Axminster Division Report 6th September

School Transport

As we start a very unusual school term for our young people DCC Education Department has issued a letter to parents regarding travelling safely to school and home on dedicated and public shared transport, where I think it likely that there may be the odd teething problem in terms of capacity, but hope that any of these can be resolved quickly and easily, if needs be by increasing the number of vehicles to do this safely.

DCC Highways

I have now completed the 'Doing What Matters' review with David Ashford, DCC Neighbourhood Highways Officer for the Axminster Division in terms of highways maintenance and drainage etc.

Farm work Welfare App

Given the nature of our mainly rural area this may be of interest to members of the PC where sometimes problems are hidden in plain sight and not always spotted.

The development of an app has been undertaken by the Clewer Initiative and supported by GLAA, NCA, Fresca Group and the Modern Slavery Helpline. The app is called the Farm Work Welfare App (FWWA) and launched in late July.

FWWA is aimed at seasonal farm/rural workers and employers in the food picking, packing and processing sector. It seeks to provide a pocket resource for employers to aid them in strengthening their processes to prevent or identify labour exploitation within their operations, whilst also helping workers to understand their rights, learn what good practice looks like and arm them with the knowledge to identify exploitation. A reporting function is also provided which interlinks with the Modern Slavery Helpline. Content will be available in 8 languages covering the most vulnerable nationalities.

Hospital and healthcare

As we move towards what appears towards a more usual position health care services returning towards pre COVID-19 levels, it is evident that the R, D & E NHS Trust is going have to go a long way to return to where it would want to be for elective, non-elective and clinical surgeries.

The overall position at the R,D & E NHS is far from straight forward in terms of referrals, elective surgery and clinic, allied with other major procedures and not brilliant when compared to 2019.

Put simply COVID-19 and the impact on all sites in the R,D & E footprint has been huge, but because of many less cases in our area staff are now returning to their 'day jobs' in large numbers, which is having a month by month positive impact on the 'metrics' e.g. June had a 31% improvement of referrals over May, but that was still only just over 67% of cases handled in June 2019! Keeping the main site at Wonford fully operational and safe on non COVID and Covid work is a challenge in terms of clinical hygiene and safe staffing levels, with PPE working incredibly exhausting and adversely effecting efficiencies.

The Nightingale Hospital has currently been re-purposed to deal with the cancer referrals backlog, in advance of an anticipated winter spike in demand for a perfect winter storm pressure of flu, COVID-19 and some old people suffering from poor health, particularly during winter, where this is one of the Trusts major clinical priorities regarding early diagnosis and treatment. The Nuffield is currently contracted to do 8 clinics a day on hip replacements (Exeter world class in this field) where the backlog because of this procedure being halted in late March due to risk of post op infection massive and the Trust is working at optimum capacity taking many factors in to account, no least staffing levels.

In summary a case of clinical priorities where progress is being made in all areas, but clearly not quick enough in a system under huge pressure even before COVID-19, but where the big injections of cash and new staff recruitment is definitely helping. I hope out-patient appointments will be quicker to resolve than long term waiting on elective surgical procedures and the paragraph below gives me some cause for comfort, in particular the creation and now implementation of the outpatients hub and a massive technological boost via an intelligent platform patient record system called 'MyCare', which is going live in early October which will improve matters dramatically and quickly (£50m cost and yes, tested and has been running for some time in Exeter and other U.K. Hospital sites which will give the R, D & E a huge advantage over todays position and other Hospital Trusts!!).