

FLORENCE from page 1A

She showed the Wastewater Fund on page 12 of the report and related it to Public Works Director Mike Miller's presentation on three upcoming utility projects. Money from that fund, as well as wastewater system development charges, will fund those projects.

"One of the capital projects that was anticipated for the year is this sewer extension project. You can also see that we have not spent as much as we thought we would," Reynolds said. "We thought we would have this project a little further along this year than it is actually playing out."

The council first heard about the Highways 101 and 126 Utility Projects in August, as city staff were already working on plans to extend water and wastewater facilities on the highways. Those projects are now coming together, with a public hearing scheduled for the formation of a reimbursement district on Highway 101.

"You can see that in the capital outlay, there is a budget for \$1.199 million, and we've only spent about \$380,000 in wastewater. By the time you get to the next year end, on June 30, 2019, you'll see that project spent out based on the timeline presented to you," Reynolds said.

City Councilor Ron Preisler thanked Reynolds and city staff for their work on the project report.

Mayor Joe Henry said, "We're under budget, so that's always a good thing."

After the planned public hearing on the reimbursement district, the bidding and construction timeline will be solidified on the three separate utilities projects, with construction scheduled to take place early in 2019.

"The (wastewater expansion) project that Mike spoke about will include five annexations of properties that are looking to grow and add to our city, for both commerce and residence," Reynolds added. "They see the potential, and there is a lot of excitement out there, on both sides of the highway. ... Our city is growing, and it is growing at a pace that makes sense for Florence."

In addition to these annexations, two other requests to join the city have come in, making it seven new properties annexing into the city. All the properties are going through the Planning Commission process.

The City of Florence will begin the audit on the preliminary report this month, with the Florence City Council expected to approve the report in December.

For more information, visit ci.florence.or.us.

HEALTHCARE from page 1A

"They're just checkups to go in, see their vital signs," Martin said. "See how everything's going. Make sure the house is in good shape, if there are any problems I see."

If the program is successful, it could become a permanent fixture in the Siuslaw Region. Other areas, such as Eugene, are closely monitoring the Mobile Integrated Healthcare program to see if it can be integrated into their own healthcare system.

How the program chooses patients begins at a daily morning meeting at PeaceHealth Peace Harbor, where patient discharge planner and medical social worker Mary Anne Carter goes over the roster of current patients with Martin.

"We have a daily worksheet and we print out patients every day," Carter said. "We have categories that are important to us, such as if they were readmitted. We try and focus on COPD (chronic obstructive pulmonary disease), diabetes, heart failure. Those are the ones that seem to have the most return to the hospital, especially COPD. They're at the home, they can't breathe, they start to panic, they can't breathe even more, they go into the ER."

Carter said that they do have a home health agency that can help, but its time is limited.

"Chris is like a free agent," Carter explained. "He has the option to just go in there, sit and talk with them. Develop that rapport that makes them comfortable, so they don't come rushing to the ER. Statistics have shown that patients who return to the ER frequently, it's traumatizing for them. It's really better to keep them at home, unless it's an emergency. Of course you come to the hospital then. But an emergency room is very traumatic for an elderly person."

Martin added, "And some patients are afraid to go into the hospital because they're afraid they won't come out of the hospital. This way, I can go out there and talk to them in their home and assure them."

After Carter, Martin and other healthcare professionals at PeaceHealth choose which patients are best suited for the program, the program inquires if the discharged patient is willing to meet with Martin. A visit from the Mobile Integrated Healthcare Program is not mandatory, with patients having the final say if Martin visits or not.

"Sometimes they don't want me to come out, and sometimes they do," Martin said. "It just depends. It's frustrating at times, because I can help them, but they're not accepting the help."

Carter explained that the patients who primarily use Martin's services are very private.

"The retirees worked hard to get where they are, and they're very independent," she said. "To depend on somebody is giving up some of their freedoms, and they don't give in easily. People think that we're going to come into their home and take away rights, say, 'You can't live here.' They really feel like we're infringing on their independence, and that we're going to take it away from them. But, that doesn't happen with us."

Most who have opted for the program have ended up appreciating it.

"It took us two months to see this one person," Martin recalled. "She ended up loving it. She came in bragging about it at a community meeting."

While the group has yet to gather exact statistics on the program's efficacy, anecdotal evidence points to a drastic decrease in readmissions since the program began.

"You can see the readmissions were higher last year than they are now," Martin said. "Having a true number, I can't have that. I've had 400 visits, though."

It's impossible to say if the program prevented 400 hospital visits, but if it had, the savings to the hospital could be worth millions, since the average ER visit costs \$8-10,000, according to Martin. Four hundred ER visits could cost up to \$4 million.

Insurance companies save money in covering costs, and patients save money in copays.

David saw the high cost of healthcare when he went into the ER for salmonella, which he nearly died from.

"I was so sick," he said. "I thought, you know, how much is an old guy's life worth? I really thought that, especially when I got the bill later from the hospital. \$178,000. I told Pat. She thought I was kidding. Seriously, I thought I wasn't worth that at my point in my life. I was 75."

"I've changed my mind now. I'm going kicking and screaming."

"A LITTLE UNDERCOVER WORK"

As Martin drove to David's house for his checkup, he went over what an average home visit consists of.

"They're usually anywhere from 20 to 90 minutes," he said. "The first visit is always the longest, as we go through their medications and make sure they don't have questions about the medications. Why they're taking it, how long they're taking it. If they have any equipment, they can ask me how to use it, how to clean it. All of that takes a lot of time."

He also does a thorough inspection of the house, ensuring a safe environment: Handrails are secure, rugs are not slippery, make sure the steps aren't creaking and crackling.

"I've found smoke detectors that aren't working," Martin said. "Get those replaced, talk to the fire department so they can go out there and get them replaced through a program they have. That's up to 25 detectors that I've found. People don't have fire extinguishers in their home, so I go out and get one, show them how to use it. Make sure they have food there, and that they're eating the right type of food. Make sure the house is clean."

For subsequent visits, Martin does the usual round of checkups, taking the patient's vitals, and answering any questions.

"When you're in the hospital, there's so much going on and you just want to go home," he said. "And with everyone talking to you, it's possible you still don't understand. Or sometimes they forget to ask a question. They can ask me. If I don't

know the answer, I can get it." Sometimes Martin visits a patient just once, but the majority see him four or five times.

"There are some people that are probably around 40 visits," he said. "But whenever I stop seeing them, they're coming back to the ER. And so, we found that if I spend 30 minutes of my time, I can prevent them from coming to the ER when it's not needed."

Right now, Martin is seeing anywhere from 45 to 60 patients, visiting around five a day. During his 10-hour shift, he also helps fill in the gaps in the healthcare system.

"I've really helped palliative care a lot," he said. "Really helping Home Health out when they're falling behind. The Care Coordinators will call, having concerns with a patient that they can't get a hold of. Or some lab was out of whack and they can't get a hold of them. They'll call me, and I'll go out there and talk to them."

The vehicle he drives is rather nondescript; one would never know a patient is getting a visit from the hospital.

"The original plan was to show up in an ambulance, but people get panicked, wondering if someone is hurt," he said. "It attracts too much attention. You have to do a little undercover work."

"QUITE A LITTLE BOND"

Then it was back to the walking questions.

David described walking down to the end of the street, his normal loop that runs about a mile. But he hadn't been to the gym in a week. Then he started walking around as Martin watched. While he didn't use his canes, he was still able to get up, but he was noticeably uncomfortable walking.

"Even walking over here, you're still off balance a little bit," Martin said.

When David first Martin, he could hardly get out of bed. David was in the ER the previous night and was still groggy in the morning.

See **HEALTH CARE** page 10A

Cindy Wobbe Estate Sales

ESTATE SALE

83565 Woodland Lane

(off Clear Lake Rd. in Dunes City)

October 12 & 13, 9am to 3pm

3-level home liquidation. Quality furnishings, leather sofa, queen & full beds, dressers/nightstands, lots of small kitchen appliances from a chef's kitchen, numerous household goods, assorted medical equipment, outdoor furniture & potted plants, garage FULL of camping gear, fishing items, holiday decor, yard tools, and a whole lotta miscellaneous. A full and interesting estate! Please note that there is no wheelchair access; home is not accessible for those with mobility challenges.

Everything must go!
All Sales Final / Credit Cards Accepted
View online photos at

www.CindyWobbeEstates.com

Ring 541.999.0126

ONE DAY SEMINAR
Basics of Selling on Amazon.com

October 27th, 8-5pm • Florence Events Center

Register with required deposit* at: www.LearningToSellOnAmazon.com

Presented by Florence resident Phillip Ebner
20 years selling online and masters degrees in business and organizational psychology.

- Topics include:**
1. How to startup a business online
 2. What to sell and where to find it
 3. Costly mistakes to avoid (This alone is worth many times the cost of the seminar)
 4. How to get started for \$500 or less.

Bring notebook computer or tablet and basic computer operations is pre-requisite.
Smartphone highly recommended. For more info, 541-997-1964

*\$99 non-refundable deposit required to register,
\$100 balance is due by Oct. 12th. Total payment \$199 required after Oct 12th, space availability.

The best kept secret in Florence, also has the best view of the Bay and Siuslaw River in town.

The Bay View
B I S T R O



Located in the Best Western Pier Point Inn
85625 Highway 101, Florence • 541-997-7191

BERKSHIRE HATHAWAY
HomeServices

Northwest
Real Estate

**The Top Choice in
Florence Real Estate.**



Let your next home find you!

HomeFinder Reports

Receive our automated HomeFinder Report, with

- Rapid updates of all new listings and price changes
- Interactive mapping with satellite images
- Price reductions clearly displaying \$ and % changes
- Complete listing details, including addresses
- Active inventory by price range

View all our active listings in Florence at
[www.RealEstateFlorence.com!](http://www.RealEstateFlorence.com)

Or give us a call at (541)997-6000
and we'll do the searching for you!



FEATURED LISTING
3356 sqft home on 3.51 acres, lake access. Approx. 32x56 RV barn w/ upstairs storage. 3+ car attached garage, bonus room/studio fully furnished with 1/2 bath. Landscaped w/pond.
3 Bdrm, 4 full, 3 partial bath, 3356 sq ft
\$825,000 BH7729 ML#18280268



NEW LISTING
2 acres of peacefulness. Community dock & boat access. Approximately 191 ft of paved road frontage. May be lake view. If you can dream it, you can build it.
\$109,900 BH7767 ML#18419852



FEATURED LISTING
Enchanted Valley community dock on beautiful Mercer Lake. Build your dream home
.77 acre
\$39,000 BH7568 ML#17341221



FEATURED LISTING
KlaHaNee, 2 tax lots 1700 & 1800. Each lot approx. 35' x 76.11 ft. Plan for the future when City Services are available. Possible Ocean Views
\$65,000 BH7598 ML#17657102



NEW LISTING
Ranch home borders Ocean Dunes Golf Links. Lots of room for RV parking & additional toys. Large private backyard and circular driveway
3 Bdrm, 2 Ba 1816 sq ft
\$219,900 BH7768 ML#18094037



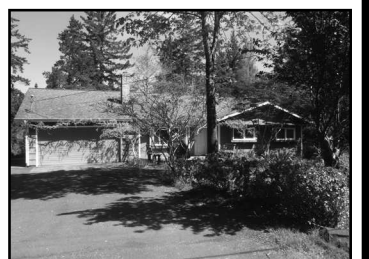
PRICE REDUCED
Great home with adorable studio. This home is neat & clean, has 12x16 addition, vinyl siding. Studio has loft & heat. Corner lot, park-like backyard, ample parking
2 Bdrm, 2 Ba 1272 sq ft
\$205,000 BH7720 ML#18101435



FEATURED LISTING
Full time living or vacation get away? Spacious living area, great kitchen, dining area & breakfast room, fireplace in living room. Close to Sutton Lake boat launch, dunes & Ocean
2 Bdrm + den, 2 Ba 1296 sq ft
\$195,000 BH7765 ML#18078503



NEW LISTING
Riverfront ranch with 557' deep water frontage, private registered dock. Home remodeled in 2002 including roof & Hardiplank siding
3 Bdrm, 2 1/2 Ba 2025 sq ft
\$645,000 BH7755 ML#18126022



FEATURED LISTING
Mercer Lake area. Beautiful remodeled home, open design, light & bright, double garage, 28 x 32 shop, RV parking & more!
3 Bdrm, 2 Ba 1982 sq ft
\$429,000 BH7680 ML#18344188