**August 2024 - DCC Monthly Report**

**Cllr Sara Randall Johnson**

August is relatively a quiet month for many non-urgent DCC operations as staff take their own holidays and take the opportunity to catchup with Family and Friends.

However, it is still very busy in many parts of the Organisation in what is effectively a 7 day working week for many services of the Council with the population temporarily increasingly in large numbers during the school holidays, not only doing essential work but also supporting organisations like the Police and Fire service, as and when needed.

**Hospital waiting lists at the ‘Royal Devon’ Hospital**

I’m sure we are all acutely aware of the pressures on the NHS, both locally and nationally, particularly in reducing waiting lists for planned or elected procedures.

The Royal Devon University NHS Foundation Trust, which includes the main Wonford Hospital have made significant progress in reducing elective and cancer waiting lists, and in seeing patients more quickly in both urgent and emergency care ‘pathways’, including in the community. In 2023/24 the Trust was

* recognised as one of the fastest improving trusts in England for reducing elective waiting times
* provided over a million outpatient appointments and nearly 87,000 patients came in for a procedure and went home the same day
* reduced the number of cancer patients waiting longer than 62 days for treatments to 5% - within a year we had 101 fewer patients waiting this long
* nearly halved the number of patients waiting for 52 weeks to start treatment, 3401 fewer patients than in March 2023
* supported all patients who had waited 104 weeks or more to start treatment – now there are no patients waiting this long
* responded within two hours in more than 90% of cases needing urgent care response in the community
* saw 80% of people in our emergency departments within four hours (March)
* were in the top 10 of most-improved health trusts in the country for urgent emergency care waiting times

It is recognised that people are still waiting too long and some of the most challenging waiting lists are in orthopaedics and cardiology services. The Trust is already carrying out significant work to improve waiting times in these specialties, and has made great progress in ophthalmology, which was one of the most challenging waiting lists a year ago.

The Chief Executive Officer of the Trust Sam Higginson recently said

“There is much more work to do, and as we continue into 2024/25 in a changing national context we will move forward with momentum from what we achieved together last year. We await guidance from the new Government about their priorities. In the meantime, I’m looking forward to seeing some of our projects complete, and in a year’s time I hope I can write to you with some positive news”.

**DCC Highways**

Last month I reported on increased activity with repairing potholes and patching work and I’m pleased to report that work continues apace with some suitable weather helping significantly.

White lining will focus on remarking mini-roundabouts and zebra crossings across the whole of the County. DCC has recently begun substituting traditional Thermoplastic markings with Methyl methacrylate (MMA) Cold Applied Materials for a bulk of the road marking schemes across the county. To support the advance in material technology, a state of the art road marking machine is now operational on Devon’s highway network. It is the first of its kind in the UK, with less than five operational worldwide and these machines are major advancement in road markings lasting longer, meaning resources can be uses elsewhere on the network.

This ground breaking technology presents multiple benefits, notably an impressive 86% reduction in CO2e emissions compared to conventional delivery methods. Moreover, it prioritises safety for both road users and the workforce responsible for applying the markings. Additionally, by bolstering durability, it effectively reduces disruption on the Devon highways network, culminating in a significant 17% ‘whole life’ cost saving over a 10-year investment period.

**Extra support for young children**

A large amount of the Devon County Council budget is invested in children’s services; not least, education and giving them the best possible start in life including those with special educational needs and disabilities (SEND).

A pilot, aiming to make the transition from pre-school learning to primary school as easy as possible for children with special educational needs and disabilities (SEND), has been successful and will run for another year.

We heard from parents about how challenging that transition period is, moving from pre-schools where they felt that staff understood their children’s needs and where their children felt included and supported, to primary schools that were unfamiliar and that sometimes, despite best intentions, had fewer resources to meet the needs of every child.

Professionals who work with families say that transition times are particularly difficult for parents and children with complex needs. We asked them to identify 100 children who were due to move up to primary schools the following academic year who would most benefit from the pilot. They identified children in 39 schools who they felt would struggle the most with transition, some of whom were at risk of being excluded due to social and emotional needs. None of the children on the project had Educational Health and Care Plans (EHCPs).

The schools were given additional support from the Early Years Consultants for a period following the child’s move. This included visits to schools, observations with the children, reviewing the learning environment and further planning. A small team of Educational Psychologists provided additional support, and some schools were given a small amount of funding to pay for additional support and resources needed to have maximum impact on the child’s inclusion and progress.

With wrap-around and individual support over that period, the transitions were a less stressful, much more positive experience for pupils, parents and staff and is allowing some children to remain in the mainstream, rather than going to special schools that are not always close to home.

ENDS