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JIM: A lot of times when we say the word long-term care, nursing homes pop into peoples’ minds and, right now, with longevity, people are living into their 90s, even 100s. The possibility of the mind or the body wearing out becomes much more at risk and the need for long-term care has been expanding in a dramatic way over the last several years and I know when I talk to clients, a lot of times we mention long-term care, well, we don’t want nursing home insurance. We don’t want to deal with that. The fact of the matter is more and more care that is being provided is being provided outside the nursing homes and, as a matter of fact, homecare is probably one of the fastest growing areas of where care is being provided but, in order to have a realistic shot of staying in your home, and I think if I were to ask all of my clients where is the preferred place to stay, the old adage there’s no place like home would reign true. Today, I thought this would be a real interesting topic. We have a special guest, Rob Horkheimer who is a practicing physical therapist and he’s a renowned home accessibility consultant as well as a national instructor so, basically, he’s teaching people, he’s treating people, and he’s helping people to be able to stay in their homes even despite some disabilities. Rob, thanks for joining us today.

1:23

ROB HORKHEIMER: Okay, thanks for having me.

1:25

JIM: When you talk to people or consult with people, there’s no place like home. Would you agree with that?

1:30

ROB HORKHEIMER: Yeah, most people want to stay in their home and we work with people in a lot of different situations to help them do that. People, I think, sometimes don’t realize when they’re having a medical event or in a challenging situation some of the options that are available and that’s what I try to help people with.

1:46

JIM: I talk to my clients and I heard this a long time ago. I come from an insurance background so, obviously, I’m talking about people considering getting long-term care insurance or nursing home insurance or whatever the case may be. I really changed my mindset when I heard a doctor talking once, and this was probably 15 or 20 years ago, and he said, you know, it’s not nursing home insurance. Nursing home insurance is just the tool. You need to have a long-term care plan. Whether or not that involves insurance really depends on a person’s own specific circumstances but I think if the place somebody wants to stay at home, you really do need to have a plan. You need to have the resources in place and, when I talk about resources, we’re not just talking about financial but what are you going to do to make that home accessible? What support team are you going to have in place, whether that’s professional medical people, family members, whatever, and I know you do consulting on this, so what do you recommend to somebody? When is the time to start this long-term care plan and what are the important considerations that people should be looking at?

2:54

ROB HORKHEIMER: So, the best time to set a plan into place is before you have a medical event or before you have a decline in health, and there’s a number of considerations in terms of making your home accessible and making it livable and comfortable for you as you age so, really, one of the best things that you can do is to keep your home safe and to facilitate a lifestyle that’s comfortable and that will facilitate your independence, your activity, and your happiness and, really, the best thing is to think ahead of time before you have an acute event. Some of the considerations that you might want to think about, just looking at different areas of the home that you want to keep safe or that can be typical barriers to independence and to your safety so you want to look at issues like safe bathroom management, looking at obstacles like the stairs and the stairs are an area where you can easily suffer an injury or, if you do have an illness, that can become more and more of an obstacle. Other issues that you can look at or strategies that we work with people on is just maintaining the home, home maintenance strategies, and that type of thing. There are resources available for folks on that end as well.

4:03

JIM: Now, I know you started a company called BILD, which is Bridgeway to Independent Living Designs, in 2009 in which you’re helping people customize to remodel the home, creating lists and other strategies to help people maintain their independent living. Now, with that, do you find yourself usually reacting to someone who is already hurt or are people actually proactively building out their homes to anticipate the need for, as you talked about, some safety features built in that allow them to maintain their independence?

4:34

ROB HORKHEIMER: Yeah, we work with people in both situations. That’s really the two situations that we can have. One is individuals as they’re going through an acute event or have a medical crisis and this situation is not ideal. The more ideal scenario is to think ahead of time and plan out how you want your home to be comfortable as you age and the human nature, I think, has a tendency to kind of avoid that or to think that you’re not going to age but the reality is that, as we get older, our environment stays the same and things that were once not a problem now become barriers and I think one of the big problems is that they can lead to an inactive lifestyle and that’s what we don’t want. We don’t want your stairs to prevent you from going outside and to make you less active and less healthy and that’s what we really work with people is to try to assist them with developing healthy lifestyles. The more active and healthy that you are really assists your overall quality of life, it’s going to help you to stay at home longer and, actually, even from a financial aspect, you’re going to have less issues in terms of financial burdens. A lot of times, as healthcare professionals, we see people after they’ve had a fall and they’ve had an injury or they’ve just suffered from the effects of sedentary lifestyle or inactivity and what those health effects can be affect us in terms of our quality of life as well as in our pocketbooks.

5:57

JIM: So, the keys is, then, you want to start thinking about this soon. Maybe part of retirement planning should be, really, taking into consideration a long-term care plan and, if you’re of the persuasion that there’s no place like home and you want to be at home that may not be too early to really start thinking about, okay, are we in the right home, does it need to be modified, what type of things can we do to maybe make it more easily modified at the time that a care situation may happen. Hey, we’re going to take a short break and, when we come back, let’s talk about some of the specific modifications that you do or some of the specific considerations if someone is actually going to be more proactive in their long-term care planning. Please stay tuned.

6:41

BREAK

7:37

JIM: Welcome back as we continue to visit with Rob Horkheimer who is a practicing physical therapist and a renowned home accessibility consultant and national instructor. He has spoken to thousands of different professionals throughout the country helping people discover what it means to plans for long-term care and, more specifically, having the quality of life that you want even though health might deal you a setback so, Rob, we talked a little bit about accessibility to where you still can maybe get some exercise, get outside, not having barriers to having the quality of lifestyle that you need, so let’s start out from square one. Let’s say you have somebody who comes to you and says, you know, we want to start preparing for the possibility in the future that there might be a problem. What would you recommend that someone start with? Do you assess their home and kind of give them some ideas or how does that process begin?

8:31

ROB HORKHEIMER: Yeah, we work with individuals and, really, on a case-by-case basis. Every individual is different, every home is different, but, really, what it comes down to is, first, identifying what the individual’s goals are, what’s important to them, what their values are, what drives them and makes them tick or makes them go, so that’s one thing that we look at is what are people’s goals for their environment, how does their environment suit their goals, and we look at the environment closely to see what barriers exist, what obstacles exist for them that may be unsafe or may inhibit their activity. One of the projects that we do quite often, as you can imagine, is doing bathroom accessibility or bathroom remodels, and I think one thing to keep in mind with some of the accessible aging in place type of modifications that we do or the remodeling that we do is that it doesn’t have to look institutional as well so we can make things look nice and also allow somebody to be more safe, more independent, and more active, and to be able to stay in their homes longer and have a happier lifestyle and more independently.

9:40

JIM: Now, one thing, as you’re talking about that, if I’m being proactive but I don’t have a problem yet, would I really want to modify my bathroom or are there some considerations I want to have to make that more possible in the future and maybe you can give us some examples of some real life situations that you’ve worked with.

9:56

ROB HORKHEIMER: Yeah, and that’s another thing as you’re suggesting, too, is that when we adapt things, we can make them modular, we can make them flexible, so that if we have future needs that can assist an individual as well. For example, if we’re doing somebody who is active and who is pretty independent and healthy, if we’re doing adaptations for them and, again, one area may be the bathroom, one may be steps, which may be difficult to get in and out of the home, we can adapt things so that, again, they look nice or they may be easily adapted in the future so that if somebody does have a decline in health that they can function both from a walking level as well as from a wheelchair level. An example of that would be for making the entry to the home accessible. What I prefer from an aesthetic standpoint is if we can make the home accessible or eliminate the stairs using some type of other strategy, like landscaping, so that there’s even slope and that they can get in that front door, we can actually landscape a path into the house or even outside of the house if somebody is into gardening or if they’re into their activities in the yard that we can create accessible paths that, again, don’t look handicapped, they don’t detract from their resale value of your home or the current aesthetics of your home but they’re also forward thinking or even for myself, I think about this and my wife, too, is that if one of us were to have a medical event, if I end up breaking a leg, in a hospital, or something like that, it makes it much easier, much less stressful for me to transition back home or to function when I get back home if we have these types of adaptations that are made. A similar thing is, looking at the bathroom, some people prefers baths, some people prefer showers. We can make a barrier-free shower so that it looks very nice, it looks aesthetically pleasing and, actually, a big upgrade to the home when we remodel and it actually enhances the value of their home and the aesthetic and it will work a lot better for an individual, again, if they do have an event or it, often times, I think, can prevent an event from a slip or a fall that can lead to a hospitalization.

12:01

JIM: I remember a few years ago I was on a business trip and they had a tub that was there and I never sit and take baths and I’m taking a shower, I’m in and out, and I had to step over the tub to get in the shower and they didn’t have any anti-slip in there and I literally slipped, I grabbed the shower curtain, the whole thing came down, and I landed pretty hard. I got bruised up pretty back. I’m not an old guy and I’m not physically challenged but I was almost physically challenged after slipping on that tub. I can see that having those considerations ahead of time so do you find yourself, if someone is building a house or maybe purchasing a house that they bring you in as a consultant to start talking about that? Do you have enough people actually even thinking about that ahead of time because, as you’re talking, it just makes so much sense that if this is going to be your dream house, this house that you stay in, why wouldn’t you take into consideration having some of these things. It doesn’t mean necessarily you have all handicapped accessible but if, someday, you want to still be able to get in and out of your house and let’s say you need a walker or a cane or a wheelchair, wouldn’t it be nice to still be able to not have those barriers as you talked about.

13:08

ROB HORKHEIMER: Yeah, I think a lot of times, again, by human nature, it is sometimes hard to think ahead the problems that may come up and, unfortunately, for better or for worse, a lot of times, fairly often, it is individuals who see members of their family or they see friends who are having challenges that then are kind of brought to mind in terms of some of these issues, in terms of safety or how is my home set up, I do have challenges, whatever they may be, physical or in terms of mental status decline or cognitive decline with Alzheimer’s or some of the other challenges that we can face, and an example that you gave in terms of getting in and out of the tub is actually a really good example. One of the things that is pushed, to a lot of individuals, right now, is the walk-in tubs, which, again, do also have a barrier element built into a lot of the traditional walk-in tubs that are promoted over and over in commercials and advertisements and a lot of the companies that are around and it’s important, again, to have a professional who understands functionality and understands your individual needs in terms of finding what’s right for you. It may be that you prefer baths and baths are the best. There are certain types of systems that are going to be a lot safer than the traditional style walk-in tub, for example, where you have to step over that threshold, you have to sit in the tub as the water drains down, and, again, it’s important, I think, to have an individual who understands your function and your needs and some of the individuals who, I think, can be helpful in terms of going through that process, that individualized evaluation, I think is talking with an individual who specializes in accessibility. On our team with our company who we have working together is we have physical and occupational therapists who are trained in the field of, I should say, accessible home modifications so looking for individuals with credentials like CAPS, which is the Certified Aging in Place Specialist, or the CEAC, which is the Certified Environmental Access Consultant, qualifications, then working along with individuals and, again, also, with myself being a physical therapist, looking at individual’s function specifically and what your needs are individually for your function at home. It’s important for us to look not at the products or the ADA labels or the walk-in tub commercials and that type of thing but, really, to look at the individual and evaluate what is going to be, specifically, the best for them to function at home independently and safely.

15:38

JIM: Well, I’ve got a lot of clients where they wanted to stay at home, they didn’t modify the home, and you’ve got the healthy spouse and the one that needs a little bit of help, and it seems to be that the healthy spouse is the one that ends up needing the care because they injure themselves trying to do things that they can’t so I think part of what you’re talking about there with the safety, I mean any long-term care plan to be able to stay in the home, in most cases I see, you need some form of family support where they can pitch in and help out or you don’t have to have professional help all the time because, from a financial standpoint and affordability, it’s a little bit of team effort but, if your team isn’t capable of being on the team because you don’t have the functionality in the home to support someone who might have some additional challenges, the chances of you being able to stay at home become very limited without that consideration so I’m sure that’s a big part of it is having a spouse or a child or somebody that can pitch in and help out and not being put under too much physical duress because the tools are already in place with the design in the home.

16:41

ROB HORKHEIMER: Yeah, and protecting the caregiver is critical. There is a lot of technology that is available to protect the caregiver as well. I’ll give an example. This was a couple that we worked with, an elderly couple. The gentleman was over 90 years old and his wife was roughly around 70 years old. He went through a medical crisis where he became totally dependent for his care and what we did with that couple, first of all, they really did want to get home and there were some questions from the healthcare workers if it was appropriate or not on terms of, obviously, this gentleman’s wife being up there in age as well, but we were able to accomplish with this couple through the use of a specialized transfer system that attached from the ceiling is that she was able to actually independently transfer her husband to and from the bed. We had another transfer system track in the bathroom and she was able to actually independently transfer him to and from the bathtub and he preferred to take baths and it worked out really, really well but this intervention, in particular, saved them in terms of the financial cost of hiring these other caregivers to come into the home. This wife was able to independently take care of her husband and both of them were able to maintain their privacy, maintain their dignity. They didn’t have to worry about if the caregiver was going to show up or not. Another big issue for them and, again, using some of this technology in terms of patient transfer lift technology is that she protected herself as well so she wasn’t hurting her back and, actually, at a later point, what we did was, she had to roll her husband every couple hours at night, and we got them another type of a system that would assist with the lift so that she could roll her husband using the ceiling track system, using a special sling that was under him as he slept at night, and so she didn’t have to do any lifting during that time and, again, it’s really a godsend but, a lot of times, we have caregivers who are very well intentioned but sometimes can do things in a way that they can injure themselves and, really, the greatest asset to an individual who is living with a disability or an impairment like that is their caregiver and to do everything we can to protect them.

18:56

JIM: I remember when you started your business, I mean I had never heard of anything like this. As you guys have grown, I think it’s phenomenal what you’re doing for people and, as we know, the stats tell us 10,000 Baby Boomers are retiring every day and, every day, they’re getting a day older and, someday, they might want some of this help and I know Baby Boomers as a generation are some of the most independent people there are and, man, you’re in denial if you haven’t figured out your long-term care plan. If your plan is to stay in the home, you need to be aware of what the issues are and what you can do to not only protect yourself but your family members that might be helping to care for you and making sure you have the plan in place, the financial considerations have been done, and that you know what the steps will be. Now, you do have a website that talks about a lot of the different resources that are available in the home to help make the home safer and more accessible for people that need a little bit of extra help and I know you’ve got some educational resources there. Give our listeners that website.

19:56

ROB HORKHEIMER: Yeah, our website is www.bildnow.com, so it’s www.bildnow (without the U).com. We have tried to set u that website as an educational and informational resource in terms of options that are available for accessibility within the home so, hopefully, that will be a good resource in terms of just education and learning for folks.

20:23

JIM: And I know you’ve shared with me, too, in the past, you’re able to help people all over the country. You’re educating people around the country and you can certainly help steer them in the right direction if they need help.

20:33

ROB HORKHEIMER: Yeah, definitely, thank you.

20:36

JIM: Thanks for joining us this week and tune in again next week as we explore another phase of the Real Wealth process and, remember, if anything you heard in today’s show you would like to get more information about, contact your Real Wealth advisor. Also, if you feel that any of this information would be helpful to a friend or family member, just click the Forward to a Friend button.