

Axminster Division Report 11th January 2021

Happy New Year where I hope this will be a marked improvement of the last one. We are clearly in the eye of the storm right now, but I feel very optimistic about 2021 as a whole year.

The first week or so into January usually has little to report but 2021 is different with this report inevitably focusing on the Covid crisis, where I look forward to a return to more usual matters sooner rather than later.

Covid-19. Infection rates in the UK have been growing rapidly, as have hospitalisations and sadly deaths. Over the last week alone (or the most recent week for which data is available), positive tests have increased by 30%, hospital admissions by 35% and deaths by 45%. A number of hospitals, particularly, but not exclusively in London and the South-East, are reporting Covid-19 patients accounting for more than 50% of occupancy, Intensive Care Unit occupancy in some effectively over 100%, death rates rising and staff on their knees. To describe the scenes we are seeing as distressing is, for me, a gross understatement.

The statistics for Devon are much better (less than half England's average for infections and a quarter of those in London) and, positively, while the more infectious 'new variant' virus is present, the last statistics for Exeter report that it remained at a relatively low 5% or so of infections. The infection rate has been growing rapidly, however, and current statistics do not fully reflect the Christmas holiday break.

The numbers of patients admitted in to the RD&E for Covid-19 patients to date are good, relative to areas of high infection. In the run up to Christmas the numbers across Wonford, our community hospitals and the 'Nightingale Hospital' reduced to around 100 patients and has remained at this level, but we should not take false assurance from this, given that the prevalence of disease in our communities is most likely to result in increased admissions going forward.

Currently there are around 5% of local NHS most valuable resource, ie. the staff, who are either unwell, self-isolating or shielding as a consequence of Covid-19, in addition to our normal sickness rates; 'up-country' this is worse still. This clearly puts added pressure on other colleagues who are able to attend.

The 'get out of Jail' card from the pandemic is a vaccination. The National position is 3 vaccines approved, 2 currently available, including the easy to store/transport AZ/Oxford vaccine, but clearly we are dependent on the delivery of these vaccines in volume. In Devon and across organisations (hospitals, GP practices, care providers, Universities, Local Government, businesses etc) within the county, all have made a huge effort and this effort has been made to ensure we have the staff and infrastructure needed to administer the vaccines we receive safely and expeditiously.

COVID19 Fund. The DCC Covid fund re-opened on Monday the 11th of January to provide flexible resources to organisations working with communities who are clinically extremely vulnerable or disproportionately impacted by coronavirus and the social and economic consequences of this current national lockdown.

Applications can be submitted from 11 January 2021 until 5 March 2021 (please note that the end date could be amended due to the available funding being used up or lockdown restrictions being further extended). Please visit <https://www.devon.gov.uk/coronavirus-advice-in-devon/document/covid-19-fund/> for further details and how to start the application process.

Applications will need to include details of how much funding will be required and how you have assessed the need for that amount.

Grants will typically be between £300 and £700, although, where there is evidence that a project is exceptional, we may enter into discussions with applicants and offer higher awards.

Traffic Flows. It is encouraging that people seem to be adhering to the Tier and lockdown restrictions but arguably not as much as they might be with some interesting statistics on movements below, with a very clear message about the importance of your journey and is it really necessary still very important.

The first few days of Lockdown 3 are around -30% when compared with the equivalent days in the previous year.

Morning Peak Hour flows (7am to 9am) during these days are similar, at around -28%.

As a reminder: -

24hr weekday flows during Lockdown1 (23rd Mar to 10th May 2020) were around -70%

24hr weekday flows during Lockdown2 (5th Nov to 1st Dec 2020) were around -25%

24hr weekday flows after Lockdown2 (early Dec 2020) were around -11%

Therefore, the initial Lockdown3 days have reduced flows from -11% before Christmas to -30% now but still more can be done where people who can work from Home should be working from Home.

'Key dates over festive period and initial Lockdown3 days'

24hr flow compared with previous year

Christmas Eve
Tier3 restrictions
+1%

Christmas Day
Limited socialising restrictions
-11%

New Year's Eve
Tier3 restrictions
-11%

New Year's Day
Tier3 restrictions
-32%

Mon 4th Jan
"Normal" Tier 3 working day
-20%

Tue 5th Jan
Day 1 of Lockdown3
-28%

Wed 6th Jan
Day 2 of Lockdown3
-33%

Thu 7th Jan
Day 3 of Lockdown3
-32%

Lockdown Parking Arrangements. DCC Parking Officers have assessed the situation and propose that enforcement will continue although we will continue to consider if relaxation of any restrictions is required. The priority will be arterial routes and ensuring safe movement of traffic to ensure access to amenities and emergency vehicles as well as enabling access to health care and vaccination sites. Highways teams are working closely with public health colleagues to support the roll out of vaccinations and the team are being updated as centres are identified.

Whilst it anticipated that central commercial areas may be less busy, it is understood that many non-essential shops are now in a position to offer "click and collect" services and the requirement to manage parking remains.

In terms of volunteer support for people requiring help with brief visits in areas with restricted parking, a simple collection / drop off provision at the doorstep with social distancing applied. Therefore, these would be accommodated in normal provisions for loading and unloading. Displaying something in their windows to identify their activity would be helpful.

As we experienced in earlier lockdowns there may be increased parking in residential permit areas where residents are now working from home, if they do not have access to residents parking permits the team will again offer temporary virtual residents permits to assist. For health care professionals, it is felt that current Health & Care Worker Permits or the national NHS Worker Exemption Permit will provide sufficient support.

The enforcement team are mindful that there may be new 'challenges' from members of public on-street who may feel that enforcement should be suspended. Staff are instructed to carry out dynamic risk assessments for each site visited and empowered to leave a location if there is a threat or if social distancing cannot be maintained. They also have body worn video and lone worker alert devices for their safety.