

Business Name: BeeHive Homes of Floydada TX
Address: 1230 S Ralls Hwy, Floydada, TX 79235
Phone: (806) 452-5883

BeeHive Homes of Floydada TX

Beehive Homes 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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1230 S Ralls Hwy, Floydada, TX 79235

Business Hours

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

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Couples who have actually shared a life together often desire something most as they age: to keep sharing it. That dream can bump up versus a labyrinth of care needs, finances, and housing choices that don't constantly relocate sync. One partner may still be driving and gardening while the other is forgetting medications or requires aid with dressing. Health declines seldom happen at the same speed. And yet, the pull to stay under the very same roofing system, to get up to the same familiar face, is powerful.

I've sat at kitchen area tables where spouses speak over each other trying to safeguard one another, and I have actually walked communities with daughters who bring a peaceful regret that they can't make all the care fit inside one condominium. The bright side is that senior living has more flexible designs than it did even a decade back. The technique is matching care levels, layout, and expenses to the particular shape of your lives, then staying active as needs change.

What staying together actually means

"Together" looks different for various couples. For some, it means the same house and meals at a shared table. For others, it's surrounding suites with a connecting door. Often it suggests one spouse in memory care and the other a brief walk away in an assisted living studio, with early mornings invested together and afternoons apart. There's no single right configuration.

The discussion ends up being practical when you define routines. Who manages medications? Who cooks and cleans? What movement concerns exist today, and what will alter if there is a fall, a hospitalization, or a new diagnosis? Couples often ignore the cumulative weight of small tasks. A partner who says "I can help him shower" does not constantly see the day when transfers require two team member, or when agitation makes bathing a 45-minute battle. Planning for those minutes maintains togetherness in a manner rejection cannot.

The landscape of senior living for couples

The vocabulary alone can feel like a barrier. Independent living, assisted living, memory care, continuing care, respite care. Each design opens specific doors for couples and closes others. A fast map helps.

Independent living prefers the active older adult, often 70-plus, who desires a social environment and maintenance-free living. It's not accredited for hands-on aid, and that difference matters. You can add home care on top of it, however there's a ceiling to how much hands-on assistance an independent living building is comfy with in its halls.

Assisted living bridges the gap: private apartment or condos with aid offered for bathing, dressing, medication management, and meals. It's created for individuals who need some daily assistance but not the proficient, day-and-night care of a nursing home. For couples, assisted living can be a sweet area due to the fact that it allows various levels of assistance to be delivered in the very same unit, in some cases at different charge tiers.

Memory care provides a safe, specialized environment for people dealing with dementia. The staff training, programs, and structure design are tailored to cognitive changes. Historically, couples were divided if only one partner had dementia. Today, more communities allow a cognitively healthy spouse to reside in the memory neighborhood with their partner, or to reside in assisted living with day-to-day "companion access" into memory care. The policies vary by operator and state policy, so you need to ask precise questions.

Continuing care retirement communities, typically called life strategy neighborhoods, offer a campus with several levels of care: independent living, assisted living, memory care, and knowledgeable nursing. Couples can begin in independent living and transition to greater levels without leaving the very same campus. The entryway fees are considerable, however the connection and distance are strong advantages for remaining close even as health requires diverge.

Respite care is short-term. Consider it as a trial stay or a bridge during healing from surgical treatment or caretaker burnout. For couples, respite can be a test drive of assisted living or memory care, or a way to cover a space if one spouse is hospitalized and the other can not safely live alone.

Assisted living for two under one roof

Assisted living neighborhoods regularly host couples in one-bedroom, one-bedroom-plus-den, or two-bedroom homes. They price look after each resident individually, which is very important. The month-to-month base rate is normally connected to the apartment, then everyone is evaluated for a care level. If one partner requires help with medication and bathing while the other only requirements meal service, the regular monthly charges show that difference.

Care levels are identified by assessments, not by settlement. Anticipate a nurse to ask about transfers, continence, ambulation, cognition, and habits like roaming or exit looking for. Couples in some cases disagree in front of the nurse. I've watched an other half insist he "just needs light pointers" while his wife whispers that she found tablets in his pocket yesterday. The assessment ought to reconcile both viewpoints and what staff observe during a tour or trial meal.

The daily rhythm matters. Can staff deliver care at times that suit both individuals? For instance, some couples choose to bathe together with staff nearby for security. Others desire personal assistance while the partner is at an activity or meal. Good neighborhoods change schedules to protect dignity and familiarity. If you hear "we'll swing by sometime in the morning," ask for specifics. Uncertainty around timing is a warning for couples who are trying to keep shared routines.

Another useful layer is food. Couples who have actually consumed together for 50 years often slim down in the very first month of a move if meals land at odd times or if the dining-room feels overwhelming. Ask if space service for breakfast or scheduled two-top tables are possible while you both adjust. A small lodging like a regular corner table can make a big difference.

When dementia goes into the picture

Dementia alters the decision tree, not just because of security however intimacy and functions shift. I keep in mind a couple where the spouse, a devoted reader, had received a moderate Alzheimer's diagnosis. She still acknowledged her other half and took part in conversation, but she was not taking medications reliably and had gotten lost on a walk. The hubby feared memory care would "lock her away." We explored a memory area with bright common areas, little group activities, and protected garden gain access to. What altered his mind was seeing couples sitting together at a craft table, one partner knitting while the other sorted buttons with staff carefully orienting. He realized the area was created for engagement, not confinement.

Some memory care neighborhoods will enable a non-memory-impaired partner to live there full time. The benefit is nearness and the ability to share a private suite. The downside is that the healthy partner copes with restrictions like secured doors, a smaller campus, and various social programming. Other neighborhoods keep a policy that non-memory care residents must reside in assisted living, but they'll help with comprehensive visiting. In practice, this can work well if the buildings are adjacent and personnel understand the couple. It requires more walking and more planning, however you preserve the healthy spouse's independence.

Finances matter in this conversation. Memory care costs more than assisted living, often by 15 to 30 percent, due to the fact that staffing ratios are higher. If one spouse lives in memory care and the other in assisted living, you normally pay 2 housing costs plus 2 care packages. If both live together in a memory care suite, you spend for the suite plus two care assessments at memory care rates. It sounds stark, but this is where numbers help you select a sustainable plan.

The campus benefit: life strategy communities

Continuing care retirement home are constructed for situations where care requires change unevenly. Couples who relocate during their healthier years frequently get the amount later on. If one spouse needs rehabilitation or proficient nursing after a stroke, the other can walk over daily, then return to their house. If dementia progresses, a transfer to memory care takes place within the exact same school, which maintains staff familiarity and decreases the disturbance of a relocation across town.

Entrance costs at these neighborhoods vary extensively, from approximately \$100,000 to \$1 million depending upon area, size, and agreement type. Some provide partly refundable agreements, others amortize the entrance fee over a set period. Month-to-month charges continue regardless. Look closely at how agreement types handle a couple where one person transfer to a greater level of care. In some agreements, the 2nd home is marked down or consisted of; in others, it's billed at market rate.

Beyond the dollars, the campus matters physically. Are the structures linked by indoor corridors? If your partner transfers to memory care in January, will you need to cross a car park with ice? Is there a personal path in between buildings with benches for a rest? The more smooth the location, the most likely couples will keep everyday practices together.

Respite care as a pressure valve and test drive

Respite stays tend to be underused. They can be practical when:

- A caretaker partner requires a medical treatment or a week to recuperate from illness without stressing over falls or roaming at home.
- You wish to test whether assisted living or memory care matches your regimens before dedicating to a complete move.

Respite is generally furnished, billed at a day-to-day or weekly rate, and consists of meals and activities. Stays often run 2 to 6 weeks. For couples, a double respite can reduce worry. I have actually seen a pair settle in for 3 weeks, find that breakfast in the dining room was a satisfaction, and after that make a long-term relocation with far less stress because the faces and spaces recognized. It can also clarify if one partner does better in a memory neighborhood while the other grows in the bigger assisted living setting.

Private caretakers inside senior living

Hiring personal caregivers on top of senior living prevails when care requires surpass what the neighborhood can supply or when couples want additional consistency. A home care aide can get here in the morning to help both spouses prepare yourself, accompany one to memory care activities, then bring them back for lunch with the other partner. The mechanics are not always apparent. You need to inspect:

- Whether the neighborhood permits outside caregivers and if there is a vendor list or an approval process.

Some structures limit personal care within memory take care of security and liability factors, or they need that outdoors caregivers sign in, wear badges, and follow infection control policies. Build these guidelines into your daily plan so you're not surprised when a cherished aide is turned away at the door.



The cash discussion you can not skip

Couples bring two budget plans that share one wallet. Assisted living can vary from approximately \$3,500 to \$7,000 each month for a one-bedroom, depending on region, with care levels adding \$500 to \$2,500 per person. Memory care typically runs in between \$5,000 and \$10,000 monthly. Two apartments on one campus might cost less in total than a single big system plus a high care plan, or vice versa. You require actual quotes, not guesses.

Insurance seldom acts the way individuals anticipate. Long-term care insurance policies may pay per person as much as a day-to-day maximum, but they often require that each person fulfill advantage triggers like requiring aid with two activities of daily living or having cognitive impairment. If just one partner qualifies, just one benefit pays. Veterans' Aid and Attendance can balance out expenses for qualified wartime veterans and partners, but processing times can stretch for months. Medicaid rules are complex for couples. A neighborhood spouse can typically keep a particular amount of earnings and properties, while the spouse in long-lasting care receives assistance. The specific numbers are state-specific and modification periodically. Involve an elder law lawyer before properties are re-titled or invested down in a rush.

Track the smaller recurring costs. Medication management can be a flat cost or charged per pass. Continence materials might be billed through the community at a markup unless you provide them yourself. Transportation to outside consultations, cable television packages, salon sees, and visitor meals build up. When you're paying for 2 people, those extras can shift a budget plan by hundreds each month.

Emotional truths and how to navigate them

Keeping partners together is not only a logistical battle. It is a psychological one. The healthier spouse often ends up being the historian, advocate, and in some cases the lightning rod for frustration. Guilt runs high up on moving day. One gentleman told me, "I assured I 'd keep her in your home," then stopped briefly and added, "but home is where we can live, not where we utilized to." That insight assisted him accept that a protected memory space where his other half smiled at music and felt calm might still be home.

If you relocate to a community where just one spouse requires care, beware of the undetectable caregiver trap. Healthy partners often assume they ought to do whatever given that "we live here now, and personnel are busy." That frame of mind beats the point of senior living. Agree, on paper, what care staff will manage and what you will continue to do since it brings delight or intimacy. Let personnel take the showers if those have become tense, and keep the night hand massage that just you can give.



Lean on the structure's social material. Couples can sign up with different activities at the same time and reunite for coffee. A spouse who has actually been connected to caregiving might uncover a book club or a woodworking bench. That isn't desertion. It's a necessary go back to self that normally leaves both partners more satisfied.

Choosing a community with couples in mind

Touring as a couple is various. Watch how personnel talk to both of you. Do they make eye contact with the spouse who has a hard time to speak and wait patiently? Do they invite the healthier partner to step aside for a private concern without being purchasing from? A community that appreciates both individuals in small moments will likely support you better later.

Look for apartment or condos with practical designs. A single big bathroom off the bedroom can be a problem if someone naps and the other needs the bathroom or a shower. Split bathrooms or a half bath near the living-room add flexibility. Zero-threshold showers, get bars, and area for 2 in the bathroom matter more than granite countertops.

Ask about transfers in between levels of care. If you begin in assisted living and dementia worsens, what takes place if you want to remain together? Is there a recognized path? Does the neighborhood have companion suites in memory care? Exist homes instantly adjacent to the memory care area for the partner who remains in assisted living? Specific responses beat unclear assurances.

Activity calendars can mislead. A long list of occasions is less valuable than a few well-run, repeatable programs that match both of you. If one takes pleasure in hymn sings and the other likes existing events discussions, do both exist, preferably not at the very same time every day? Can you consume in the memory care dining room as a guest without a cost? These information breathe life into the promise of togetherness.

When staying in the very same home is not the best choice

Sometimes, residing in separate however close-by areas secures love. This tends to be real when:

- The person with dementia becomes distressed or upset by shared space, especially at night.
- Intense care requirements, like two-person transfers or frequent cueing, turn the apartment or condo into an office more than a home.

A partner once told me, after months of attempting to keep his wife with innovative dementia in their assisted living house, "Our days ended up being a series of jobs. Moving her to memory care offered us our afternoons back." He went to two times a day, both of them smiled more, and he started to attend the guys's coffee group once again. Proximity protected the essence of their bond much better than requiring a joint house to bring weight it could no longer bear.

It helps to frame this choice as a shift in address, not a rupture in relationship. Develop rituals: the 10 a.m. walk, the 3 p.m. tea, the nighttime goodnight blessing. A predictable cadence softens the strangeness and provides personnel anchors to structure care around your shared life.

Safety, dignity, and intimacy

Senior living personnel stroll a tightrope when it pertains to couples' intimacy. Great groups respect personal privacy and knock before getting in, schedule care around couples' preferred times, and deal gentle guidance when intimacy ends up being confusing since of dementia. On your end, clarity helps. Share your preferences with the nurse and the executive director. If there are do-not-disturb times, say so. If roaming or disrobing has taken place at night, personnel requirement to know to stabilize privacy with safety.

Dignity displays in little things. Matching pajamas, the preferred lotion, framed images from turning points. Bring those aspects. A relocation can seem like loss unless you restore the visual language of your life in the new area. When staff see the wedding photo and the hiking photo on the mantel, they're most likely to address you as a duo with a history, not just 2 names on a care roster.

Planning forward, not just reacting

The single best move couples can make is to plan before a crisis. Touring when you have time to believe permits you to compare layout, ask tough questions, and let your gut weigh in. If you wait for the health center discharge planner to call, you will be choosing under pressure, and availability will determine your alternatives more than fit.

Build a "what if" map. If dementia advances to roaming, which communities nearby have protected yards you actually like? If the much healthier partner stops driving, how will you reach your faith community or preferred park? If properties change due to the fact that of market swings, which contract design is most resistant? These are not morbid musings. They keep you in control.



Finally, tell your adult kids what you are thinking about and why. It minimizes the opportunity they will attempt to undo your options out of worry later on. I have seen households fractured by presumptions that might have been avoided with one truthful discussion over dinner.

A practical path forward

Here is a basic sequence that has actually worked well for lots of couples:

- Get both partners evaluated by a neutral expert, like a geriatric care manager or the community's nurse, to understand current care needs and likely changes over the next year.
- Tour 3 neighborhoods with different models: one assisted living that is couples-friendly, one memory care with a pathway for couples, and one life strategy community if financial resources allow.

Follow each tour with a short debrief at a peaceful coffee bar. What felt right? What felt off? Did you feel seen as a couple?

Ask each community for a written breakdown of expenses, consisting of base lease, care levels for each partner, and common add-ons. Project the numbers for 24 months under a minimum of 2 scenarios, such as if one partner's care level boosts by a tier or if a different memory care suite is required. Numbers clear the fog.

Schedule a respite stay, even for a week, in your leading choice. It is much easier to change where you currently breathed out once.

Holding the center

The thread through all of this is the relationship. The reason to speak candidly about cash, and to ask hard concerns is not to win some video game of long-lasting care. It is to guard the everyday fabric that makes a shared life worth living. A walk around the yard after breakfast. A gentle argument over the crossword. A capture of the hand when names slip however love does not.

Senior living, at its best, provides couples a scaffold where they [senior care](#) can keep being themselves while accepting the help they now require. Whether that indicates a sunlit one-bedroom in assisted living, a protected memory suite with a connecting door, or two houses on a campus with a warm dining-room in the middle, the right option will seem like an extension of your life, not a replacement for it.

Staying together is less about a single address and more about securing a pattern of connection. With clear eyes, excellent concerns, and a determination to adjust, couples can bring that pattern forward, even as the shapes of care shift beneath their feet.

BeeHive Homes of Floydada TX provides assisted living care
BeeHive Homes of Floydada TX provides memory care services
BeeHive Homes of Floydada TX provides respite care services
BeeHive Homes of Floydada TX supports assistance with bathing and grooming
BeeHive Homes of Floydada TX offers private bedrooms with private bathrooms
BeeHive Homes of Floydada TX provides medication monitoring and documentation
BeeHive Homes of Floydada TX serves dietitian-approved meals
BeeHive Homes of Floydada TX provides housekeeping services
BeeHive Homes of Floydada TX provides laundry services
BeeHive Homes of Floydada TX offers community dining and social engagement activities
BeeHive Homes of Floydada TX features life enrichment activities
BeeHive Homes of Floydada TX supports personal care assistance during meals and daily routines
BeeHive Homes of Floydada TX promotes frequent physical and mental exercise opportunities
BeeHive Homes of Floydada TX provides a home-like residential environment
BeeHive Homes of Floydada TX creates customized care plans as residents' needs change
BeeHive Homes of Floydada TX assesses individual resident care needs
BeeHive Homes of Floydada TX accepts private pay and long-term care insurance
BeeHive Homes of Floydada TX assists qualified veterans with Aid and Attendance benefits
BeeHive Homes of Floydada TX encourages meaningful resident-to-staff relationships
BeeHive Homes of Floydada TX delivers compassionate, attentive senior care focused on dignity and comfort
BeeHive Homes of Floydada TX has a phone number of (806) 452-5883
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BeeHive Homes of Floydada TX has a website <https://beehivehomes.com/locations/floydada/>
BeeHive Homes of Floydada TX has Google Maps listing <https://maps.app.goo.gl/VQckTu3ewiBFL32A7>
BeeHive Homes of Floydada TX has Facebook page <https://www.facebook.com/BeeHiveHomesFloydada>
BeeHive Homes of Floydada TX has an Youtube page <https://www.youtube.com/@WelcomeHomeBeeHiveHomes>
BeeHive Homes of Floydada TX won Top Assisted Living Homes 2025
BeeHive Homes of Floydada TX earned Best Customer Service Award 2024
BeeHive Homes of Floydada TX placed 1st for Senior Living Communities 2025

People Also Ask about BeeHive Homes of Floydada TX

What is BeeHive Homes of Floydada TX 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 Floydada TX located?

BeeHive Homes of Floydada TX is conveniently located at 1230 S Ralls Hwy, Floydada, TX 79235. You can easily find directions on [Google Maps](#) or call at [\(806\) 452-5883](tel:(806)452-5883) Monday through Sunday 9:00am to 5:00pm

How can I contact BeeHive Homes of Floydada TX?

You can contact BeeHive Homes of Floydada TX by phone at: [\(806\) 452-5883](tel:(806)452-5883), visit their website at <https://beehivehomes.com/locations/floydada/>, or connect on social media via [Facebook](#) or [Youtube](#)

[Caprock Canyons State Park & Trailway](#) offers dramatic views and accessible overlooks that can be enjoyed as a planned assisted living or senior care enrichment trip during respite care.