

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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Choosing where a loved one will live is not an abstract workout. The decision follows sleep deprived nights, kitchen table arguments, and a stack of glossy sales brochures that all guarantee warmth and dignity. A tour can cut through the sales language. You see genuine faces, hear dining room clatter, and discover whether personnel understand homeowners by name. The right concerns during that tour bring the fact into focus.

Families frequently tour two types of settings. Assisted living offers help with day-to-day jobs like bathing, dressing, and medication tips, while still promoting independence. A memory care home is constructed for people with Alzheimer's disease or other dementias, with safe layouts, staff training in dementia care, and programs that lower anxiety and maintain capabilities. The overlap can be confusing. One building might market both, however the goals and guardrails differ. Your questions should, too.

Why the tour matters more than the brochure

Care communities are living organisms. Documentation [dementia care](#) informs you the care levels and features. A tour reveals you culture. I still keep in mind a visit with a child whose mother had actually started wandering in the evening. The sales office explained "mild redirection." On the tour, a nurse discussed they had changed 3 doorknobs after citizens tried to force them open. Neither information invalidated the other, however together they painted a more truthful picture.

Tours also let you check consistency. What you hear from the sales director should match staff on the floor. If you ask the dining server how snacks are handled and get a clear response that matches what the nurse stated, that is a good sign. If 3 people provide three different answers, keep asking.

Know what kind of support your loved one needs

Before you walk in the door, make a note of two lists, one of what your loved one can do unassisted, another of what consistently needs aid. For memory care, include cognitive details. Does your dad misplace products, or is he getting lost outside? Has your partner had misconceptions or sun-downing? Exists a current health center stay, weight reduction, or falls? The sharper your picture, the more accurate your questions.

Assisted living and a memory care home can both feel warm and social, however the scaffolding underneath is various. Assisted living generally anticipates citizens to follow cues, remember some actions, and respond to triggers. A memory care program builds the environment around the disease. Hallways are looped to avoid dead ends, kitchens can be secured, and noise and light are tuned to minimize overstimulation. Knowing where you sit on that spectrum will form what you ask.

The distinction between memory care and assisted living in practice

Regulations vary by state, but some broad distinctions hold true.

- Staffing and training expectations in memory care are greater. You will often see extra hours of caretaker time per resident and required dementia-specific education.
- Safety procedures are more robust in memory care. Think of protected yards, delayed egress doors, and inconspicuous monitoring for elopement risk.
- Activities are structured differently. An assisted living book club might perform at 3 p.m. Five days a week. Memory care typically areas shorter, sensory-friendly sessions throughout the day, with parallel activities to satisfy different capability levels.
- Care plans adapt much faster in memory care. Behavior management, medication changes, and interaction strategies shift as the illness changes.

The building might be beautiful in both settings, however appeal alone does not calm confusion at 2 a.m. Or prevent a fall near the restroom. Match the setting to the requirement, not to the chandelier.

A short pre-tour checklist

Use this fast pass to arrive prepared and keep the tour focused.

- Bring a summary: diagnoses, medications, recent hospitalizations, and your leading 3 concerns.
- Clarify finances: anticipated budget plan range, including a practical top end for care add-ons.
- Ask who leads the tour and whether you can talk to clinical staff, not simply sales.
- Request to see a room like the one that would be provided, not simply the model.
- Plan to visit at an off-peak time, like early evening, in addition to the set up tour.

Core questions that use to both settings

Some concerns crossed all senior living models. Start with these, then branch into memory care or assisted living specifics.

Ask about staffing patterns. "How many caretakers are on the floor on days, nights, and overnights, and the number of residents do they cover?" A straight ratio can mislead if the building is large or expanded, so follow up with, "Are personnel assigned to consistent groups of homeowners or floated building-wide?" Continuity matters, particularly for dementia care, due to the fact that trust and familiarity lower anxiety.

Ask how they handle scientific requirements. "Who manages medications everyday, and what is your protocol for missed out on or refused doses?" Then, "What occurs when a resident's requirements increase? At what point do you recommend a greater level of care?" You desire a clear escalation course and transparency about thresholds.

Ask about emergencies. "In the last six months, how frequently have you moved residents to the hospital and for what type of concerns?" You are not fishing for a best number. You want to hear thoughtful criteria and solid communication with families.

Ask how they track and interact change. "How frequently are care strategies upgraded, and how will you inform us about modifications in appetite, state of mind, or mobility?" Technology can help, but the compound remains in who observes, documents, and acts.

Finally, inquire about resident life. "What does a typical Tuesday look like here?" Then see if the response matches what you see in the hallways.

Questions specific to a memory care home

Memory care, when succeeded, is not a locked wing with beautiful art. It is a specialized environment and culture. Your questions ought to emerge how that culture appears at 7 a.m., 2 p.m., and 3 a.m.

Ask about the philosophy behind their dementia care. Good programs can discuss their approach in everyday language. Some follow a popular structure and adapt it, others build their own blend of occupational treatment, recognition techniques, and sensory engagement. You are listening for intentionality. If the response is just, "We reroute and assure," push for examples.

Probe training details. "What dementia-specific training do all caregivers receive before working alone, and how typically do you refresh it?" Appropriate responses name hours, content, and practice, for example de-escalation strategies, understanding unmet requirements behind habits, and safe transfers for people who withstand care. Ask if housekeeping, dining, and upkeep staff get training, given that they hang around with homeowners too.

Dig into behavior assistance. "How do you respond if my mother ends up being fearful during bathing or my father accuses personnel of taking his wallet?" You want to hear structure: prepare for triggers, modify the job, swap caretakers if there is a personality inequality, consider time of day, and record what worked. Medication is one tool, not the only one.

Security should secure self-respect, not feel like a prison. "How do you keep citizens safe from elopement without over-restricting freedom?" Ask to see exits, yards, and wander management innovation. Ask whether locals can go outdoors unaccompanied and how personnel display that area. Expect doors that alarm constantly, a sign of regular near-misses or poor ecological cues.

Activities require to be more than home entertainment blocks. "How do you tailor engagement for people at various stages of dementia?" Try to find parallel shows, for example a cooking area table group folding towels and thinking back, a small music circle, and a walking club, instead of one large event where half the group is lost. Ask if activities continue into the night, when agitation can spike.

Food and dining tone down stress and anxiety. "Can you accommodate finger foods for somebody who forgets utensils? Do you serve smaller sized, more regular meals?" In strong memory care, you will see visual menus, contrasting plate colors, and staff who sit at eye level. Inquire about hydration strategies, since urinary system infections and dehydration often masquerade as behavioral issues.

Staffing information matter. Numerous memory care homes staff much heavier throughout nights and mornings to support bathing and transitions. As a really rough referral point, I frequently see day shifts with one caretaker

for 6 to eight locals, nights 7 to nine, overnights 9 to twelve, with a medication assistant and a nurse readily available or on call. These numbers vary by state rules and skill, so treat them as conversation beginners, not strict benchmarks.

Ask how they support families. "Will you teach us techniques that work here so we can utilize them throughout visits? How do you assist when we face regret or resistance?" The very best programs coach families, share what relaxes dad, and debrief after hard days.

Finally, ask how they determine success. "Can you share current data on falls, weight changes, hospital transfers, or antipsychotic usage?" Numbers vary, but a neighborhood that tracks and discusses them freely is doing the work.

Questions particular to assisted living

Assisted living serves a wide variety of citizens. Some are spry and social, others require help with numerous activities of daily living. Your questions should tease out how versatile the support is and how it scales.

Clarify admission and retention criteria. "What are the clinical limitations for assisted living here? Do you accept citizens who require two-person transfers, or those who use sliding scale insulin?" Not all structures can manage the very same care. If your partner requires night-time toileting assist, confirm that over night staffing can do that safely.

Ask how they hint and support memory lapses. Even if you are not exploring a memory care home, moderate cognitive problems is common. "If my father forgets medications or misses out on meals, how will you discover and assist?" Some structures provide wellness checks, others rely more on citizens to come to meals and events. Make certain expectations match reality.

Look carefully at the activity calendar and who actually attends. "The number of homeowners typically sign up with workout, lectures, getaways? Do you use small group or one-to-one choices?" A lively calendar means little if the majority of locals do not or can not participate.



Probe transport and medical coordination. "How do you handle medical appointments? Exists a nurse on site every day? Who follows up after a hospital visit or rehabilitation stay?" Assisted living is social, but health setbacks still take place. Ask how they assist citizens bounce back.



Discuss the path if memory issues grow. "If my spouse begins roaming or revealing misconceptions, what support can you include here, and when would you advise relocating to memory care?" Some assisted living structures have a devoted memory care wing, which can ease shifts. Others may request for outside companions, which adds cost. You want a plan, not a shrug.

Compare side by side throughout the tour

A basic contrast during your visit can help you see beyond labels.

[Measurement]	[Memory care home]	[Assisted living]	--	--	--	[Staffing]	[Greater caretaker hours, dementia-specific training, often smaller task groups]	[Variable caregiver hours, general training, bigger project groups]
[Environment]	[Secured borders, looped hallways, lowered overstimulation]	[Open access, more resident-controlled movement]				[Activities]	[Short, frequent, sensory-based, parallel groups]	[Bigger group events, lectures, fitness classes, outings]
						[Dining]	[Visual hints, finger foods, pacing adjustments]	[Dining establishment style, menus, set mealtimes]
						[Care adjustments]	[Fast response to behavior and cognitive modification]	[More reliance on resident initiative and prompts]

This table is just a beginning point. On the ground, programs vary commonly. Let what you see and hear guide you.

What to enjoy and listen for while you walk

I like to stop briefly at thresholds. Stand quietly near the activity space for a complete minute. Does the facilitator keep individuals engaged or look harried? Enter a resident hallway and notice smells. Occasional odors happen anywhere. Persistent heavy odors suggest spaces in toileting or housekeeping routines.

Listen to how staff address locals, specifically when things fail. A mild, specific timely, "Hi Mary, it is nearly lunch break, can I walk with you to the dining-room?" beats a generic, "It is time to eat," or worse, "You have to go now." In a memory care home, also see shifts, such as moving from activity to lunch. Smooth shifts mean great planning.

Peek at the published staff assignment sheet if you can. Are the same caretakers coupled with the same residents most days? Consistency reduces stress and anxiety, especially for dementia care.

Ask to see a room that is presently inhabited and consent is granted. Design rooms are staged. Lived-in areas reveal real storage, bathroom layouts, and whether grab bars match where people really reach.

Safety, falls, and real-world mitigation

Both settings ought to have a clear falls program. Request concrete examples, not slogans. If a resident fell two times near the restroom, did they add a motion sensing unit nightlight, move the bed, evaluation diuretics, and trial arranged toileting? In memory care, ask how they deal with locals who stand quickly and forget walkers. Some neighborhoods place walkers at the bed foot with a brilliant strap, others train staff to hint before locals rise.

If your loved one wanders, ask what occurs when an exit alarm sounds. Who reacts first, what is their average response time, and how do they debrief afterward? A neighborhood that can name action steps without aiming to the sales sheet probably drills regularly.

Medical oversight without medical overreach

Senior living is not a hospital, however health care runs through it. Clarify the nurse existence. Is there a RN on website daily, an LPN on evenings, or only a nurse on call in the evening? Ask who manages medication modifications from the medical care physician or neurologist. If the structure partners with visiting providers, you can select to utilize them or keep your own. Either way, ask how orders circulation, who reconciles them, and how quickly changes are implemented.

For memory care in specific, ask how they manage antipsychotics and sedatives. You want to hear that non-drug interventions precede, that any brand-new medication starts with the most affordable effective dose, which there is a plan to reassess and taper if appropriate. A neighborhood that over-sedates may seem calm on tour, but the peaceful comes at a cost.



Costs, agreements, and the unglamorous details

Price structures vary. Some memory care homes bundle services into a single rate since almost everyone needs similar supports. Others use a level-of-care model that includes charges as needs increase. Assisted living more frequently utilizes levels or points, which can alter after move-in. Ask how frequently evaluations occur and how much notice you get before a price increase.

Ask about what is included. Caregiver support, nursing oversight, meals, housekeeping, linens, transport, and activities prevail additions. Medication management, incontinence items, escorts to meals, and specialized

treatments might cost extra. If your loved one may require one-to-one assistance during the day or night, get a composed per hour rate and typical usage examples.

Clarify move-out and deposit policies. If your mother transfers to rehabilitation for 2 months, will they hold her apartment or condo and at what expense? In a memory care home, ask the length of time they will hold a space during hospitalization and whether there is a minimized rate while the space is vacant.

Finally, be truthful with yourself about monetary runway. Dementia care, whether in a memory care home or assisted living with added supports, is pricey. I often counsel families to run a two-year and a five-year forecast based on current rates plus a practical annual boost, commonly in the 3 to 7 percent variety, then add a cushion for a higher care level.

Family involvement and interaction culture

Communities that welcome family input tend to capture issues early. Ask if there are routine care conferences and whether you can ask for an advertisement hoc meeting after any major modification. Clarify how frequently you will get updates, and in what format. Some memory care programs send brief weekly notes with highlights and any issues. Others rely on a portal. A telephone call still matters when appetite drops rapidly or your father starts pacing at night.

Observe household visits as you tour. Exist places to sit privately, not simply in the main lobby? In a memory care home, ask how they support visits when your loved one becomes overstimulated. Some will use a small quiet lounge or recommend the best times of day based on your loved one's rhythm.

When needs modification: aging in location vs planned transitions

Dementia is progressive, and other health issues layer on. A strong plan acknowledges modification upfront. Ask where the community struggles to fulfill needs. Two-person transfers, continuous oxygen, or behavior that threatens security prevail pressure points. In assisted living, ask whether hospice can be generated and whether residents can remain in place through end of life. In memory care, lots of neighborhoods coordinate hospice effortlessly so citizens do not face a disruptive move.

If you are favoring assisted living now however anticipate to require a memory care home later, ask whether the structure has an associated memory care program and how transfers are managed. An internal transfer typically allows you to keep the exact same doctor and drug store, and personnel may already understand your loved one, which eases the transition.

Red flags and green lights

Keep these quick tells in mind as you stroll and talk.

- Vague responses about staffing, training, or escalation strategies indicate disorganization.
- Strong eye contact between personnel and residents, with names used naturally, signals good relationships.
- Frequent high-pitched door alarms, citizens gathered listlessly near exits, or staff who prevent engagement suggest stress points.
- Transparent conversation of recent obstacles, such as a flu outbreak or a resident with escalating habits, reveals maturity.
- A resident council or household council that satisfies regularly shows a culture open up to feedback.

Edge cases most households do not inquire about, but should

If your loved one has an unusual dementia, such as Lewy body illness or frontotemporal dementia, ask about particular experience. The behaviors, medication level of sensitivities, and visual hallucinations can differ from common Alzheimer's. Ask for examples of how they adjusted take care of someone with comparable symptoms.

If your partner is in early-stage dementia and highly social, ask how they avoid seclusion in a memory care home where peers may be even more along. Some communities run bridge programs, little groups focused on conversation and trips that feed the need for autonomy while still supplying supervision.

If your parent is an introvert who decreases activities, ask how engagement is determined and individualized. A peaceful morning arranging images or sitting in the garden may be more significant than bingo, however it still requires personnel time and intention.

Cultural fit matters too. Ask how the group supports language choices, spiritual care, or diet plan customs. Observe holiday designs and events. Communities that can articulate how they satisfy varied needs usually show it in small day-to-day touches.

After the tour: how to debrief and decide

Decisions seldom hinge on one amazing function. They originate from a pattern of fit. Debrief while impressions are fresh. Jot down two sentences about how the location felt, not just facts. Note the names of staff who impressed you and why. If possible, visit once again unannounced, ideally at a different time of day. Go back through your non-negotiables and see which neighborhood finest matches them today, not the idealized variation on paper.

As you narrow options, think about a short respite stay, one to 2 weeks, if the community provides it. Respite offers you a window into life beyond the tour and lets the team test and fine-tune the care plan. For dementia care, a short trial can surface how your loved one reacts to the environment. You will learn more from two breakfasts and one tough evening than from a stellar brochure.

The right questions do not ensure a perfect outcome, but they emerge the heart of a program. In a memory care home, you are trying to find a team that comprehends dementia as a whole-person condition and constructs the day around that fact. In assisted living, you desire flexible assistance that boosts independence without ignoring the early indications that more assistance is on the horizon. Ask particularly, listen carefully, and view how the responses live in the hallways.

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 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
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BeeHive Homes of Crownridge Assisted Living has Google Maps listing <https://maps.app.goo.gl/YBAZ5KBQHmGznG5E6>
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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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BeeHive Homes of Crownridge Assisted Living & Memory Care has a website

<https://beehivehomes.com/locations/san-antonio/>

BeeHive Homes of Crownridge Assisted Living & Memory Care has Google Maps listing

<https://maps.app.goo.gl/YBAZ5KBQHmGznG5E6>

BeeHive Homes of Crownridge Assisted Living & Memory Care has Facebook page

<https://www.facebook.com/sweethoneybees>

BeeHive Homes of Crownridge Assisted Living & Memory Care has Instagram

<https://www.instagram.com/sweethoneybees19>

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

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?

You can contact BeeHive Homes of Crownridge Assisted Living & Memory Care by phone at: [\(210\) 874-5996](tel:2108745996), visit their website at <https://beehivehomes.com/locations/san-antonio/>, or connect on social media via [Facebook](#) or [Instagram](#)

BeeHive Homes of Crownridge Assisted Living & Memory Care is just a short drive away from The Shops at La Cantera a major shopping & dining center in the area. Offering convenient shopping and dining options ideal for senior care families looking for easy-access retail and respite care outings. [San Antonio Texas](#).