

A Word With the Boss: It's Bill Jenks' business to help Mainers age at home

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By Edward D. Murphy Staff Writer | 207-791-6465

Bill Jenks learned firsthand what it's like to care for an elderly loved one when there isn't a lot of support.

His stepmother was diagnosed with Alzheimer's, and he and his dad cared for her, a situation "that became very difficult for my father," Jenks said. It laid the foundation for his interest in senior care services, and in 1999, he bought the Cumberland County franchise rights to open Home Instead Senior Care in Gorham.

Last month, CNBC and Franchise Business Review named the business the top franchise in Maine in an annual ranking. The company is on pace to exceed \$2 million in revenue this year.

Jenks, who was the director of the Chamber Orchestra of Oklahoma City and principal cellist of Oklahoma City Symphony, made his career change after being diagnosed with multiple sclerosis. He sold one of his cellos for \$75,000 to get the money to start Home Instead Senior Care.

Q: How did you make the transition from music to running a senior care business?

A: That's the beauty of a liberal arts education, which I have. You know how to learn and educate yourself and find answers to things. I had never had a course in any kind of business, but I can figure things out and, the beauty of a franchise system is that you don't have to reinvent the wheel.

Q: Why Maine?

A: Because we wanted to live in Maine. We had spent summers in Maine and thought it would be wonderful to do that. We assumed we would be in Portland because my wife's residency was at Maine Medical Center, but we ended up buying a home in Gorham, and in 2009 I bought the office space we're in now.

Q: Maine is now the oldest state in the country. Were you ahead of the curve in identifying this as a business 16 years ago?

A: I think this franchise model has worked in almost every state of the union, and now 14 other countries. I don't know if Maine is more fertile ground for a home care company, but it supports it. It's a growth business, with the fastest growing segment of the country over 80 and our core clients are 75 and above. The one caveat is that it's all private paid, Medicaid doesn't pay for it and people have to be able to afford it on their own. While Maine is the oldest state in the country, it's not necessarily the most affluent, so there are two sides to that.

Q: Who is your core client?

A: It's often the adult children who take the first steps. They're visiting and see that things have changed and they're worried, so they call. Some clients have moved to assisted living and need more one-on-one care, so they hire us to supplement the care they're getting. We have an increasing number of clients with some form of dementia, and the longer people live, the more chance there is that they'll develop dementia.

Q: What's the biggest challenge your business faces?

A: The workforce available to care for an aging population is shrinking. Finding the right people to be caregivers is a problem because it's not something that everyone can do and be good at. There's a lot competition (for employees)

now. We're probably competing more for employees than clients.

Q: Why is it difficult to find employees?

A: It's very difficult and not just because of the pay. We start people at \$10 an hour and it goes up to \$14.25 an hour. It has to be a person whose primary reason for working for us isn't the money. They have to feel it's a calling. And that would be the case even if we were paying \$20 an hour. They've got to really care, they can't just be doing a job. We're always looking because we have to be prepared for new clients coming on.

Q: You have 110 caregivers now. How do you make sure you're getting a good one?

A: There's an exhaustive application and interviewing process. Once we feel someone would be the right person, we do a criminal background check and a driver's license check and then a drug test and we try to get four to six references for each person and then really talk to them.

Q: What do you look for?

A: Personality and patience is a very big part of it and compassion and having a nonjudgmental, accepting attitude. It doesn't hurt to be well organized and proactive and attentive to someone's needs. We don't require that anyone has training – we have our own training program. It's difficult for a client to have a strange person come into their homes and cook their meals and do their laundry and it's difficult for the caregiver, too. What we don't want to do is take over, because that's the number one fear that older people have, is losing their autonomy. Our intent is to keep them independent as much as possible.

Q: How do you handle it when someone needs more care than you can give them?

A: We help the family make a determination. We can recommend assisted living places or dementia care places, or increase the number of hours and days we're in their home.

Q: It must be hard on the caregivers when a client dies. How do you deal with that?

A: We have bereavement support when the caregivers have lost a client. They grieve even if it's not the client dying (but rather moving to an assisted living center), there's grief for that as well and we have support sessions when that's appropriate.

Q: And finally, how are you handling your MS?

A: Pretty well. I was diagnosed in 1993. When I got that diagnosis, it was clear to me that I needed to look at other work because conducting an orchestra was very draining. I was worried about losing my balance and tumbling off into the violins. Now I tire pretty easily and my balance is still a problem, but I can still get around.

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