

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.

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6919 Camp Bullis Rd, San Antonio, TX 78256

Business Hours

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

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Therapeutic engagement is not a calendar of diversions. It is the everyday work of protecting identity, preserving strengths, and relieving distress for people dealing with cognitive change. When engagement is done well, a person might not remember every activity, yet they carry forward the feeling of being valued and safe. That feeling shows up in less distressed habits, steadier sleep, more willing involvement in care, and a deeper sense of home.

I have spent years developing programs in memory care homes and recommending assisted living communities that support citizens with dementia. The successes hardly ever originated from ideal craft projects or glossy innovation. They originated from ordinary moments made deliberate. Brushing a resident's hair with their preferred comb. Folding towels together with someone who as soon as raised 6 children and ran a hectic home. Planting marigolds utilizing a trowel with a thicker, easy-grip handle. These are not little things. They are the active ingredients.

Why engagement matters more than ever

Cognitive problems changes how the brain processes details, however it does not remove an individual's requirement for function and belonging. Research and practical experience converge on a couple of trusted realities. Purposeful activity can reduce agitation and apathy, decrease the use of PRN antipsychotics, and improve cravings and hydration. Constant routines support circadian rhythm, which in turn minimizes late-day confusion and nighttime roaming. Social exchanges, even short ones, aid keep language and emotional regulation.

In everyday practice, I have seen a resident who paced for hours discover calm when welcomed to sort the early morning mail with a little cart. Another resident, formerly withdrawn, began attending meals after we presented her to a peer who taught her a simple hand-clap game from childhood. None of this required a clinical degree. It needed observation, curiosity, and the will to individualize.

Principles that make activities therapeutic

Therapeutic engagement rests on 5 principles. Initially, start with bio, not medical diagnosis. Second, choose activities that match current abilities, not past peak abilities. Third, respect autonomy with genuine choices. 4th, provide the right amount of cueing, then go back. Lastly, anchor every day in a predictable rhythm while leaving space for spontaneous joy.

Biography tells you that Mr. Patel was a pharmacist who liked cricket. That recommends accuracy jobs, sorting, and group enjoy parties for matches with familiar sounds. A person's abilities recommend the medium and complexity. If visual-spatial skills have actually decreased, avoid 1,000-piece puzzles and go with large-format jigsaws, color matching, or photo sequencing. Option may be as easy as, Would you like to water the basil or the mint? Cueing is best when it empowers. Set out two t-shirts, start the primary step, put the comb in hand, then pause. The rhythm of the day need to be consistent adequate to orient, however versatile sufficient to catch stimulates of interest.



Setting the day as much as succeed

The initially 90 minutes after waking set the tone. Lighting matters. Natural light, blinds open, little lights on by 6:30 or 7:00 a.m., supports circadian signals. Hydration is simplest when it belongs to a ritual. A warm cup of lemon water or tea on the nightstand, sipped gradually while a favorite song plays at low volume, frequently beats a cool water pitcher no one sees. Movement early in the day, even if it is sluggish, lowers uneasiness later. 10 minutes of corridor walking or seated stretches while going over the weather condition can help.

Breakfast can be both nourishment and treatment. Finger foods support self-reliance when utensils annoy. Intense plates use contrast for individuals with depth-perception difficulties. I have actually had locals eat 25 percent more when we served oatmeal in vibrant bowls and changed the white tablecloth to soft blue. Discussion beats statements. Present a basic timely. What did your family eat on Sundays? Accept short, partial, or nonverbal responses as completely legitimate contributions.

Finding the right level of challenge

Challenge is restorative when it creates a sense of doing, not of failing. I utilize a simple rule of thumb. If the activity generates three or more requests for aid in the very first minute, it is too difficult. If the individual appears tired or disengaged after a short trial, it is too simple. The sweet spot welcomes gentle effort and small wins.

Adaptive tools make a distinction. Usage chunky crayons, broader paintbrush deals with, and decks of playing cards with large print. Glue buttons to a wood board to imitate t-shirt attachment without the pressure of getting dressed. Alternative plastic coins for heavy metal ones when practicing counting. For reading, print a paragraph in 18 to 22 point font with generous spacing. For visual cues, tape a photo of a bathroom on the restroom door and a simple illustration of a bed on the bedroom door.

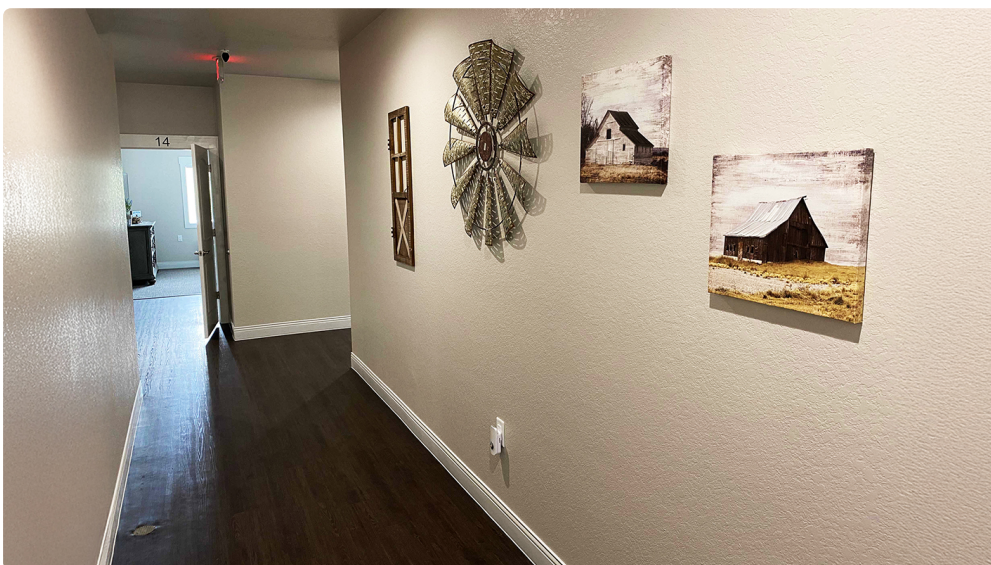
Movement as medicine

Sedentary days breed stiffness, swelling, and sleeping disorders. Motion does not need to mean formal workout classes, although seated tai chi or chair yoga can be exceptional. I choose to weave [respite care beehivehomes.com](#) motion into jobs and video games. A 5 minute broom sweep of the patio, a beach ball toss across a table, carrying washcloths from clothes dryer to rack, or moving seedlings from one tray to another each include up.

For citizens who are unsteady, parallel walking is much safer than face-to-face. Stand at the individual's side, lightly provide your forearm, and move together while explaining familiar landmarks. For those using wheelchairs, dance parties still work. Location the chair on a company surface, safe brakes throughout transfers, and invite swaying and upper-body movements to tunes they understand. Constantly monitor for indications of exertional fatigue, like a furrowed eyebrow, pursed lips, or shallow breathing. Much better to stop early and attempt once again after a short rest than to press through and associate the activity with discomfort.

Music, memory, and mood

Music is unrivaled for cueing memory and shifting state of mind. The trick is to match the period and emotional tone. Individuals often link strongest to music from their teens and twenties. Build playlists that reflect individual history. A former choir director may prefer hymns. A jazz enthusiast might relax to Coltrane. Keep the volume at a level that does not stun, and prevent long playlists of unfamiliar tracks that end up being background noise.



Live music, even if imperfect, beats recorded noise for engagement. Invite homeowners to keep time with shakers, a drum, or clapping. Call that tune works well when you sing the first line yourself. Look for overstimulation. If hands wring or eyes dart, switch to a slower, simpler song, or stop entirely and talk about a concert the individual once participated in. Frequently, a short, focused musical moment suffices to lift a state of mind for hours.

Conversations that go somewhere

Many well-meant concerns require recall that dementia makes undependable. What did you have for lunch? Too often results in anxiety. Shift to acknowledgment and choice. Does this soup odor great to you? Or Should we add more cinnamon or less? Another strategy is to speak about the present environment. I see the light on the floor looks like a river. What do you see? Keep questions closed-ended when energy is low, open-ended when an individual is lively.

I keep prop boxes to stimulate conversation. One box may hold a baseball glove, a ticket stub, and an old scorecard. Another holds a thimble, determining tape, and material swatches. Tactile cues lower the barrier to participation. Real reminiscence is less about specific realities and more about connecting to sensations. If a resident insists they require to catch a bus to work, I seldom oppose. Rather, I inquire about their route, associates, and favorite part of the day, then pivot to a job that matches that identity, like organizing a clipboard or marking off a supply list.

Turning daily care into therapeutic engagement

Activities of daily living are not different from the activity calendar. They are the core of memory care. Bathing can be a quiet health spa experience with warm towels and lavender lotion, or it can end up being a battle if hurried and cold. Dressing can be an opportunity to reveal taste, or a rushed assembly line. Mealtimes can be social routines that stimulate cravings, or they can be trays stabilized on knees in front of a television.

When a resident withstands a shower, I try a hand-and-face wash at the sink with music, then transfer to a partial shower the following day. If an individual declines to change clothing, I swap the t-shirt later on in the morning when mood is calmer, offering a favored color. During meals, I serve one or two food items at a time, not a full plate that overwhelms the visual field. I seat pals near each other based on observation, not the paper seating chart. I commemorate small bites, unclean plates.

The art studio and the workshop

Creative work opens pride. Paint with thick, extremely pigmented watercolors on textured paper, not floppy printer sheets that buckle when wet. Start with a mild outline if required, then remove it as confidence grows. Collage with photos from old magazines, wallpaper samples, and dried leaves. For woodshop fans, sand small pine blocks to smoothness, then stain with low-odor, water-based surfaces. Usage bench vises with rubber guards.



Perfection is the opponent of engagement. If a resident paints a sky green, I do not remedy. I ask what the sky felt like that day. Projects need to be completable in one sitting for numerous homeowners, ideally 15 to 40 minutes. Deal a clear start and surface, then display work respectfully in typical areas. Label pieces with the resident's chosen name, not a small or label they do not use.

Gardens, cooking areas, and the smell of something good

Scent prompts cravings and memory more dependably than lectures about nutrition. When the cooking area bakes cinnamon rolls at 10 a.m., the hall fills with residents who skipped breakfast. Herb planters on the patio area welcome pinching leaves to release fragrance. Tomatoes pulled off the vine make sense in a salad that afternoon. For security, prevent plants that can aggravate or toxin, and constantly verify allergy histories. Thicken grip manages on watering cans and trowels with foam sleeves.

Culinary groups assist with executive function through sequencing. Making fruit salad can be broken into actions. Select fruit, wash, peel or slice with safe tools, mix, and serve. Welcome locals to select the bowl for serving and whom to provide a portion first. For some, washing and drying meals is the favorite part. The sound of water and the clarity of a tidy plate provide concrete satisfaction.

Technology, used sparingly and well

Tablets can extend reach, but they are not a remedy. I pack them with large-icon apps for singalong lyrics, jigsaw puzzles with adjustable piece counts, and image albums curated by families. Video calls work when arranged around routines, like late morning after coffee. Keep calls short, 5 to 15 minutes, and prime the conversation with a timely the relative can use. I often send a message like, Ask Dad about his 1968 road trip and the red Chevy, then transfer to showing him the picture of your dog.

Motion-sensing projection systems can stimulate motion for individuals who are otherwise tough to engage. Knocking a projected butterfly or brushing aside falling leaves is user-friendly. Look for glare and sound. If the tool annoys or distracts, put it away. Tech ought to follow the individual, not the other way around.

Handling distress in the moment

Even with the very best preparation, distress will surface. If a resident ends up being upset throughout an activity, I stop before escalation, acknowledge the feeling, and provide an option that maintains company. You look unpleasant. Would you like to sit by the window or step into the garden? Prevent arguing facts. If someone insists their mother is waiting, react to the emotion. You miss your mother. Inform me about her hands, then approach a relaxing activity like folding soft headscarfs or listening to a lullaby.

Sundowning, the late afternoon spike in confusion, frequently softens with a structured handoff from day to evening. Dim extreme lights, switch to warm bulbs, begin a calm routine at the same time daily, and use a light snack with protein and complex carbohydrates. Decrease ambient noise. If the television must remain on, use closed captions and lower volume to decrease unexpected spikes that raise stress.

Training personnel and sustaining the program

Good engagement programs depend on staff who know residents well and feel empowered to adapt. A strong memory care home deals with every team member, from housekeeping to nursing, as an engagement partner. We schedule short skill gathers two times a week. In ten minutes, we evaluate a resident highlight. Maria joined

lunch after we showed her images of her garden. Action for all: try a garden trigger with Maria before twelve noon. These micro-lessons keep knowledge flowing.

Documentation needs to be light and useful. I choose a one-page profile at the front of the chart with bio notes, engagement choices, and reliable de-escalation phrases. Track outcomes that matter. Hours slept, meals eaten, falls, rejections of care, and PRN utilize create an image with time. If Wednesday afternoons show a pattern of anxiety, change programming there initially, not by adding more on Monday when things already go well.

Families as co-designers

Families frequently carry secrets we would not discover otherwise. Invite one concrete contribution per month, rather than general suggestions. Bring 3 tunes your dad sang in the automobile. Lend us 2 photos of your mother at work. Make a note of the sentence your wife utilizes when she requires a break. These specifics translate into action.

Visits go better with a plan. Get here after the resident's best time of day, generally mid morning or early afternoon. Keep visits much shorter when the individual tires easily. Bring a tactile item, like a scarf to fold or a publication to turn. If a visit is going poorly, do not promote another ten minutes to strike a target. Step out, quick the personnel, and try a various technique next time.

Assisted living, memory care, and what changes in approach

Assisted living communities that serve a broad population can still deliver strong dementia care with a couple of modifications. Lower ecological clutter. Usage constant visual cues. Train all personnel on validation and cueing, not just activity directors. Offer parallel shows so residents can select a quieter choice when the centerpiece is lively and overstimulating. A memory care home, designed particularly for cognitive assistance, has the advantage of smaller sized, more regulated spaces, but the very same concepts use. The goal is not more activities. The objective is the right activities, provided at the right time, by people who observe small changes.

Families often ask whether moving from assisted living to a dedicated memory care home will improve engagement. The answer depends on staffing ratios, training, and ecological style. A smaller sized system with consistent staff normally suggests faster knowing of choices and patterns, which improves engagement quality. The compromise can be fewer large-group alternatives, which some extroverted homeowners miss out on. Balance matters. Tour at the time of day your loved one struggles most, and enjoy how the team reacts to distress.

Measuring what matters

Activity calendars look excellent on paper. Effect shows up in information and in micro-behaviors. Track 3 to 5 indicators that tie to objectives. If the objective is less nighttime awakenings, record bedtimes, wake times, and variety of checks needed. If the objective is improved appetite, weigh residents weekly and note plate coverage after meals in simple percentages. If the objective is lowered agitation, tally PRN administrations and behavioral notations by time and context. Make one modification at a time and look for 2 weeks before deciding if it helped.

Anecdotes still matter. Jan smiled today when painting violets, after 2 weeks of refusing group. That sentence tells you to keep violets in the rotation and to plan more small-group art.

A useful mini playbook for day-to-day rhythm

- Open blinds by 7:00 a.m., offer warm hydration, and play a familiar early morning song.
- Build movement into tasks by mid early morning, not just arranged exercise.
- Use sensory anchors before lunch, like baking or herb pinching, to promote appetite.
- Protect quiet from 2:00 to 3:00 p.m., with low stimulation and optional rest.
- Start a predictable night wind down with warm lighting, light treat, and mild music.

Adapting on the fly when the strategy breaks

Calendars break down for excellent reasons. A fire drill shifts lunch late. A preferred employee calls out. Weather condition traps everybody inside. The very best teams bring a small set of quick-win activities that need little setup and can be done anywhere. I keep a soft basket with large-print trivia cards, two harmonicas, a deck of extra-large cards, scented lotion, and a hand mirror. 10 minutes of harmonica improvisation can reset a room far better than a scrapped trivia hour that everybody now resents.

I likewise train teams to read the space before they reveal an activity. If people are plunged and peaceful, start with a low engagement wedge, like gentle stretches or one-to-one greetings, and let energy increase before you roll into bingo. If energy is high and spread, select a unifying activity with clear structure and quick turns, like pass the ball with brief prompts. If one resident controls, give them a function. Can you be our timekeeper? Hand them a simple sand timer.

Risk, self-respect, and the right level of safety

Some of the most significant activities bring mild risk, which is acceptable with clever preparation. A resident may want to chop veggies. Use a rocker knife with a protective glove. Another may want to plant tomatoes. Kneeling might be unsafe, so raise planters to hip height. A retired carpenter may request his tools. Offer a brace, soft woods, and continuous supervision. The concern is not how to eliminate threat, however how to align security with dignity.

Falls are the leading concern, and rightly so. Still, debilitating people out of fear often leads to deconditioning, which paradoxically increases fall threat. Present motion gradually, monitor footgear and surface areas, and teach personnel how to guard without getting. If a fall happens, evaluation context without blame. Was the lighting low? Was the task too complicated? Change and try again.

A brief checklist for individualizing engagement

- Identify two life functions to honor this month, like instructor, parent, baker, or gardener.
- Add one sensory favorite, like lavender, cedar, cymbals, or gospel harmony.
- Choose one movement that feels natural, like sweeping, stretching, or dancing seated.
- Set one day-to-day anchor task the individual can complete most days.
- Agree on one convenience expression staff will use during distress, composed verbatim.

When engagement alters the arc of the day

The results of great engagement typically unfold quietly. A resident who strolled the hall nighttime starts sleeping four to 5 hour obstructs after afternoon garden work ends up being regular. A guy who pushed away staff throughout bathing accepts care when the assistant first plays a tune he sang to his kids. A female who avoided meals takes 3 more bites per sitting when given a red plate and welcomed to serve a pal first.

Across a 20 bed memory care system I supported, we saw PRN antipsychotic use stop by approximately one third over six months after carrying out constant morning light, music matched to bio history, and purposeful tasks like mail sorting and laundry folding. We did not alter medical diagnoses, just every day life. The team observed fewer rejections of care, and households reported more meaningful visits. These results were not produced by more pricey activity products. They were produced by personnel who discovered to match tasks to people, not the other method around.

Therapeutic engagement in dementia care is not a specialized silo. It is a culture. Whether you operate in assisted living with a blended population or in a devoted memory care home, the essentials hold. Know the individual. Forming the environment. Deal purposeful choices. Usage sensory anchors. Safeguard rhythm. And when things go sideways, as they in some cases will, satisfy the moment with humility and attempt again, one little, human-scale activity at a time.

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

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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

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?

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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.

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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.