

Business Name: BeeHive Homes of Great Falls

Address: 2320 15th Ave S, Great Falls, MT 59405

Phone: (406) 205-4516

BeeHive Homes of Great Falls

At BeeHive Homes of Great Falls in Great Falls, MT, we offer assisted living, respite care, and memory care for people with dementia. Our residents enjoy living in a cozy place with knowledgeable and caring staff. We aim to meet each person's changing care needs and keep residents as independent as possible. We also plan events and senior living activities based on their interests and skills. Contact us immediately to learn more about how we can help your senior today!

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2320 15th Ave S, Great Falls, MT 59405

Business Hours

- Monday thru Sunday: Open 24 hours

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The decision to move a parent into assisted living is hardly ever basic. Households tend to come to it after a fall, a medical facility stay, growing caregiver burnout, or a creeping sense that something is no longer safe in the house. By the time the conversation begins, feelings are currently high.



What frequently gets lost in the seriousness is the individual at the center of all of it. Your parent is not a job to be handled. They are the one whose life will change the most, and their experience of the procedure will form how well they adjust.

Involving your parent thoughtfully is not simply kind. It is practical. People who feel heard and appreciated tend to adapt much better, remain engaged longer, and accept help more voluntarily. I have seen the opposite too: families that make every decision for their parent, hurry the relocation, then spend months attempting to fix the damage to trust.

This guide focuses on how to bring your parent into the procedure in such a way that secures their self-respect while still attending to genuine safety and care needs.

Why your parent's involvement matters

When older adults feel removed of control, you typically see more resistance, depression, or withdrawal. I have seen capable parents end up being all of a sudden "tough" when every choice is made around them rather of with them. The habits is generally a demonstration, not a character change.

There are numerous concrete factors to include them:

They understand their own concerns more clearly than anyone else. You might concentrate on medical support and fall prevention. They may care more about being near buddies, having space for their piano, or being able to being in a garden every day. A "perfect" assisted living house that ignores those priorities can still feel like a prison.

They notice fit and chemistry that families miss. Staff can look exceptional on paper and sound reassuring on tours. Your parent is the one who must live there. I have actually seen elders pick up quickly on whether citizens appear genuinely engaged or just parked in front of a television. Their instinct about whether a place feels warm or transactional should have weight.

They are most likely to accept care afterward. When somebody participates in the search, picks their space, and meets staff ahead of time, the relocation feels less like exile and more like a prepared transition. That alone can soften the emotional landing.



Finally, involving your parent is basically about regard. Even when cognitive decline is present, there are frequently meaningful ways to welcome choices within safe limits. You are not only picking a senior care setting,

you are modeling how your household treats vulnerability.

Starting before you "have" to

The most reliable relocations into assisted living usually began as conversations years previously, not frenzied decisions after a crisis.

Ideally, you raise the topic while your parent is still fairly independent. You might say, "If there comes a time when home is not the best option, what type of places would you consider? What would matter most to you?" The objective is not to persuade them to move immediately, but to plant the idea that this is a shared project and that they have a voice.

When households delay the conversation up until after a fall or hospital stay, 2 problems appear simultaneously. Emotions run hot, and choices narrow. Rehabilitation timelines, discharge pressures, and insurance coverage limitations may press you to choose rapidly. Under that tension, it is easy to default to "we just have to decide for them."

If you are currently in crisis, you can not relax time, however you can still slow the psychological temperature level. Acknowledge aloud that the scenario is immediate, yet you still desire them involved. Even easy gestures, like sitting together with a printed list of nearby neighborhoods and circling around a few they would be willing to visit, can bring back some sense of control.

Naming the emotions in the room

I have seldom satisfied an older adult who is neutral about moving into assisted living. Common feelings consist of fear, sorrow, embarrassment, anger, and in some cases relief that someone lastly discovered how tough things have become.

Adult kids bring their own load: regret, anxiety, animosity from years of caregiving, or unresolved household history. If no one names these feelings, they leak into the procedure as fights over details.

You do not need a family therapist to address this, though one can definitely assist. What you do require are a couple of truthful statements that make it more secure for your parent to speak.

You may state:

"I feel torn. I want you safe, but I likewise do not want you to feel pushed. Can we speak about both parts?"

Or, "I envision this may feel like losing your self-reliance. What worries you [senior care](#) most about that?"

You are not assuring to fix every sensation. You are indicating that their emotions are valid, not obstacles to steamroll.

Avoid framing assisted living as punishment or as evidence that they "can't manage." Instead, talk in terms of changing needs, energy, and security. Lots of older adults can accept that bodies and stamina change gradually. They bristle at the concept that they are being treated like children.

Clarifying needs before you visit any community

One common mistake is touring communities without a clear sense of what your parent in fact requires, both clinically and emotionally. You end up impressed by the chandelier in the lobby and forget to ask whether anybody will assist your dad to the bathroom at night.

Before you book tours, sit with your parent and sketch 3 overlapping images: day-to-day function, health and wellness, and quality of life.

Daily function includes concrete tasks such as bathing, dressing, toileting, meal preparation, movement, and medication management. Where do they reliably handle alone, and where do they battle or avoid?

Health and security includes medical diagnoses, fall history, wandering threat, incontinence, pain problems, and cognitive status. A cardiology patient who tires quickly has different needs from somebody with Parkinson's disease or early dementia.

Quality of life is often the most disregarded. Ask what they enjoy now. Reading. Church. Card video games. Enjoying birds. Chatting in the hallway. Going out to lunch. Likewise ask what they miss doing but could possibly resume with more assistance. A good assisted living community can support physical security and still starve the soul if it does not line up with their interests.

Raise respite care options too. For lots of households, scheduling a brief stay in assisted living as respite care can be a low threat method to "check out" a neighborhood. Your parent might agree quicker to "a month while I recover from this surgery" than to an irreversible relocation. That experience can decrease worry and help them make a more educated long term choice.

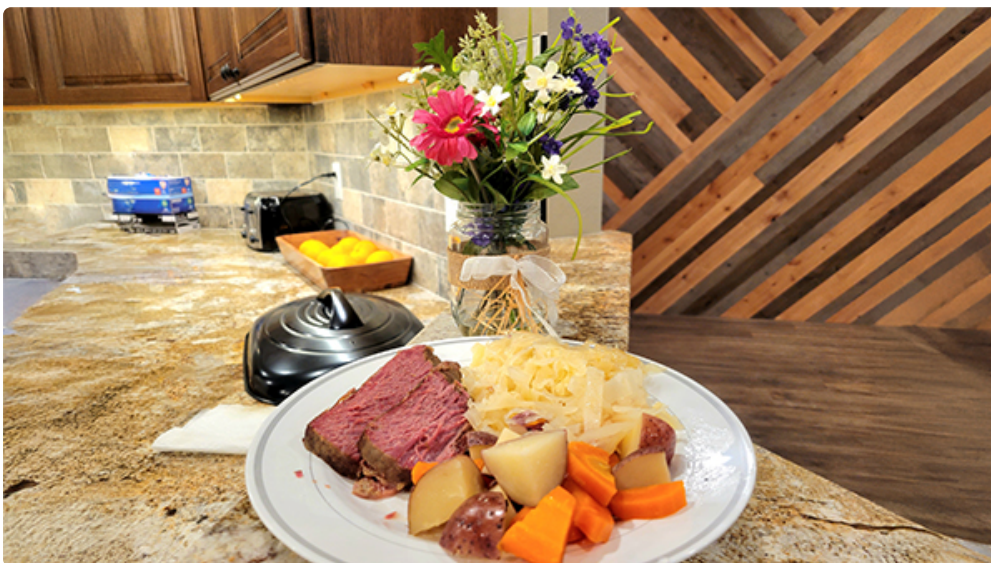
Choosing language that safeguards dignity

Words shape how your parent experiences this shift. I have seen resistance soften merely from altering a few phrases.

Comparing 2 approaches reveals the difference:

"We can't leave you alone any longer, it isn't safe" frequently lands as criticism, indicating incompetence.

"We are worried about you being on your own if something takes place, and we desire a plan that keeps you safe without you feeling trapped" acknowledges issue without eliminating their agency.



Avoid language that frames assisted living as "a home" in opposition to their present home. Lots of citizens choose to consider it as "my apartment or condo" or "my place" within a senior care neighborhood. Ask your parent what words feel acceptable to them and try to stick with those.

When talking about alternatives, expression it as a joint search. "Let's take a look at a couple of locations and see if any feel best to you" is very different from "We have discovered a place for you."

Planning visits together

Tours are where numerous older grownups either begin to accept the idea, or closed down totally. How you involve them here matters.

Before you start visiting, settle on the function your parent wants to play. Some enjoy to stroll through every building, ask concerns, and compare notes. Others feel quickly overwhelmed and choose shorter visits, or to see only a number of leading contenders.

A short shared checklist can make visits feel more structured rather than like aimless wanderings through glossy halls.

List 1: Simple things to try to find on each visit

1. Do homeowners appear engaged, or mainly sitting alone or in front of a screen?
2. Are staff connecting with homeowners by name and with patience?
3. Are corridors, restrooms, and typical locations tidy but also resided in, not just staged?
4. Can your parent picture themselves in fact hanging around in the shared spaces?
5. How does your parent feel leaving the structure: lighter, heavier, or indifferent?

Encourage your parent to talk about feelings as much as facts. I have actually had residents say things like, "Individuals appeared nice but it seemed like a hotel, not my life," or, "It was smaller, and that made me feel less lost."

After each visit, debrief while it is fresh. Have your parent rank the place informally: "never ever," "possibly," or "I might see this." Regard the "never" unless there is an extremely strong security or monetary factor not to. Overriding a clear "never ever" communicates that their impressions are disposable.

Understanding levels of care and what they mean for autonomy

Assisted living, memory care, proficient nursing, and independent living often get tossed around interchangeably in casual conversation, but they stand out layers within the senior care spectrum.

For many older grownups, assisted living occupies a middle ground. It uses assist with everyday activities, meals, 24 hr personnel, and typically medication support, without the more medicalized setting of a nursing home. Within assisted living itself, there is typically a series of support, from light support to almost full hands on care.

Discuss with your parent how much aid they want to accept, both now and as needs modification. Some prefer a place that can increase care levels with time so they do not need to move once again. Others focus on smaller, more homelike settings, even if that implies a future move if health changes.

Respite care ends up being essential here too. Short term remains in a neighborhood that likewise uses permanent assisted living can function as a bridge after a hospitalization, or as a test of whether the environment fits their design. Your parent's reaction to a respite stay is important data: did they feel lonely, supported, tired, or pleasantly relieved?

Inviting your parent into the practical questions

Families often assume they should deal with the "hard" details such as contracts, costs, and care plans privately. While monetary specifics might not constantly be suitable to talk about in depth, there are lots of practical decisions where your parent's voice is crucial.

Tour personnel will describe care plans, medication policies, going to hours, transportation, and meal strategies. Instead of quietly soaking up the details, turn to your parent and ask, "How would that work for you?" or "Does that schedule fit how you like to live?"

Ask what trade offs they want to make. A neighborhood better to household might have less features. One with a sensational health club may have less faith based services or weaker transport options. Some seniors would gladly give up a movie theater for a stronger rehabilitation program or better food. Others are willing to commute farther for the right social environment.

Involving them in these trade offs strengthens that this is their life, not just your logistical challenge.

Watching for warnings together

A shiny brochure can hide a lot. Inviting your parent to observe red flags teaches them to advocate on their own, even after you have actually gone home.

List 2: Warning your parent and you can enjoy for

1. Staff who rush, prevent eye contact, or seem inflamed by residents' questions.
2. Residents who look regularly unkempt, not just casually dressed.
3. Strong smells of urine or heavy cleaning chemicals in many areas.
4. Activities published on a calendar however not in fact occurring when you visit.
5. Defensive or unclear answers when you ask about staff turnover, training, or occurrence response.

Encourage your parent to ask at least one concern on every tour. It might be easy, such as, "What is breakfast like here?" or "Can I bring my own chair?" The method staff respond to their concerns is often more telling than the material of the answer.

If your parent utilizes a walker or wheelchair, notice how spaces feel for them in real use, not just in theory. View their body language. Do they seem tense on ramps, puzzled by design, hesitant in crowded hallways?

When your parent states "I am not all set"

Resistance to assisted living typically sounds like stubbornness but is typically layered.

Sometimes, "I am not all set" means "I hesitate I will be forgotten as soon as I move." Other times it suggests "I do not see myself as that old yet" or "I do not want to spend money on myself."

Ask open, curiosity based questions. "What would need to be true for this to seem like the correct time, or a minimum of not the wrong one?" or "What worries you most about moving? What concerns you most about remaining?"

Share your own observations without exaggeration. "In the previous six months, you have actually fallen twice and wound up in the emergency room. That makes me scared. I wish to discover a way for you to feel more secure without losing what matters to you."

There will be cases where health and wellness requirements are so urgent that waiting is not a choice. When that occurs, stay sincere. "If it were only about choice, I would desire you to choose entirely on your own schedule. Today the health center is telling us that going home alone would be hazardous, so we require to discover something that works, and I desire as much of your input as we can collect."

That difference in between choice and security aspects their autonomy while being clear about reality.

When cognitive decline makes complex choice

If your parent has significant dementia, meaningful participation looks various, but it is not absent.

People with moderate dementia may not comprehend contracts or long term financial implications, however they can often still suggest convenience or discomfort, like or dislike, and immediate preferences. In those cases, households can narrow options ahead of time utilizing unbiased requirements, then include the parent in choosing amongst a couple of that all fulfill safety and care needs.

Focus their involvement on what impacts day-to-day experience: room layout, familiar furnishings, which quilt comes, whether the window deals with trees or a parking area, whether they choose a quieter corridor or a busier one.

Use validation instead of argument when they reveal worry or confusion. If they state, "I wish to go home," and home is no longer safe, you do not need to oppose the sensation to preserve the decision. You can say, "You miss your home. You invested lots of great years there. Let us make this room feel as much like you as we can."

Check whether the neighborhood has strong memory care assistance, experienced staff, and flexible routines. An individual with dementia may not articulate these needs plainly, but you will see the results later on in their behavior and comfort.

Managing brother or sisters and household dynamics

One silent barrier to involving your parent meaningfully is conflict among adult kids. If brother or sisters argue in front of a parent about assisted living, the parent frequently retreats or lines up with whichever kid seems most protective, not always the one with the most sensible plan.

Try to line up with brother or sisters ahead of time, at least on fundamentals: security limits, financial limitations, and rough timelines. Present a primarily unified front that still leaves room for your parent's input. If full contract is impossible, at least agree to keep the fiercest conflicts far from your parent's earshot.

Include your parent in household conferences when decisions directly shape their daily life, such as picking a specific neighborhood or deciding whether to try respite care first. When arguments have to do with behind the scenes logistics, such as who manages the documentation, safeguard them from the noise.

Transparency assists. Tell your parent who holds power of lawyer, who is signing agreements, and how costs will be paid. Even if they are no longer dealing with these tasks, knowing the strategy can decrease anxiety.

Making the space "theirs"

Once you have actually selected a community together, the next step is turning a void into something recognizable. The more involved your parent remains in this, the much easier the emotional shift tends to be.

Walk through their existing home together and ask what products feel like anchors. For some it is a specific armchair, a bedside lamp, framed family pictures, or a favorite set of dishes. For others, it may be spiritual objects, a sewing basket, or a stack of gardening magazines.

Invite them to help choose where those items go in the brand-new space. Easy concerns such as "Which wall should your images go on?" or "Do you desire your chair by the window or by the door?" provide back small however significant control.

If possible, established the room completely before they arrive for relocation in. Walking into a location that currently looks familiar, with their quilt on the bed and books on the shelf, feels different from entering a bare

system. It interacts, "You live here," instead of, "You are being put here."

Encourage the personnel to call them by their favored name from the first day. Share a short "about me" sheet with their background, pastimes, previous profession, and everyday regimens. This assists staff associate with them as an individual, not a diagnosis, and it builds connection from their previous life.

Staying included after the move

Involvement does not end on move in day. In truth, the weeks that follow are frequently the hardest. Even when a parent has been part of every decision, the first nights in a brand-new place can feel disorienting and lonely.

Visit, call, or video chat routinely at first, according to what your parent chooses. Some like the security of day-to-day calls. Others feel more settled with a foreseeable pattern, such as visits every Sunday and Wednesday. Ask what would assist them feel connected without being smothered.

Invite their viewpoints about how the care strategy is working. "How are you getting along with the personnel?" "Are you getting to meals on time?" "Is there anything you do not like that we should talk to them about?" Deal with these routine check ins as a continuation of the shared decision making procedure, not a postscript.

If concerns emerge, involve your parent in resolving them. Instead of calling the director behind their back, say, "You discussed that the nighttime personnel are slow to address your bell. Would you like me to come to a care conference with you and bring that up?" Even if they prefer that you manage it alone, the act of asking respects their ownership.

As time goes on and needs increase, circle back to them before significant changes, such as moving from assisted living to an advanced level of elderly care or memory care. Even if the choice feels medically clear, you can still state, "Your health has actually altered and the nurses think you would be safer with more assistance. Let us look at what that would be like and choose together how to do this as gently as possible."

The heart of the matter

Choosing assisted living is not almost structures, floor plans, or care packages. It has to do with identity, history, security, cash, and love, all tangled together.

Involving your parent throughout the process means accepting some extra intricacy. It may take longer. You may tour more neighborhoods. You may listen to more worries. Yet you are likewise developing a bridge of trust that will support both of you in the years ahead.

Assisted living, respite care, and other senior care alternatives can be excellent tools. They are not, by themselves, a guarantee of dignity. Self-respect comes from how decisions are made, how voices are heard, and how families appear for one another when life becomes fragile.

If you keep that frame in mind, the useful actions of browsing, going to, and picking begin to feel less like a series of battles and more like a shared project: finding a location where your parent can be cared for without being erased.

BeeHive Homes of Great Falls provides assisted living care

BeeHive Homes of Great Falls provides memory care services

BeeHive Homes of Great Falls provides respite care services

BeeHive Homes of Great Falls supports assistance with bathing and grooming

BeeHive Homes of Great Falls offers private bedrooms with private bathrooms

BeeHive Homes of Great Falls provides medication monitoring and documentation

BeeHive Homes of Great Falls serves dietitian-approved meals
BeeHive Homes of Great Falls provides housekeeping services
BeeHive Homes of Great Falls provides laundry services
BeeHive Homes of Great Falls offers community dining and social engagement activities
BeeHive Homes of Great Falls features life enrichment activities
BeeHive Homes of Great Falls supports personal care assistance during meals and daily routines
BeeHive Homes of Great Falls promotes frequent physical and mental exercise opportunities
BeeHive Homes of Great Falls provides a home-like residential environment
BeeHive Homes of Great Falls creates customized care plans as residents' needs change
BeeHive Homes of Great Falls assesses individual resident care needs
BeeHive Homes of Great Falls accepts private pay and long-term care insurance
BeeHive Homes of Great Falls assists qualified veterans with Aid and Attendance benefits
BeeHive Homes of Great Falls encourages meaningful resident-to-staff relationships
BeeHive Homes of Great Falls delivers compassionate, attentive senior care focused on dignity and comfort
BeeHive Homes of Great Falls has a phone number of (406) 205-4516
BeeHive Homes of Great Falls has an address of 2320 15th Ave S, Great Falls, MT 59405
BeeHive Homes of Great Falls has a website <https://beehivehomes.com/locations/great-falls/>
BeeHive Homes of Great Falls has Google Maps listing <https://maps.app.goo.gl/1z93HCVXHyRSY9gU6>
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BeeHive Homes of Great Falls won Top Assisted Living Homes 2025
BeeHive Homes of Great Falls earned Best Customer Service Award 2024
BeeHive Homes of Great Falls placed 1st for Senior Living Communities 2025

People Also Ask about BeeHive Homes of Great Falls

What is BeeHive Homes of Great Falls Living monthly room rate?

The monthly cost for assisted living, memory care, or senior care in Great Falls, MT depends on the level of care needed. Each resident receives a personalized assessment, and pricing is based on that evaluation. BeeHive Homes is known for clear, transparent pricing with no hidden fees

Can residents remain at BeeHive Homes as their care needs change?

In many cases, yes. BeeHive Homes of Great Falls is designed to support residents as their needs evolve, whether that means increased assistance with daily living or transitioning to memory care within the BeeHive network. Residents may remain as long as their needs can be safely met without 24-hour skilled nursing

What types of senior care are offered at BeeHive Homes of Great Falls, MT?

BeeHive Homes of Great Falls provides a range of care options, including assisted living, memory care, respite care, and specialized traumatic brain injury (TBI) assisted living care. Care is offered across eight (8) residential-style BeeHive Homes located throughout the Great Falls community, each designed to support a specific level of care

What is Traumatic Brain Injury (TBI) assisted living care?

Traumatic Brain Injury assisted living care is designed for individuals who need daily support following a brain injury but do not require 24-hour skilled nursing. At Fireweed Home, BeeHive Homes of Great Falls provides structured routines, personalized assistance, and consistent supervision tailored to the unique needs associated with TBI

Can families tour BeeHive Homes of Great Falls?

Absolutely! Families are encouraged to schedule a tour to learn more about assisted living, memory care, and senior living in Great Falls, MT. To arrange a visit or speak with our team, please call (406) 205-4516

Where is BeeHive Homes of Great Falls located?

BeeHive Homes of Great Falls is conveniently located at 2320 15th Ave S, Great Falls, MT 59405. You can easily find directions on [Google Maps](#) or call at (406) 205-4516 Monday through Sunday Open 24 hours

How can I contact BeeHive Homes of Great Falls?

You can contact BeeHive Homes of Great Falls by phone at: (406) 205-4516, visit their website at <https://beehivehomes.com/locations/great-falls>, or connect on social media via [Facebook](#) or [Instagram](#)

You might take a short drive to the [C. M. Russell Museum](#). The C.M. Russell Museum offers art and Western history exhibits that create an enriching outing for residents in assisted living, memory care, senior care, elderly care, and respite care.