

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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Choosing an assisted living community is one of those decisions that is both useful and deeply psychological. You are weighing safety, medical requirements, and cash, however also dignity, identity, and the texture of everyday life. Households typically inform me they want they had a clearer roadmap before they began exploring locations and checking out shiny brochures.

What follows is a structured, real-world checklist developed from years of operating in senior care, listening to families, and seeing what actually matters when someone relocations in. Use it as a guide, not a rigid rulebook. Everyone and every family has its own non-negotiables.

A fast 5-step checklist at a glance

Use this as your high-level roadmap. The rest of the article dives deep into each step.

1. Clarify needs, preferences, and timing
2. Understand spending plan, advantages, and monetary constraints
3. Build a short, reasonable list of assisted living choices
4. Visit, observe, and compare care quality and daily life
5. Review contracts, prepare the transition, and reassess after move-in

Most families move back and forth in between these steps rather than following them in an ideal straight line. That is typical. The point is to keep your decision anchored in a structured procedure instead of whatever center returns your call initially or has the shiniest lobby.

Step 1: Clarify needs, preferences, and timing

If you skip this step, whatever else gets more difficult. You will hear sales language from assisted living neighborhoods that might or may not match what your parent or loved one really needs.

Start with function and security, not age. 2 82-year-olds can have totally different support requirements. One may still drive, prepare, and manage medications, while the other battles with dressing, remembering dosages, and falls.

A useful way to think of this is to look at:

- Activities of everyday living (ADLs): bathing, dressing, toileting, transferring, eating, and continence
- Instrumental activities of daily living (IADLs): cooking, shopping, handling finances, transportation, household chores, handling medications

Even if you never utilize these terms with a center, having your own rough sense of whether your parent requires light, moderate, or heavy assistance with ADLs and IADLs will enable you to ask sharper questions.

It typically assists to have an objective assessment. This can come from:

A primary care doctor or geriatrician who knows their medical history.

A hospital discharge organizer, if you are transitioning after a hospitalization. A care supervisor or social worker who concentrates on senior care or elderly care.

If your loved one has amnesia, ask straight about cognitive issues. Early dementia can appear as confusion about time, difficulty handling cash, or repeated medication mistakes. Not all assisted living facilities are set up for substantial memory problems. Some offer devoted memory care units, with locked however home-like settings and staff trained particularly in dementia.

Alongside functional requirements, jot down choices. These matter for quality of life:

Location: close to family, familiar community, near a particular hospital.

Size: smaller, home-like buildings vs big campuses with more amenities. Culture: quiet and low-key vs active and social. Religious or cultural alignment. Animals, outside space, personal privacy, going to hours.

Finally, be truthful about timing. Are you preparing ahead, or are you responding to a crisis such as a fall or caretaker burnout at home? If it is urgent, you may need respite care first, then transition to irreversible assisted living when everybody can breathe and plan.

Step 2: Understand budget, benefits, and financial constraints

Money forms the sensible menu of choices. Households typically underestimate overall costs, then feel blindsided later.

Assisted living is usually personal pay. Medicare typically does not cover room and board in assisted living facilities, though it might cover specific medical services offered there. Medicaid protection varies by state and typically has waitlists, eligibility requirements, and limited participating facilities.

Start by clarifying:

What income and assets are available regular monthly and over the next 3 to 5 years.

Whether there is a long-term care insurance policy, and what it really covers. Eligibility for veterans' benefits, such as Help and Participation, which can offset some assisted living costs. Whether offering a home is on the table, and if so, on what timeline.

Facilities typically price estimate a base rate and then add tiered care fees. For example, the base might consist of rent, utilities, fundamental housekeeping, and some meals. Additional costs might get medication management, incontinence care, extra escorts, or enhanced monitoring in the evening. 2 residents in the same building can pay extremely different month-to-month amounts.

Ask yourself what trade-offs you are willing to make. A facility that seems pricey at first glance might supply higher personnel ratios, much better nursing oversight, or a stronger performance history managing complex conditions. A more affordable choice that relies heavily on outside home-health firms for even basic care can become more pricey and fragmented over time.

It is a mistake to focus just on the very first year. If your loved one has a progressive health problem such as Parkinson's or dementia, care needs will increase. You desire a senior care setting that can adjust without forcing yet another disruptive relocation in a year or two.

Step 3: Develop a brief, sensible list of assisted living options

Once you know needs and spending plan, resist the urge to tour every assisted living facility within 50 miles. You will burn out, and details will blur.

Start with 3 or four candidates that:

Fit within a realistic cost range, even after adding likely care fees.

Offer the level of care your loved one needs now, and potentially soon. Remain in areas that work for the relative most associated with care.

Information sources consist of online directory sites, state regulatory websites, regional senior centers, doctors, and word of mouth. Be cautious with online evaluations. Problems can show one unhappy household out of hundreds of homeowners, or they may expose patterns such as persistent understaffing or bad food quality.

A useful filter is to look at whether a center is licensed for assisted living just, or if it also supplies memory care or knowledgeable nursing on the exact same school. Continuing care neighborhoods can alleviate shifts as needs alter, however they can also have greater entryway fees and more complicated contracts.

Call each center and take note not just to the content, but to the tone and responsiveness. How rapidly do they return calls? Does the individual on the phone listen, or simply recite a script about features? The method a neighborhood manages you as a potential resident frequently mirrors [memory care near me](#) how they deal with families as soon as someone has actually moved in.

Ask for basic realities before scheduling a tour:

Current base rates and common overall monthly variety for citizens with comparable needs.

Whether they accept respite care stays, and on what terms. Staffing patterns, specifically the existence and hours of licensed nurses on site. Any current ownership or management changes.

If a center declines to provide even broad prices varieties before you visit, acknowledge that as a data point. Transparency at this stage saves everyone time.

Step 4: Visit, observe, and compare day-to-day life

Tours are frequently thoroughly choreographed. The technique is to look past the staged workout class and fresh flowers.

Plan at least one calm visit for each prospect. If possible, address different times of day: a weekday early morning and a weekend afternoon reveal various realities. Ask if your loved one can join for a meal or an activity, so you can see how they respond.

Here is where you switch from checking out marketing products to using your own senses.

First, see how you feel when you stroll in. Is the atmosphere warm and lived-in, or cold and hotel-like? Do staff welcome citizens by name? Are homeowners being in corridors looking disengaged, or are there pockets of activity at various practical levels?

Second, see personnel habits. Do caretakers seem rushed and stressed, or calm and attentive? Staff turnover is an important indicator. Every building has some churn, but consistent change can be a warning. Ask straight the length of time common caregivers and nurses stay.

Third, focus on hygiene and safety:



Cleanliness of typical locations and bathrooms.

Smells that might recommend poor incontinence management. Lighting, floor covering, and handrails that affect fall risk. How staff help homeowners with walkers or wheelchairs.

Fourth, take a look at how medications are managed. Medication management is among the most essential services in assisted living, and errors can have major effects. You want clear systems: locked medication rooms or carts, recorded administration, and noticeable oversight by nursing staff.

Finally, assess meals and social life. Food in elderly care is more than nutrition; it is comfort and regimen. Attempt a meal if possible. Ask whether they can accommodate unique diet plans, such as low salt or diabetic. Observe whether staff in fact help locals who require cueing or physical help to consume, rather than leaving trays and walking away.

Many households find it beneficial to bring a short list of concerns. Keep it practical and avoid being swayed just by facilities that sound great however might never be used.

Here is one focused checklist of concerns to assist your tour conversations:

1. What is the staff-to-resident ratio on days, nights, and overnight, and how is it adjusted when needs boost?
2. How are care strategies established, who takes part, and how often are they updated?
3. How do you handle falls, unexpected illness, and modifications in condition, including when to call 911 or a relative?

4. Can you explain a common day here for somebody with my loved one's abilities and interests?
5. How do you communicate with households about concerns, events, or gradual decline?

Write answers down. After a few visits, every structure's sales pitch starts to sound comparable. Your notes assist you compare realities, not marketing language.

Step 5: Assess care quality, staffing, and medical support

The expression "assisted living" covers a wide variety of models. Some communities are heavily hospitality-focused, with stunning decor however minimal scientific depth. Others have strong nursing management but fewer frills. You desire the right mix for your situation.

Care quality depends upon staffing patterns, training, supervision, and relationships with external providers.



Ask about:

Who is really providing day-to-day care. Many hands-on tasks are done by caregivers or qualified nursing assistants, not nurses or doctors.

Whether there is a nurse in the structure 24/7, just during organization hours, or on call after hours. How often medical suppliers, such as visiting physicians or nurse specialists, come on site. What occurs when a resident's needs intensify beyond the initial care plan.

If your loved one has intricate conditions, such as heart failure, COPD, insulin-dependent diabetes, or innovative dementia, you will want a community with stronger medical capabilities. This might affect expense, however it lowers frequent healthcare facility journeys and unplanned moves.

Medication management systems vary widely. Some facilities charge per medication pass, others bundle it. For individuals on several medications, clarify who reconciles new prescriptions after hospitalizations, how they avoid duplication, and how they monitor for side effects.

Respite care can be a beneficial tool during this phase. A brief, time-limited assisted living stay lets you test how a neighborhood deals with medications, habits, and day-to-day routines without committing to a long-term agreement. I have seen families find during a two-week respite remain that a supposedly small dementia issue in fact requires a memory care environment. That discovery, while tough, prevented a bad long-term placement.

Finally, ask about end-of-life support. Even if it feels early, comprehending whether a facility partners well with hospice, and what locals can stay in place for, tells you something about their viewpoint of care. A senior care

company who talks conveniently and concretely about later on phases is normally more experienced and realistic.



Step 6: Check out the contract like a skeptic

Once you have a front-runner, withstand the urge to rush through the documentation. The assisted living contract is where expectations, rights, and duties live. Problems typically arise not from bad individuals, but from misconceptions buried in fine print.

Block out quiet time to check out:

How the base cost is defined, and exactly what services it includes.

How care levels or point systems work. There is typically a schedule that assigns points for each kind of help, then equates points into a care tier and fee. Policies on rate boosts, both annual and due to increased care needs.

What sets off discharge or transfer to another level of care.

Pay unique attention to the sections on:

Refunds or credits if your loved one moves out or dies partway through a month.

Resident rights, including grievance procedures and how issues can be escalated. Duty for individual belongings and damage.

It is often worth having actually another trusted person checked out the arrangement too. If something is uncertain, ask for a plain-language explanation and get it in composing, even in the form of an email.

Also clarify the role of outdoors services. Lots of homeowners receive physical therapy, occupational treatment, or nursing through home-health companies while residing in assisted living. Who arranges those services? Where will they take place? How do they communicate with the center about preventative measures and follow-up?

If your loved one is moving in from home, inquire about how they handle the very first one month. Some neighborhoods have casual "trial" durations or extra check-ins as the resident changes. Others expect families to offer more existence at first, particularly if there is stress and anxiety or confusion.

Step 7: Plan the move and the first few weeks

The transition itself can make or break the experience. You are not simply changing an address; you are re-building day-to-day life.

Involve your loved one as much as they can manage. Even someone with moderate cognitive disability may be able to choose favorite chairs, images, or bedding to bring. Familiar items decrease the shock of a new environment. Attempt to keep cherished possessions, such as a comfy recliner or quilt, even if they are not stylish.

Coordinate with the facility about:

Furniture measurements and what they provide vs what you ought to bring.

Move-in scheduling to avoid extremely hurried or late-day arrivals, which can be difficult for somebody with dementia. Medication handoff, including having enough dosages on hand and upgraded prescriptions.

For the very first couple of weeks, expect feelings. Homeowners might reveal regret, anger, or sadness. Caregivers at home may feel guilt or relief, in some cases both simultaneously. I have seen households translate a rough very first week as an indication the positioning was an error, when in truth it was a regular adjustment.

Stay noticeable, however also provide personnel room to build their own relationship. Daily visits in the beginning can comfort your loved one, but attempt not to intervene in every small request. Rather, utilize that preliminary period to observe patterns: Is your parent dressed, groomed, and engaged? Do staff seem to know their routines and quirks?

If your loved one came from home with a really stretched family caregiver, think about using respite care language even for a longer stay. Framing the relocation as "attempting this out" can decrease the psychological weight, even if you expect it to be permanent.

Step 8: Monitor, review, and advocate

Choosing a center is not a one-time decision. It is a continuous relationship. The very best outcomes take place when families stay involved, respectful, and properly assertive.

Keep an eye on:

Changes in look, weight, state of mind, or mobility.

Patterns of falls, infections, or hospitalizations. How rapidly and clearly the center interacts when something happens.

Most assisted living communities have routine care conferences. Attend them if you can. Utilize those conferences to upgrade the team on what you are seeing and what matters to your loved one. For instance, if your mother is most likely to shower at nights because she constantly did so, share that. Small details can make care more successful.

When concerns occur, begin with the individual closest to the issue, such as the nurse or care manager, and intensify step-by-step if required. Facilities normally react better to particular, accurate issues than to broad accusations. "I have found 3 unopened medication packages in her space in the last month" is more actionable than "you never manage her meds right."

Sometimes, after all efforts, you may understand the fit is wrong. Perhaps your loved one requires a devoted memory care system, or a various culture, or an area better to another family member. Moving again is hard, however staying in a setting that can not satisfy evolving needs can be harder. Utilize what you have learned from the very first experience to make a more targeted option the 2nd time.

Balancing security, autonomy, and quality of life

The heart of assisted living is a fragile balance. You are attempting to offer sufficient support to be safe, without stripping away independence and meaning. Too much supervision can feel infantilizing; too little can be dangerous.

In practice, the very best centers deal with residents as partners rather than problems to manage. They respect long-standing routines, even when those practices are troublesome. They understand that quality senior care is not just about preventing falls or managing high blood pressure, however likewise about laughter at lunch, a familiar hymn in the background, or an employee who keeps in mind exactly how somebody takes their coffee.

As you move through this checklist, give equal weight to your head and your gut. Numbers and contracts matter. So does the subtle sensation you get when you see staff joking carefully with a resident or taking an additional minute to sit at eye level. Assisted living and elderly care have to do with relationships at their core. If the relationships look right, and the concrete information line up with requirements and budget plan, you are most likely really near the best place.

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

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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

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?

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People Also Ask about BeeHive Homes of Crownridge Assisted Living & Memory Care

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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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Residents may take a nice evening stroll through [La Villita Historic Village](#) — a historic arts community in downtown San Antonio featuring art galleries, artisan shops, and restaurants.