time citation for a paperwork lapse. Ombudsman workplaces can share grievance patterns and help households deal with concerns.

Online evaluates capture extremes. Look previous star rankings and check out for specifics. Constant themes, like bad interaction or frequent personnel turnover, should have weight. Be cautious about anonymous rants that do not line up with what you see during a visit.

Touring method that conserves time and exposes truth

Tours arranged mid-morning on a weekday are often the community's best foot forward. You must see that variation, but likewise its opposite. Visit once again throughout supper or on a weekend. Listen for how staff respond to buzzers, who sits with residents during meals, and whether managers are present or reachable.

Consider using respite take care of a week or two if the community offers it. A short stay reveals how your loved one reacts to the environment. You will find out more from 3 bath efforts, two meals, and a Sunday afternoon than from any brochure.

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

- Arrive unannounced for a 2nd visit at a various time of day and watch a meal.
- Ask 3 direct-care assistants how long they have actually worked there and what training they get.
- Request to see the activity in a small group room, not simply the main event in the lobby.
- Review the last state study and ask what altered in response.
- Walk the courtyard and check whether exits are safe and secure however still feel humane.

Red flags you ought to not ignore

- Strong urine or fecal odors that stick around beyond a specific occurrence, which often indicates persistent understaffing or poor infection control.

- Residents parked in wheelchairs along corridors without any engagement for long stretches.
- Staff who discuss residents in front of them as if they are not there.
- Confused medication practices, like unsecured med carts or hurried passes with regular 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 know histories that do not always fit into medical charts. The biography of a previous teacher who relaxes when given reading product, or the Army veteran who reacts to structure and clear instructions, can change day-to-day results. Bring that knowledge. Numerous communities use a life story form. Exceed favorite foods. List subjects that trigger stress and anxiety, spiritual choices, music that relieves, and previous regimens. If mornings were always sluggish, pushing a 7 a.m. Shower may backfire.

Expect a care plan within thirty days of move-in, then a minimum of quarterly or after any significant modification. These meetings ought to move from problems to useful steps. If weight is down 5 pounds, who will cue 2nd aidings. If aggression takes place during bathing, what time of day and which team member yields better results. After the conference, verify the strategy in writing so move changes and new hires do not remove progress.

Communication ought to be two-way. Communities that share small accomplishments construct trust, and households that share upcoming medical visits or take a trip strategies help the team plan staffing and engagement.

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

The hardest part is in some cases psychological, not logistical. Families typically carry guilt, even when home care is unsafe. It assists to frame the move as a continuation of care, not a surrender of it.

Preparation smooths the landing. Bring familiar items that cue identity, like a preferred chair, quilt, or wall photos placed at eye level. Avoid mess that puzzles navigation. Label clothing clearly. If your loved one always kept a watch on the left-nightstand, location it there. Routines matter on day one. If coffee at 9 a.m. Was spiritual, tell the team.

Expect a wobble. Numerous citizens are more confused or agitated for the very first one to 2 weeks. Excellent teams increase individually time during this window, schedule reassuring check-ins, and lessen big group needs. You can help by visiting at times that align with calm durations, not during bathing or shift modification. If the person asks to go home, prevent arguing facts. Validate the feeling and reroute to something tangible, like a walk in the courtyard or a picture album.

Respite care as a bridge and a barometer

Short stays serve multiple functions. They give caregivers time to recuperate, and they supply information. If your loved one requires more triggering than the structure can provide even throughout respite, it may signal that the environment or staffing level is not enough. Alternatively, if sleep improves and wandering relieves, the structured regimen might be working. Use respite care to observe information, like how the group manages incontinence and whether skin remains intact. Request a brief 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 need sharper questions

Younger-onset dementia often comes with physical vigor and behavioral signs that surpass common memory care programs. Inquire about secure outside space for paced walking, staff training in de-escalation, and access to neuropsychiatry assistance. You may need a community that accepts higher skill, with more robust staffing and a strong medical partner.

Couples face a difficult calculus. Some communities let a spouse live on site in assisted living while the partner resides in memory care, reducing visits and meals together. It can work if both areas coordinate schedules. If the healthy partner tries to become the primary caregiver inside the building, burnout follows. Clarify borders and support.

Cultural positioning matters. Language gain access to, faith practices, and food customs are not extras. A resident who can speak to an assistant in their mother tongue will accept care more quickly. Ask about bilingual staff, chaplain support, and menu flexibility. Tour on a day when cultural programs is running if it is very important to your family.

A quick story from the trenches

A daughter I worked with, Elena, visited 4 communities for her father, Luis, who had mid-stage Alzheimer's. 2 looked stunning. One had a rooftop garden. Elena chose the least fancy building. Her factors were easy. The nurse had existed 9 years and greeted three residents by name, then asked one how his grand son's baseball video game went. A caregiver showed Elena how they utilized an easy apron with Velcro closures to preserve dignity during mealtime. The courtyard had a loop path with a bench every twenty feet. The administrator did not flinch when Elena asked for state study outcomes and strolled her through a recent medication mistake and the re-training that followed.

Luis moved in on respite look after 2 weeks. He slept through the night by day 4 due to the fact that staff redirected his 9 p.m. Pacing with a brief walk and cocoa, then an image album of his woodworking projects. Elena extended to an irreversible stay. A year later on, when Luis needed hospice, the same team handled his pain and kept his favorite Spanish guitar music playing gently in the space. Elena said the place never ever felt like a hotel, which was the point. It felt like people who understood her father.

Bringing it all together

Quality memory care reveals itself through constant staffing, thoughtful style, and everyday practices that protect dignity. Marketing can not fake the way a caregiver crouches to eye level to speak to a resident, or how rapidly somebody responds to a call light. If you develop your examination around staffing, environment, daily life, and health integration, and you test your impressions with a second visit or a respite stay, you will see the distinction between promises and practice.

There is no ideal choice. Compromises are unavoidable. A smaller building may provide intimacy but less on-site treatments. A bigger school may supply amenities however feel overstimulating. Your job is to match the location to the individual in front of you, not the individual they were ten years earlier. Ask plain concerns. Look previous chandeliers to bathroom grab bars and meal hints. Trust what you observe more than what you are told.

Most families do not regret moving too early. They are sorry for moving too late, after injury or caregiver collapse. If you reach the point where security, sleep, and health are collapsing, a well-chosen memory care community can restore balance for everyone included. Respite care can be your stepping stone. And when the time concerns lean on hospice, a strong group will help you keep the focus where it belongs, on convenience, 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](#) 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](#), 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.