



CAREGIVER PROFILE

KATHY DAVIS



Kathy Davis is a lifelong resident of Sonoma County. She knew she wanted to help seniors early in life. As a senior in high school she earned her CNA certificate, and worked at a local coalescent hospital. She went on to work many years for HP and Agilent, but caregiving had been a life-long passion of hers.

A few years ago she helped a friend and her mother through the ravages of Alzheimer's Disease, and it affected her deeply. She watched as they had to go through numerous caregivers to find the right match for the family, which added to the stress of their situation.

She decided that she wanted to begin a new chapter of her life with a career as a caregiver. After doing a lot of networking and research with caregivers in the field, she decided that *Sequoia Senior Solutions* would be a great place to work. She just had her second year anniversary and feels she made a great career choice.

"There is a need in Sonoma County for caring and loving caregivers. I have been blessed with wonderful clients that have resulted in friendships with my clients and their families...I know in my heart that I have made a difference in their lives," said Kathy, about the rewards of a career with *Sequoia Senior Solutions*.

PRESIDENT'S WELCOME

Welcome to our Spring/Summer 2008 newsletter. I am thrilled to inform you that *Sequoia Senior Solutions* has become the largest In-Home Care company in the North Bay Area. Our acquisition of Home Care Options, our former competitor, was completed on October 1, 2007. The transition was relatively fast and smooth. Thanks to the acquisition, we now have a much larger pool of incredible caregivers and clients. I wish to thank both caregivers and clients for the patience they have shown while we worked on blending the two companies. We now provide service to Sonoma, Mendocino, Napa, Lake, and Marin Counties.

A larger company requires, of course, new positions. I am pleased to announce our new management team which is composed, other than Stan and myself, of: Naudia Ibanez, Director of Human Resources; Marilyn Barnes, Marketing Manager; Beverly Sciamanna, Area Manager for South Sonoma County and Marin County; Kelli Jones, Area Manager for Napa and Lake Counties; Shirley Saraga, Area Manager for North Sonoma County and Mendocino County; and Jamie Mendonca, Office Manager.

Our Area Managers assure that our clients receive the best possible care and that our caregivers receive the support they need. However I still visit periodically, with or without our Area Managers, and I am always available by phone.

Giving back to the community

We at *Sequoia Senior Solutions* have been involved with senior services organizations in Sonoma County ever since our company started. Our CFO, Stanton Lawson, has been Treasurer of the Community Health Foundation of Greater Petaluma since 2004, and was recently elected President of the foundation, a position he loves immensely.

Sequoia Senior Solutions will be sponsoring the Memory Walk this year. It is the major fundraising event for the Alzheimer's Association and will be held on October 18, 2008 at Shollenberger Park in Petaluma. We will have our own team and encourage you to walk with us in support of this great cause.

Sequoia Senior Solutions is once again the proud sponsor for the 2007-2008 Season of the Santa Rosa Concert Association (www.srconcert.org). Please visit their site or call us for tickets. Every year we enjoy the music of incredibly talented musicians from around the country and the world. We are expecting to see many more great artists in the upcoming season.

Have a great season and thank you for being part of our family.

Best wishes,
Gabriella Ambrosi
President & CEO
Sequoia Senior Solutions



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FINANCE & CONSUMER RESOURCES

WHEN YOU ARE STRUGGLING WITH MORTGAGE PAYMENTS

Many borrowers are struggling to make their mortgage payments. It may be because they were attracted to an adjustable rate mortgage (ARM) that at first had affordable monthly payments. Now that the interest rate has adjusted upward, the only direction most ARMs are headed these days, the homeowner can't make the new higher payments. They may have been manipulated into a loan they cannot afford to repay. Whatever the promises that the loan was right for them, too many homeowners now feel that they are drowning in debt and at risk of losing their homes.

Save Your Home

Here are some steps you may be able to take to help you can keep your home:

- If it is not too late, refinance. Try to refinance your mortgage with a reputable lender to get out of zero-interest or ARM loans into a fixed interest loan. Ask if you are eligible for a Federal Housing Authority (FHA) insured loan. FHA lenders are required to follow foreclosure prevention procedures designed to assist homebuyers in keeping their home through rough times.
- Talk to your lender, the sooner the better. They may be willing to work with you set up a new payment plan that you can live with. It will be easier to negotiate before you get too far behind.
- Talk with a credit counselor. Good counselors should sit down with you—preferably face-to-face—to help you work out a budget and find ways to manage your mortgage payments.
- Talk with a housing counselor. HUD supported housing counseling agencies provide free assistance about how to keep your home out of foreclosure.
- Sell and downsize. This may sound painful but you can try to sell your home, pay off the mortgage and use your remaining equity to purchase a more affordable place to live.
- Consider bankruptcy. Talk with a bankruptcy lawyer to find out if bankruptcy might be the better way to save your home.

Watch for False Help

Watch out for predators who want to take advantage of homeowners who are falling

behind in their payment or are at risk of foreclosure. According to the National Consumer Law Center, foreclosure rescue scams come in at least three versions:

- Phantom help: The “rescuer” charges outrageous fees for a few phone calls or some paperwork that the homeowner could easily do, none of which results in saving the home.
- The lease/buy back: In this scam, homeowners are deceived into signing over title with the belief that they will be able to remain in the house as a renter and eventually buy it back over time. The terms of these scams are so onerous that the buy-back becomes impossible, the homeowner gets evicted, and the ‘rescuer’ walks off with most or all of the equity.
- The bait-and-switch: The homeowners think they are signing documents to bring the mortgage current, but instead actually signing over the deed to their home. They usually don't even know they've been scammed until they're evicted.

Reprinted from the AARP website:
www.aarp.org/money/wise_consumer/financinghomes/above_water.html



ROTATING TOPIC

CONTROL OVER WHAT YOU VALUE MAY CONTRIBUTE TO LONGEVITY

What is your role in the world? Are you a wife, a husband, a parent or grandparent? Those are all roles which make us feel valuable. A research study has found that older adults who feel they have control over roles they value live longer than those who don't.

This University of Michigan study was based on results from 884 older adults showed having control over such roles appears to be more important to people as they age than feelings of control over life as a whole.

All participants were initially examined

and given a statistical rating of their health status based on self-rated health, serious chronic illness, and functional disability. The participants were then asked to choose three roles they valued the most in their lives and rank order them.

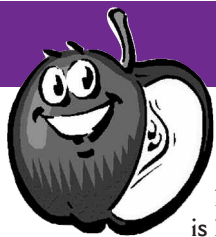
Parenting, grandparenting, other relative roles, friend, homemaker, provider, voluntary worker, church or club member were chosen as the top roles. The participants were also asked about their feelings of control over life as a whole.

The participants who scored higher on hav-

ing a sense of control over the role that was most important to them, were more likely to be alive at the 6 and 7 year follow-ups. Those adults who scored lower were more likely to have behaviors such as drinking alcohol, smoking or they were obese, all risk factors for premature death.

Older people are more likely to live longer if they are able to maintain a sense of control over the role that is most important to them, said the authors. Those with feelings of control over their most important

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SENIOR HEALTH & LIFESTYLES

QUIZ FOR HEALTHY AGING

1. As long as your body is healthy, you'll lead a long and healthy life.

False. To ensure your well-being, pay attention not only to your physical health but also to your mental and emotional health. It's important to stay strong emotionally through connections with your community and your friends and family. Strong relationships with your partner or family can motivate you to take care of yourself—to eat right, exercise and get regular medical care.

2. Losing weight without trying is a good thing.

False. Unintentional weight loss shouldn't be celebrated—it should be a reason to make an appointment with your doctor. In older adults, weight loss without effort can be a sign of worsening health. Losing more than 5 percent of your body weight over a year could be a sign of a problem, including: problems with your medications, depression and other emotional problems, loss of appetite, problems with your teeth, dementia, difficulty eating and digestive issues.

3. If you're over age 65, you should refrain from exercising to preserve your strength.

False. Exercising every day can significantly reduce your risk of dying prematurely. It can also cut your risk of depression, osteoarthritis, some kinds of cancer and broken bones. Strengthening your leg

muscles reduces your risk of falling. You can begin exercising at any age, even if you've never exercised before. Many exercise centers have programs for those over age 65, which they can tailor to your capabilities. If you haven't exercised much in the past, see your doctor before doing anything more vigorous than walking.

4. Whether you end up sickly in your later years is largely determined by your genes.

False. Your genes enter into only about one-quarter to one-third of the aging process. The rest of the effects of aging can be traced to your lifestyle, environment and chance. For instance, if your father and grandfather both died young of heart attacks, you may be inclined to believe the same fate awaits you.

Although you may have a genetic tendency toward heart disease, your diet, exercise, blood pressure control, medications and tobacco use play a significant role in whether you actually develop a heart condition.

5. As a senior citizen, you don't need as much sleep as when you were a younger.

False. Your need for sleep remains fairly constant throughout most of your adult life—most adults need seven to nine hours of sleep. However, aging can cause you to sleep less soundly. Between ages 50 and 60, sleep starts to become less restful and insomnia

becomes more common. You may get tired earlier in the evening and wake up earlier in the morning. Napping during the day is one way you can make up for sleeping less during the night.

6. By the time you reach retirement age, it's too late to erase the effects of a lifetime of bad health habits.

False. It's never too late to clean up your act. If you quit smoking, for instance, your circulation begins to improve immediately and your lungs go to work repairing damage. After one smoke-free year, your risk of heart disease, stroke, lung disease and cancer falls. And if you're overweight, losing a modest 5 percent to 10 percent of your body weight can lower your blood pressure and help prevent type 2 diabetes.

7. If you didn't have serious illnesses as a young adult, you don't need to worry about any health problems in old age.

False. Your risk of serious illness depends on your own habits. But, in general, your immune system weakens as you age, making you more susceptible to disease.

You may be one of the lucky ones who never has to contend with any serious health problems, but don't gamble with your health. You still need to see your doctor for an annual checkup. Preventive health screenings can help your doctor detect disease early—when it's easiest to treat and least likely to pose a threat to your longevity.

Reprinted from www.mayoclinic.com/health/anti-aging/QZ00015

role were less likely to engage in unhealthy behavior and suffer a premature death than those who felt that they did not exercise much control over the role that was most important to them. Feeling of control over the second and third most important role did not appear to affect longevity.

Implications To Seniors and Caregivers

The findings in this study seem to support the feelings of many health professionals that attitude can affect good health and longevity as much as any other factor in a

person's life. Additionally, caregivers should try to help seniors to maintain that control by allowing them as much independence as possible. Health professionals should recognize that each person is unique in what they value in life, and how much control they feel they have. They also need to realize that a senior who adopts any sort of destructive behavior may have suffered a loss that has affected their feelings of control.

Interventions can be targeted at helping the senior regain those feelings of control

or focusing on an additional role where they feel in control. For the senior who has had a role as primary caregiver to an ill spouse, the death of that spouse may spark feelings of losing control.

Intervention would be aimed at helping the senior regain control in that role. Activities such as volunteering to work with hospice patients would be a great way to regain a sense of worth and control in a role there are comfortable with.

http://seniorhealth.about.com/od/mentalemotionalhealth/a/life_control.htm



SPOTLIGHT ON CAREGIVERS

NATIONAL FAMILY CAREGIVER SUPPORT PROGRAM

Families, not social service agencies, nursing homes, or government programs, are the mainstay underpinning long-term care (LTC) for older persons in the United States. More than 22.4 million persons are informal caregivers, providing unpaid help to older persons who live in the community and have at least one limitation on their activities of daily living.

These caregivers include spouses, adult children, and other relatives and friends. The degree of caregiver involvement has remained fairly constant for more than a decade, bearing witness to the remarkable resilience of the American family in taking care of its older persons. This is despite increased geographic separation, greater numbers of women in the workforce, and other changes in family life. Thus, family caregiving has been a blessing in many respects. It has been a budget-saver to governments faced annually with the challenge of covering the health and long-term care expenses of persons who are ill and have chronic disabilities. The economic value of our nation's family and informal caregivers has been estimated at \$257 billion annually.

The enactment of the Older Americans Act Amendments of 2000 established an important new program, the National Family Caregiver Support Program (NFCSP). The program calls for all states, working in partnership with area agencies on aging and local community-service providers, to have five basic services for family caregivers.

These services include:

- Information to caregivers about available services;
- Assistance to caregivers in gaining access to services;
- Individual counseling, organization of support groups, and training to assist the caregivers in making decisions and solving problems relating to their caregiving roles;
- Respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities; and
- Supplemental services, on a limited basis, to complement the care provided by caregivers.

Currently funded at \$155.2 million, this program has served more than 275,000 caregivers nationwide. Efforts regarding NFCSP have resulted in new partner-

ships, improved access to services, outreach to special populations, and provision of services to respond to the unique needs of families.

Eligible Populations

- Family caregivers of older adults
- Grandparents and relative caregivers, age 60 years or older, of children no older than age 18 (including grandparents who are sole caregivers of grandchildren and those individuals who are affected by mental retardation or who have developmental disabilities)

Who to Contact for Help

AoA supports a nationwide, toll-free information and assistance directory and Web site called the Eldercare Locator, which can connect older persons and their caregivers with the National Aging Services Network. Older persons and caregivers can call the Eldercare Locator toll-free at 1-800-677-1116 or visit www.eldercare.gov.

Reprinted from www.aoa.gov