

Welcome to Bridge the Gap, the senior living podcast.

It is an exciting time here with Josh and Lucas and guess what the other Josh and Sara are on our show- Josh Marcus and Sara Marcus- welcome guys!

Josh H.: Thank you, we're stoked to be here.

Josh C.: This is awesome. So y'all don't know, I told you this, for me this is an awesome day because not only do I get to meet the people that he has been talking about like non-stop. So, good to put a face with the name but we've got an awesome topic that I don't think we've bridged this gap.

Lucas: We have not bridge this gap and we need to and we're going to.

Guys, I call you guys the other Josh and Sara because of obvious reasons you have the exact same names of our podcast team-

Josh H.: -And spelling too. It's not even like different.

Lucas: So, you guys are the other...but for right now you are, really you're on the show, so you are the Josh and Sara today. We're glad to have you guys and we are really looking forward to diving into a sensitive topic and getting a little bit about your background and a very interesting journey that you guys are on as newcomers to the senior living world which I frankly am excited about.

Josh C.: Well, I'll tell you, I shared this with you guys right before we went on our show, we've been here to show. It's exciting to see you guys come into a show that traditionally our industry is a little stiff, we're a little behind. You guys have such a cool vibe and swag when you came in here, that you immediately draw a lot of attention and people are just naturally drawn to you guys so I can't wait to see conference two, conference three as you guys digging in and see the awesome things are gonna do in our space. So, welcome officially to the space and can't wait to talk to you guys today.

Josh H.: Thanks man. We're excited about helping our elderly and all these seniors. We're stoked.

Lucas: That's I think probably the beauty of this is that you guys got a great swagger but you got a great why and a great mission. So, you guys have a company called Dmanna right and you guys just launched this year. Go ahead, let's dive into your backgrounds, so tell us who you guys are and where you came from.

Sara: Well, it's almost as interesting a story as the Bridge the Gap origination story. It starts with- how far back do we want to go?

Lucas: Look, you've got the mic.

Sara: Okay, let's do it. Josh, do you want to start way back?

Josh C.: Way back. Take us way back.

Sara: Okay. So, I like to joke that I married into business. I was not raised an entrepreneur. I got my degree in chemistry, Josh got his degree in business and the same day I graduated with my chemistry degrees, Josh and I got married. Family's coming in town for the graduation, let's just do it all at once.

Josh H.: It was super optimal, everyone was there.

Sara: So efficient.

Josh H.: We went to a graduation lunch and then I was like alright babe, I'll see you when we get married I guess. So that was it.

Lucas: Capitalist.

Josh C.: That's awesome.

Sara: Super efficient. That's one thing about us and our lives and our companies and our business and our mission- super efficient. So, Josh has this amazing marketing and sales talent that he used for our first company that we ran together Hüify marketing and sales agency helping mostly software companies. So, like Surescripts; a lot of people have heard of companies like that. So, helping software companies do their marketing and sales in an inbound way. So, instead of shoving the words into their face, we're trying to get them to come to us.

Josh is especially gifted in that and I've gotten to apprentice under him while running this company together.

We came to a point in our lives where we'd been in Silicon Valley, we'd done that. We'd been in marketing and sales, we'd done that. And Josh had written this best-selling sales book.

We got to this point where Josh had co-founded this private jet media company last year. He was doing the private jet thing with billionaires and taking videos and photos. It was like the sexiest thing he could do.

Josh H.: It was boring. It was awful.

Sara: Still an amazing company, but made the decision that we can kind of do anything that we want right now. We're in this time in our lives and our careers where whatever we decide to do now, that's gonna be the thing that our best years are going to go to. Do we want our best years to go to selling software? Even though we're really good at it, we felt those skills could be applied somewhere else, somewhere near and dear to my heart and that's where the origination of Dmanna came about.

Josh H.: Yeah, after some of our success that we'd had, we really started to look internally, like okay, what truly do we want to leave behind as a legacy? Is it that we helped some company sell that much more accounting software to accounts or is something where we can actually impact people's lives significantly as even our lives have been impacted. Do you kind of want to jump into-

Sara: Yes.

Lucas: Yes, let's talk UTIs.

Sara: Let's talk urethras.

Josh: Oh, wow.

Sara: Let's get there. So, I have had over 25 urinary tract infections. That's a lot of urinary tract infections. I thought that I was like just particularly afflicted, that there was something wrong with me. I started to leverage my chemistry degree, researching journals, reading the science behind it. Turns out I am not alone. This is a huge problem, particularly for people like my grandfather who a veteran, an amazing man, lived a long life, drank like a case of beer everyday and smoked a pack of cigarettes- he made it until he was like 90 and very healthy man.

Josh H.: Minus the cigarettes and stroke.

Sara: He made it work. He was very healthy until the day he passed away. He had a stroke and when the ambulance and the paramedics couldn't get to him from his house because they had this crazy staircase, what did he do after he got home from the hospital after the stroke? He went and built them a ramp so the next time that they had to come carry them out, they would have a ramp.

Josh H.: With his own two hands.

Sara: With his own two hands.

Josh H.: Didn't even hire anyone; he just did it himself.

Sara: But he suffered, and I learned this through talking to my family members (and) being more open about UTIs because that's another thing too- urinary tract infections have this taboo as this women's issue kind of like periods. We don't really like to talk about it and as a result, a lot of people are suffering, because we aren't talking about it, because it's got this stigma on it.

So, I found out after my grandfather passed away, that he suffered from chronic urinary tract infections until the day he died. And they tried antibiotic after antibiotic after antibiotic and eventually he just lived with it. He couldn't keep going back to the doctor so he just lived with this burning pain because there was no other solution for him. The antibiotics weren't working. That was it. He just lived with it.

And so many women, elders are living with this. They're taking antibiotic after antibiotic after antibiotic when there are scientific discoveries being made about how to prevent these infections from happening and so that is our goal with Dmann with a lot of science is speaking to what can we do to prevent our elders from getting urinary tract infections, what can we do to prevent these women from getting urinary tract infections.

Instead of how it's been dealt with for 90 years, now what's being dealt with today with UTIs is when they get a UTI, give them an antibiotic. Wait for the next UTI, give them an antibiotic. Wait for the next UTI, give them an antibiotic. And what does that cause? It causes antibiotic resistance. So, I myself, there's one or two antibiotics left before I am going to the hospital for IV Vancomycin because that's the only option to treat my UTIs. And so many elders are faced with that situation because they are chronic, they come back, it always requires an antibiotic.

The focus should be on prevention. That's what all of the experts agree should be the way that we approach this, the 250 UTIs that are affecting 250 million people per year.

Lucas: That's a great segway. Talk to us about this. What do these numbers really meaning in these communities? What does this percentage of these people who are dealing with this in this aging population?

Josh H.: Yeah, so, there's a two-sided answer to this. One is what the research says today and then one is what anecdotally we're hearing back.

I think there's, we're going to speak about a few gaps here in the knowledge of the medical world. But one of them is it says people, 50 percent of men and women over the age of 60 get a UTI and of people who get a UTI over the age of 60, one out of every three die from it. So, it's pretty significant a lot it's because of sepsis.

The biggest symptom of a UTI or one of the largest symptoms of a UTI is dementia. So, a lot of times, it could be something where UTI cause dementia, dementia caused them to fall down the stairs and have a bad fall and a broken hip is eventually would lead to their demise

Sara: We personally know on our team multiple people who've had relatives pass away that way- UTI caused dementia, dementia caused a fall, the broken hip sent them to the hospital and then they passed away within weeks because of the broken hip caused by the dementia caused by the broken hip caused by the UTI.

Lucas: So, this is news to me. Josh, you're an operator in the space and when I brought this up to you recently, you were like oh yeah, this is a huge issue.

Josh C.: Well, it's a huge issue but nobody still talks about it a lot like what are we doing to solve the problem, what are we doing to prevent a problem. I'll tell you that it was news to me when you shared how many UTIs you had had. Because I guess me being very ignorant I'm like, oh, I thought this only happened to old people. Like you're young and you've had these challenges. I think there's also perception driven by ignorance that this is a female issue, not a male issue so to hear the story of your grandfather.

So, I can tell you that it presents itself in our communities in a lot of different ways. I mean, hallucinations, getting up more frequently during the middle of the night and you're wondering why is this person getting up so much in the night... It presents itself, we don't really find out about it until there's a fall and we're like why were they up at this time of night, they're never up at this time of night. They've been up all night because they've been going to the bathroom, they're miserable and they missed breakfast.

I think we as operators, you know, we see this flushed out and often times it's almost too late because often times when they do break the hip or something like that, they're at the hospital they're out of our control and then it seems to digress from there.

Lucas: So, talk to us a little about your journey. So, you've come to this realization, you're building a mission-driven company that's solving a problem that is, frankly, huge and is a big deal. Where are you guys in the process?

Josh H.: Yeah, so we have launched the company for five months so we are very new in and into the senior living industry, we're really only three months in this industry. In fact, this event thanks to Lucas and Josh and Sara inviting us, this event is the first senior living event we've even been to. We've been to hundreds of conferences in other industries, you know, with previous businesses but this is the first one here.

So, part of it is just educating because there's a huge misunderstanding and a lot of it is these doctors don't, most doctors don't necessarily go and study and a doctorate in urinary tract infections.

A lot of times it becomes what you call a dumpster diagnosis where it's just one of those things where you know what, sorry, it sucks you got a UTI, here's an antibiotic. We can shake our fingers at the doctors but I don't think that's the answer because I think honestly they're doing their best. They've got so many things to keep track of; it's not their fault that this massive epidemic which is increasingly rising- I mean, we have children that are seven years old that are our customers that are taking Dmannia every day because now they don't have UTIs. I mean stories, we're getting stories back like, man my daughter just came in and said daddy, daddy I got to ride in the car and didn't have to wear a pullup because her UTIs were causing her to have accidents all the time.

So, things like that...when we hear stories like that when we hear stories about people being able to do things that they hadn't done before like wear a bathing suit because for some reason there's a there's information out there that says if you wear a bathing suit, you're going to get UTIs...

There's not scientific backing to this.

Sara: Can we talk about the myths of UTIs real quick?

Josh C.: Absolutely.

Sara: Oh my goodness. So, a huge myth around urinary tract infections is how they're caused. Even if you read on WebMD or like Cleveland Clinic, there's so much misinformation and I think that causes doctors a lot of frustration, it causes patients a lot of frustration.

One reason people think you get UTIs is like Josh said from swimming in a pool or from wearing wet bathing suit. What's another one?

Josh H.: Proper wiping. So, from wiping front to back.

Sara: You should always wipe from front to back but to have a grown man tell you are you sure you're wiping from front to back and that's why you're going UTIs? So, the studies say that it actually doesn't matter what direction, you should wipe front to back but it doesn't matter. That's not going to give you a UTI.

Another one is like if you don't pee after sex you're going to get a UTI (which is) something more applicable to active people. If you don't shower after exercise, you're going to get a UTI. No joke, sites like WebMD that are supposedly our trusted source for information are saying you should always shower after exercise because you might be getting yourself a UTI and that has never been proven to be true. That's not how you get urinary tract infections.

There's three things that really contribute to your UTI risk. The first is genetics. So, if you're a woman and your mother had UTIs, you are so pre-disposed to get UTIs. That is one of the biggest indicators of your UTI risk, if your mother had them, you're screwed. But, you can work on preventing them. You just have to be very proactive.

If you had them as a child, they've also linked to higher UTI risk. And then age- age increases your risk of UTI. So, unless you've never- oh and sexual activity- so unless you never want to have sex or get old, you're probably going to be, your UTI risk is going to increase.

As we age, our UTI risk increases and that's what we're seeing with elders (and) why they're getting UTIs- it's just a fact of life. That's just what happens. Maybe you're drinking less water, hormones change-some women get urinary tract infections postmenopause- there's a lot of things that are frankly out of our control why people are getting UTIs.

That's the biggest message I think I myself want to get across, I think everyone here wants to get across to the elders and to women and to children who are suffering from these chronic infections is it's not your fault.

Good Will Hunting moment-let's bring it in-it's not your fault if you're getting UTIs. Genetics (and) age are things that are out of our control but those are some of the biggest contributors to UTI risk when they study what is actually connected to UTI risk.

It's not whether you showered after sex or showered after exercise; it's not whether you drink cranberry juice or not- those things have never been linked to UTI risk. It's genetics and age that are affecting people the most.

Josh C.: So, this is very educational and eye-opening for me. I had heard a lot of these myths and that's very educational. Can you unpack a little bit, I know you're just now kind of getting this launch, but can you unpack a little bit what you guys are specifically doing, how you're approaching this problem, how you want to solve it, how you can help prevent it- those kind of things?

Josh H.: Yeah. The first goes back to education, like most things, you know, really helping people understand like Sarah said. It's not your fault and there's so many factors that play into why you could be getting this. It could be because of some medication you just took, some procedure you just had, it could be because you have a catheter; it could be tons of different things.

What we do know is drinking water and taking 2 grams of d-mannose every day prevents UTIs. That's what we know; that's been clinically studied (and) it's been clinically proven. So, that's the solution that we're really bringing to the market is these packets that have 2 grams of d-mannose powder and you just put it in water or oatmeal or anything else and that'll prevent UTIs.

So, it's a combo of helping come alongside the staff and family members of our seniors and educating them on, hey this is this is what this is, this is what this means and then also this is how severe this is. This can literally cause you to die and its prove. There are stats that say that one out of three are going to pass away and so this is something that you really should be focusing on preventing instead of just waiting for it to happen because if you just waiting for it to happen, it's not going to work out well for you and studies show that.

Sara: At the core of our mission at Dmanna and why we started this company basically doing this with our lives over anything else because anyone who has met Josh Harcus knows this dude could do anything. You could sell anything-

Josh H.: -I pay here to say this stuff.

Sara: I mean, could do absolutely anything; he could fly private jets all day if he wanted to- I mean we're doing that. The reason we're doing this with Dmanna is the goal is to prevent UTIs on a global scale so everything we do, it has to be evidence-based, there has to be science behind that because that was so frustrating to me coming into this world of discovering how I can prevent my own UTIs through reading stories through journal studies- I was frustrated because I had to have a chemistry degree to figure out what actually worked and what didn't. And if you don't have that, you're basically listening to Ocean Spray telling you drink more cranberry juice. I don't know how many hundreds of dollars I've spent on cranberry juice over the years because their marketing campaigns told me that cranberry juice prevented UTIs.

Just an FYI as well, cranberry juice does not prevent UTIs. Ocean Spray is the devil. It's not been proven.

Josh H.: Or maybe just a really good marketing company.

Josh C.: I was going to say, Josh were you behind that marketing campaign?

Lucas: She might change her tone if she finds that out.

Sara: So, we created Dmanna to deal with my biggest frustration of the UTI sufferer and from the caretakers' perspective, they're trying to filter this information too- what works, what doesn't? You know, we don't want to keep buying products that are useless, there's no science behind them.

I bought probably thousands of dollars worth of product because I was so desperate. I don't think you should have to have a chemistry degree to know what works and what doesn't. So, Dmanna everything we do, everything we advertise, everything we suggest has to be based and backed up with science, studies and facts. And not just one study; one study is not enough. It has to be reproducible, has to have been reproduced, has to be peer reviewed. So, we're trying to eliminate this nonsense that is the prevention market because it's just so crowded with snake oil type sellers. And I'm sure packs you guys see in elder care facilities, you know, (with) the product they're hawking to them. What are some of things that you guys are frustrated with in elder and senior living that are like that shouldn't be a thing? Why are people selling?

Lucas: Josh would have to speak to that.

Josh C.: Well, this is this is a PG-rated show.

Lucas: It's PG-13 now.

Josh C.: We don't want to go into all the things that are marketed to older adults, but there is a lot of them.

One thing I want to talk about because the ignorant dude, bearded dude at this end of the table-

Lucas: -hey, wait a minute. Are you saying there's another one?

Josh: C. No, I'm just saying the one right here.

Josh H.: There's three.

Josh C.: No, but so many things about what you guys are doing, I could sit here and ask questions all day but a couple things like the name d-mannose. I mean, is that a chemical in itself, did you guys come up with that name, why that name and then jump ahead to and like how do you get this, how do you know you need this, when do you take it- I'm still like a sponge here.

Sara: I discovered d-mannose, the compound, in doing my research trying to prevent my own urinary tract infections. In 2013, there was one study available; that's the study I found and that's the reason I started buying it and start using it for myself. They were using two grams of



d-mannose powder every day for prevention and showed that when they compared d-mannose daily to Macrobid, a common UTI antibiotic, daily to nothing- I'll just summarize it:

It was a study at three groups of women who had just been treated for UTI and you got chronic UTIs, so three UTIs or more per year. They treated these 300 women for their UTI and they were clear of UTI. They gave 100 women daily d-mannose, they gave 100 women Macrobid daily antibiotic with a lot of side effects- it's actually not even suitable for elders (and) most times they won't prescribe it- and then they gave 100 women nothing.

In the group that got nothing, 60 percent of them had another UTI within 6 months. The group they gave Macrobid every day, which is a harsh antibiotic that costs three dollars a day after co-pay-that's what I was doing; I was taking an antibiotic every single day and it was making me sick but that was my only option to prevent UTIs- but 21 of those participants out of the hundreds were taking daily Macrobid with a lot of side effects got a UTI. So, significant reduction compared to 60 percent versus 21 participants.

And then they looked at the d-mannose daily group which had no side effects, it's significantly cheaper at one dollar days how much a packet of our d-mannose costs and they found that 15 out of 100 of those people had a recurrence.

So, down from 60 percent to 15 percent, so that's basically the study that showed that daily Macrobid and daily d-mannose for UTI prevention produce the same outcome or wasn't statistically different. D-mannose actually produced less recurrences.

That's when I started taking d-mannose every day because I had to get off this Macrobid. Since then there's been two more studies that have shown that taking d-mannose every day significantly decreases your risk of developing UTI and also the symptoms that come with it and also improves quality of life. The study participants that they were using found an improved quality of life from their reduction of symptoms through taking d-mannose every day.

So, I'll summarize real quick. The name Dmanna came from d-mannose. We wanted a way to educate people just in the company name. So, if you're saying Dmanna, you're going to be like oh, d-mannose, I get it. D-mannose is a thing that prevents UTIs.

I would be so happy if someone was like, well I don't want to buy d-mannose from you, I'm going to pick it up at Whole Foods, but thanks for telling me. I would be so happy if they just went and bought d-mannose from Whole Foods instead of from me because they learned about it. That's how life-saving I think this compound is. D-mannose is the compound. It's pure d-mannose. There's no side effects. Canada says you can take up to 180 grams and it's safe. So, that'd be a lot of d-mannose but it's safe for diabetics, for elders, for children and it's been proven to significantly decrease your risk of UTIs.

That's the gospel message we're trying to get out there with Dmanna and that's what we're trying to bring globally in situations where like India- they don't have as great a supply chain for getting antibiotics, Mexico and countries where we can prevent UTIs at scale by using this prophylactic treatment.

Josh H.: So, right now the best way to get it is either working with us to help us to supply this to your elders. You know we have even some doctor's offices that are buying boxes of Dmannna and then they're giving it to their patients. Really our goal of what we want out of all of this is since 50 percent over the age of 60 get UTIs and that's what an outdated study says and when we call into these places we'll hear even upwards of 90 percent of our elders have UTIs right now.

What our goal would be is that every single person in an elderly care community is taking a packet of Dmannna every day. If it's not our d-mannose, that's okay because what that means is that all these people are not getting UTIs anymore or at least the reduction of how many UTIs are getting is significant which means they're not getting cases of dementia from UTIs. There's so many things that we don't know about those effects.

How do you get this? Dmannna.com is the easiest place to go. We've got an awesome place of tons of resources and tons of things online and videos there. So, Dmannna.com.

Lucas: Say that three times fast. So, to round out the show, right now in the world entrepreneurship is on a pedestal and I think it's great. There's actually a lot of entrepreneurship in the senior living marketplace and I was actually talking to a younger guy here and he said I wish people in the industry on these panels and stuff would talk more about the business, the entrepreneurship journey that it takes to run and become an operator. So, you guys are a purebred entrepreneurs which is really really cool and you have so many different stories.

So, Sara talk to me-what is a pinkubator?

Sara: Oh, the pinkubator. So the pinkubator is the nickname for the pink ceiling incubator based in Raleigh. It was founded by Cindy Whitehead, an amazing woman who's making big moves in women's health specifically with her drug Addyi. Basically, propagating the idea that that people should have control of their own health which we 100 percent agree with.

There are some people, urologists that I just talked to, who recently today an MD said well the studies with d-mannose that shared all these amazing effects did you know monitor UTIs by self by a clean catch and not catheterization so I don't trust it. It's like, wow, so you don't even want people to have a choice of taking Dmannna every day? People should at least have the choice like it may work for you it may not; all the science says probably it is going to be very effective.

So, people should have the choice of whether they want to take something or not. It's our job to educate and empower them right. We kind of heard about her story and was so compelled, just wanted to meet with her.

Lucas: She's a big figure.

Sara: She's so amazing. She basically had a drug that was-

Josh H.: -How did we hear about her story?

Sara: So, you want me to tell the story real quick?

Lucas: Sure. I want to hear it. I want to hear the link to the podcast.

Sara: She was actually on Tim Ferriss's podcast and shared her story about how she challenged the FDA when they rejected her for a women's drug that men have already had access to a version of this drug for their sex drive.

Josh H.: It's a blue pill as a hint.

Sara: There is like 15 versions of blue pill Viagras for men. There were zero for women. So, she brought one to market and the FDA denied it and so she challenged them and she got through. On the premise that all the data backs it up and women should have the choice. It's their choice if they want to take it or not. So, I thought that was so amazing.

We wanted to get in touch with her and we wanted to talk to her and wanted to make her our friend. So, that happened. We ended up watching the podcast where she mentioned that if she could pick any hobby to learn and to do, it would be fiddling and she also has this thing where she wears pink all the time.

So, we found a pink violin from this random music store and we had it engraved with one of her favorite quotes- "Fuck the unicorn. Be the workhorse." Which is a fabulous quote for entrepreneurs to take note of.

Josh: I love it.

Sara: And I don't even curse that much. It just feels naughty saying it. Now, you can mark it explicit.

So, fuck the unicorn, be the work horse, which is a great that exemplifies everything you need to know about being an entrepreneur and we sent that to her and her team got it was a big thing, she put it on Instagram and we got the meeting. She's a billionaire investor and she's a hard to reach person and most investors or most high power people that you want to talk to as an entrepreneur are.

You've got to get creative with how you're going to convince them that you're worth giving their time and some of them are generous with it but some of them are hard. She's busy and she's just trying to change the world but my most entrepreneurs are. So, we ended up getting a meeting out of sending that gift and the reason that we knew even about gifting like that, how to get the meeting was because...

Josh kind of got us indoctrinated and our whole agency felt that way about entrepreneurship...

Josh H.: What was the meeting like to get back to Cindy's meeting?

Sara: We're having more meetings like now.

Josh H.: I can chime in here because I know a little bit of the details too, as well.

So, Sara met with Cindy and Cindy loved it. She thought it was great. She's like, wow, this is huge, understanding firsthand all the implications of UTIs have, especially on women because one out of every 10 women get chronic UTIs which is crazy.

So, from there she immediately connected us to urologists and whole chains of urologists like you need to get the word out, you need to get this message out there.

So, it's been cool and obviously as Sara said we got more meetings coming up.

Lucas: That's awesome and I look forward to, hopefully you guys can evangelize for the senior living world back to Cindy too because she has a massive influence on a global scale. We'd love to know and hopefully you guys can bend her ear about the senior living industry because part of the reason why we want to be the voice of the industry is just for general awareness. A lot of people in the population, we go to these conferences and they'll do like the man on the street and they'll go out they'll say, hey, have ever heard of senior living and they're like what no, what's that? Would you ever work in senior living and they're like I have never thought about this what is this?

So, awareness and recruiting and all this sort of stuff, we're glad that you guys have arrived and are arriving into the senior living world and we appreciate you taking time here. We're here in Atlanta and I hope you guys enjoyed your first senior living conference.

Josh H.: It's actually, to comment real quick on the industry, way more welcoming than any other industry. I mean everyone-

Josh C.: That's good to know.

Josh H.: -that's great have you met someone so and so and have you met so and so and they're just pulling people in and I'm like man- last Salesforce event I was at was definitely not this. It's like completely different so it's been cool. We really love, ever since we got into this industry because we've worked in so many industries providing marketing help and services to all these different clients but this is the first time we've felt like you know what, I think this is the industry we're gonna stay in for the rest of our career because there's just so much value and so much potential.

Honestly, we're just getting started. A lot of these conversations are in their infancy which is great and I'm going to these other healthcare conferences so I already kind of know other side of those conversations and it's cool to see kind of these two worlds coming together.

There's so much here. It may feel like it's an industry that for some at times when they're in their grind or when they keep motivated may feel like man, is this industry declining? No, not at all and obviously from what everyone has talked about with you know everyone wants to come up with a comment on the silver tsunami but even before that it's huge and the help that you give us is massive.

Sara: Yeah and I think one quote, I think it was you Lucas or someone on your team- Josh shared this with me, I think it was you Lucas, who said “ if you’re going to get into this industry, you could be a real estate developer in any industry. To get into this industry you really have to care. You really have to care about is people in our lives and I think that’s what attracted us to this spaces is no one is going to come back from their accounting space and say oh my gosh, you change my life.

But when you actually have customers and elders and some of our customers saying this changed my life, that’s amazing. That’s the opportunity.

Josh H.: I didn’t want to live without this. I didn’t want to leave my kids behind. Things like that, it’s just like wow.

Sara: UTIs are so bad they make people, you know I ‘ve thought that before, like when’s this going to end? I don’t want to be here anymore. And so that’s the opportunity we have to change that and to come alongside people in their biggest times of need, when they need that support, which is what senior living is all about and that’s why we just love being here with you guys and your energy- it’s infectious. We’re so glad you told us to come out to this conference and so glad you had us on this podcast. It’s just been so fun being here.

Lucas: You guys are welcome. Thank you guys so much. We really appreciate it and we’ll definitely connect all your information in the show notes. I’m sure that our audience is going to have a lot of questions and their ears are burning and they want to know more, so we’ll make we do that.

We’ll continue the conversation on social media and will get connected with you guys. You guys have a massive social media following which is cool-we’re going to get that awareness out to a bigger sphere of influence. It’s not these silos that Josh talks about; we’re opening it up and pulling back the veil and we’re going to get the word out there.

Thank you guys so much and this is been another great episode of Bridge the Gap.