

## **Dr Rodney P Jones (ACMA, CGMA)**

### **Statistical Advisor**

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Rod has a B.Sc. (Hon) in Microbiology/Biochemistry and a Ph.D. in Chemical Engineering; is a chartered management accountant (ACMA, CGMA) and has completed the Hewlett Packard course in Total Quality Management. His career outside the NHS covers 7 years in academia (Biochemical Engineering) and 10 years in industry as a group process development engineer for blue-chip FMCG plc's and as general manager of an international laboratory proficiency testing organisation.

He has over 25 years' experience in healthcare (commencing as Assistant Director of Information at the Royal Berkshire Hospital) both within the NHS and as an independent consultant covering Acute & Community involving Finance, Information, Contracting, Commissioning, Performance Management and Service Planning.

Healthcare Analysis & Forecasting (HCAF) was established in 1995 with clients including Trusts, PCTs, SHAs, Prudential and Glaxo plc. A disease management study in gastrointestinal bleeding & ulcers won an international award within Glaxo plc. In 1996, he completed a review of bed requirements for the Royal Berkshire Hospital. The forecast bed numbers were contested by the local health authority and a smaller hospital was built. The Trust eventually submitted a further business case (due to chronic bed shortages) to bring bed provision in line with the original forecast.

During 2001/02 he was involved in the Hospital Operational Intelligence Project (HOIP) investigating best practice in the use of operational intelligence to match capacity with demand. He was Statistical Advisor to the Thames Valley Strategic Health Authority from its inception, has provided support to the Met Office Health Forecasting Unit and provides advice to a range of private and public health care organisations.

Rod has developed unique expertise in:

- Forecasting demand and capacity planning
- Forecasting emergency admissions and bed demand (including maternity)
- Optimising hospital bed pools
- Evaluation of apparent excess levels of acute intervention
- Limitations of the HRG tariff and the adequacy of Trust costing & pricing processes
- Statistical stress testing of the assumptions behind business cases

His research has led to the development of many innovative and new methods for understanding the operational and financial challenges in healthcare. He is the author of hundreds of papers, articles & reports, is an invited speaker at national conferences, is a member of the editorial board of the British Journal of Healthcare Management and runs a regular feature 'Money Matters' which investigates the application of statistical methods and trend analysis into the understanding of how costs behave in the real world of health care. While not an academic his Research Gate score places him in the top 5% of researchers and academics worldwide.

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## Recent Projects (2011 to 2017)

- A review of international comparisons in critical care bed numbers
- Capacity planning, bed requirements, analysis of social groups over-utilizing critical care and A&E for a large London tertiary hospital
- Inpatient Capacity planning for a University Hospital and assisting clinicians with medical research
- An audit of patients who died for a University Hospital
- Member of the Mortality Review Group for a University Hospital
- Capacity planning, review of activity trends, bed requirements for a large NHS FT
- A review of bed requirements and medical admissions at an NHS FT
- Activity forecasts for a CSU to triangulate CCG commissioning plans
- Analysis of diagnostic demand and flows to alternative sites for a private diagnostic provider company
- Analytical support to another consultancy company covering a review of unscheduled care across four PCTs
- Analysis of GP in a car diagnosis of patient contacts and calculated cost savings for a CCG
- Analysis of unbundling of diagnostic costs and cost savings for a private provider
- Analysis of cancer demand and flows to tertiary sites for a Cancer Network
- Trends in medical admissions and medical bed requirements for an FT
- Trends in outpatient demand for an FT
- Alternative tariff costs for a medical assessment unit supporting a bid by a large private provider

## Prior Projects (1995 to 2010)

- A review of bed requirements for a large Australian tertiary hospital
- Analytical support to a series of reviews of elderly services for PCTs and an SHA
- Analysis of costs within HRG covering cancer services for a cancer network
- Review of bed requirements for two outer London hospitals
- Forecast day surgery capacity required for a new day surgery unit at an FT
- Support to a SHA regarding assessment of financial risk implied in PCT commissioning plans
- Calculation of additional beds required to support single sex accommodation for an FT
- Forecast outpatient & inpatient attendances (NHS & private) at a proposed new community/acute site
- A review of maternity beds and costs at a number of hospitals
- Forecasts for births at local authority level for a PCT
- A review of specialty bed pools at a Foundation Trust hospital
- A capacity planning tool for a Foundation Trust hospital
- A review of hospital reference costs and resulting LDP challenge for a group of three PCTs
- Analytical support to the Marie Curie end of life DCP care project
- Financial risk in healthcare purchasing
- A review of hospital counting & coding for a consortium of eight PCTs
- Supporting analysis for a community hospitals review
- Financial & operational analysis for early achievement of 18 weeks in NHS South Central
- A review of admission rates for two PCT's using OPCS procedure codes
- Detailed small area analysis of admissions sensitive to primary care intervention for a PCT
- Analysis of financial pressures at Isle of Wight Healthcare due to conflicting assumptions within the national tariff and the capitation formula

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- Support for Specialist Commissioning at an SHA
- Modelling of activity required for next years contract for two PCTs
- Specialty-specific costs in the NHS HRG tariff and implications to perceived efficiency.
- A review of alternative sites for a new hospital using small area geo-demographic modelling. Some 35 alternative configurations including acute and satellite sites were evaluated.
- Forecast shortfall in admissions at two Independent Sector Treatment Centres based on travel time and competition with other sites.
- A review investigating methods the extent of abuse of the definition of ‘day case’ across English providers for a SHA.
- Detailed support to the LDP process at South Central SHA
- Detailed support to the LDP process at Thames Valley SHA
- Advise on the limitations of various DH capacity & demand models to enable the SHA to give a measured response.
- A review of outpatient to inpatient conversion rates for GP practices in a SHA.
- A review of admission rates across Thames Valley SHA using small area geo-demographic methods.
- Analysis of demand and capacity at Orthopaedic departments supporting a system-wide review of Orthopaedics.
- Statistical support to the TV SHA review of Paediatric deaths at the ORH
- Analytical support to the TV SHA community matrons project
- Analytical support to a review of healthcare services in Hertfordshire
- Capacity planning support to acute trusts (multiple sites)
- Review of bed requirements (multiple sites)

## Healthcare Publications

**From the start of 2016 publications are on the web server but not the website. Click on the url and you will be able to locate a draft version. For Open Access papers copy the DOI into an internet search and you will be directed to the published paper. Open Access papers can be freely distributed.**

All *British Journal of Healthcare Management (BJHCM)* articles can be downloaded using an NHS Athens login on the *BJHCM* website: [www.BJHCM.co.uk](http://www.BJHCM.co.uk)

**Understanding Emergency Admissions & Unscheduled Care (<http://www.hcaf.biz/emergencyadmissions.html>)**

Jones R (1997) Emergency admissions: Admissions of difficulty *Health Service Journal* 107(5546): 28-31  
 Jones R (2009) Trends in emergency admissions. *BJHCM* 15(4): 188-196.  
 Jones R (2009) Cycles in emergency admissions. *BJHCM* 15(5): 239-246.  
 Jones R (2009) Emergency admissions and hospital beds. *BJHCM* 15(6): 289-296.  
 Jones R (2009) Emergency admissions and financial risk. *BJHCM* 15(7): 344-350.  
 Jones R (2010) Emergency preparedness. *BJHCM* 16(2): 94-95.  
 Jones R (2010) Forecasting emergency department attendances. *BJHCM* 16(10): 495-496.  
 Jones R (2010) Gender ratio and hospital admissions. *BJHCM* 16(11): 541.  
 Jones R (2011) Cycles in gender-related costs for long-term conditions. *BJHCM* 17(3): 124-125.  
 Jones R (2012) Gender ratio and cycles in population health costs. *BJHCM* 18(3): 164-165.  
 Jones R (2013) Is the demographic shift the real problem? *BJHCM* 19(10): 509-511.  
 Jones R (2013) Trends in elderly diagnoses: links with multi-morbidity. *BJHCM* 19(11): 553-558.  
 Jones R (2013) The funding dilemma: a lagged cycle in cancer costs. *BJHCM* 19(12): 606-607.  
 Jones R (2014) What is happening in unscheduled care? *Journal of Paramedic Practice* 5(2): 60-62.  
 Jones R (2014) Forecasting conundrum: a disease time cascade. *BJHCM* 20(2): 90-91.  
 Jones R (2014) Unexpected changes in outpatient first attendance. *BJHCM* 20(3): 142-143.  
 Jones R (2014) Long-term cycles in admissions for neurological conditions. *BJHCM* 20(4): 192-193.  
 Jones R (2014) Untangling the A&E crisis. *BJHCM* 20(5): 246-247.  
 Jones R (2014) Trends in admission for allergy. *BJHCM* 20(7): 350-351.  
 Jones R (2015) Forecasting medical emergency admissions. *BJHCM* 21(2): 98-99.  
 Jones R (2015) Estimating acute costs. *BJHCM* 21(3): 152-153.  
 Jones R (2015) Understanding growth in emergency admissions. *BJHCM* 21(4): 195-197  
 Jones R (2015) A&E tipping points. *BJHCM* 21(6): 248-249.

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- Jones R (2015) Exploring trends in demand for urgent care. *Journal of Paramedic Practice* 7(10): 486-488.
- Jones R (2016) The unprecedented growth in medical admissions in the UK: the ageing population or a possible infectious/immune aetiology? *Epidemiology (Sunnyvale)* 6(1): 1000219 <http://dx.doi.org/10.4172/2161-1165.1000219>
- Jones R (2016) Rising emergency admissions in the UK and the elephant in the room. *Epidemiology (Sunnyvale): Open Access* 6(4): 1000261 [doi: 10.4172/2161-1165.1000261](http://dx.doi.org/10.4172/2161-1165.1000261)

### Forecasting & Understanding Demand (<http://www.hcaf.biz/forecastingdemand.html>)

- Jones R (1996) Estimation of annual activity and the use of activity multipliers. *Health Informatics* 2, 71-77.
- Jones R (1996) How many patients next year? Healthcare Analysis & Forecasting, Camberley, UK.
- Beauchant S, Jones R (1997) Socio-economic and demographic factors in patient non-attendance. *BJHCM* 3(10): 523-528.
- Jones R (2000) Outpatient appointments: Feeling a bit peaky. *Health Service Journal* 110(5732): 28-31.
- Jones R (2001) Outpatient Appointments: A pretty little sum. *Health Service Journal* 111(5740): 28-31.
- Jones R (2001) Outpatient waiting times: Quick, quick, slow. *Health Service Journal* 111(5778): 20-23.
- Jones R (2010) Forecasting year-end activity. *BJHCM* 16(7): 350-351.
- Jones R (2010) Forecasting demand. *BJHCM* 16(8): 392-393.
- Jones R (2010) Forecasting emergency department attendances. *BJHCM* 16(10): 495-496.
- Jones R (2011) Death and future healthcare expenditure. *BJHCM* 17(9): 436-437.
- Jones R (2012) Weathering the storm: Birth forecasting in turbulent times. *Midwives Magazine* 15(2); <https://www.rcm.org.uk/news-views-and-analysis/analysis/weathering-the-storm>
- Jones R (2012) Ambulance call-outs and disruptive technology. *BJHCM* 18(2): 112-113.
- Jones R (2012) Are there cycles in outpatient costs. *BJHCM* 18(5): 276-277.
- Jones R (2012) Increasing GP referrals: collective jump or infectious push? *BJHCM* 18(9): 487-495.
- Jones R (2012) Age-related changes in A&E attendance. *BJHCM* 18(9): 502-503.
- Jones R (2012) GP referral to dermatology: which conditions? *BJHCM* 18(11): 594-596.
- Jones R (2012) Trends in outpatient follow-up rates, England 1987/88 to 2010/11. *BJHCM* 18(12): 647-655.
- Jones R (2013) Trends in unscheduled care. *BJHCM* 19(6): 301-304.
- Jones R (2013) Hidden complexity in A&E trends in England. *BJHCM* 19(7): 354-355.
- Jones R (2013) A&E attendance: the tip of a wider trend. *BJHCM* 19(9): 458-459.
- Jones R (2014) Unexpected changes in outpatient first attendance. *BJHCM* 20(3): 142-143.
- Jones R (2014) Expected trends in births and deaths to 2037. *BJHCM* 20(8): 402-403.
- Jones R (2015) Unexplained infectious events leading to deaths and medical admissions. *BJHCM* 21(1): 46-47.
- Jones R (2015) Forecasting medical emergency admissions. *BJHCM* 21(2): 98-99.
- Jones R (2015) Estimating acute costs. *BJHCM* 21(3): 152-153.
- Jones R (2015) Understanding growth in emergency admissions. *BJHCM* 21(4): 195-197.
- Jones R (2015) A&E admissions: where next? *BJHCM* 21(6): 292.
- Jones R (2015) Trends in demand for urgent care. *Journal of Paramedic Practice* 7(10): 486-488.
- Jones R (2016) Recent trends in outpatient follow-up rates. *BJHCM* 22(2): 92-94. [http://www.hcaf.biz/2016/Followup\\_Trends.pdf](http://www.hcaf.biz/2016/Followup_Trends.pdf)
- Beeknoo N, Jones R (2016) Factors influencing A&E attendance, admissions and waiting times at two London hospitals. *British Journal of Medicine and Medical Research* 17(10): 1-29. doi : [10.9734/BJMMR/2016/28783](https://doi.org/10.9734/BJMMR/2016/28783)
- Beeknoo N, Jones R (2016) Using Social Groups to Locate Areas with High Emergency Department Attendance, Subsequent Inpatient Admission and Need for Critical Care. *British Journal of Medicine and Medical Research* 18(6): 1-23.. doi: [10.9734/BJMMR/2016/29208](https://doi.org/10.9734/BJMMR/2016/29208)
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- Beeknoo N, Jones R (2017) The demography myth - how demographic forecasting vastly underestimates hospital admissions, and creates the illusion that fewer hospital beds or community-based bed equivalents will be required in the future. *British Journal of Medicine and Medical Research* 19(2): 1-27. doi: [10.9734/BJMMR/2017/29984](https://doi.org/10.9734/BJMMR/2017/29984)
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- Jones R (2017) Volatility in emergency admissions per death. *BJHCM* 23(11): in press.
- Beeknoo N, Lasoye T, Jones R (2017) Using patient social group to determine admission ratio via the emergency department. *Submitted*
- Beeknoo N, Jones R (2017) Forecasting emergency admissions for capacity and financial planning. *In preparation*

### The Link Between Deaths (all-cause mortality) and Medical Emergency Admissions

- Jones R (2011) Does hospital bed demand depend more on death than demography? *BJHCM* 17(5): 190-197.
- Jones R (2011) Bed days per death: a new performance measure. *BJHCM* 17(5): 213
- Jones R (2011) Bed occupancy – the impact on hospital planning. *BJHCM* 17(7): 307-313
- Jones R (2011) Factors influencing demand for hospital beds in English Primary Care Organisations. *BJHCM* 17(8): 360-367.
- Jones R (2012) Diagnoses, deaths and infectious outbreaks. *BJHCM* 18(10): 539-548.
- Jones R (2013) A recurring series of infectious-like events leading to excess deaths, emergency department attendances and medical admissions in Scotland. *Biomedicine International* 4(2): 72-86.
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- Jones R (2013) Analysing excess winter mortality: 2012/13. *BJHCM* 19(12): 601-605.
- Jones R (2014) Increased deaths in 2012: which conditions? *BJHCM* 20(1): 45-47.

- Jones R (2014) Trends in death and end-of-life costs in the UK. *BJHCM* 20(6): 298-299.
- Jones R (2015) A previously uncharacterized infectious-like event leading to spatial spread of deaths across England and Wales: Characteristics of the most recent event and a time series for past events. *British Journal of Medicine and Medical Research* 5(11): 1361-1380.  
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- Jones R (2015) Unexplained infectious events leading to deaths and medical admissions in Belfast. *BJHCM* 21(1): 46-47.
- Jones R (2015) Deaths and international health care expenditure. *BJHCM* 21(10): 491-493.
- Jones R (2015) Unexpected Increase in Deaths from Alzheimer's, Dementia and Other Neurological Disorders in England and Wales during 2012 and 2013. *Journal of Neuroinfectious Diseases* 6:172. doi: 10.4172/2314-7326.1000172
- Jones R (2015) Influenza-like-illness, deaths and health care costs. *BJHCM* 21(12): 587-589.
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- Jones R (2016) The real reason for the huge NHS overspend? *BJHCM* 22(1): 40-42. [http://www.hcaf.biz/2016/NHS\\_Overspend.pdf](http://www.hcaf.biz/2016/NHS_Overspend.pdf)
- Jones R (2016) A fatal flaw in mortality-based disease surveillance. *BJHCM* 22(3): 143-145. [http://www.hcaf.biz/2016/Flaw\\_monitoring.pdf](http://www.hcaf.biz/2016/Flaw_monitoring.pdf)
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- Jones R (2016) Deaths and the marginal changes in healthcare costs *BJHCM* 22(10): 503-509.  
[http://www.hcaf.biz/2016/Deaths\\_Marginal\\_Costs.pdf](http://www.hcaf.biz/2016/Deaths_Marginal_Costs.pdf)
- Jones R (2016) Trend in proportion of deaths occurring in hospital. *BJHCM* 22(11): 572-573. [http://hcaf.biz/2016/Trend\\_proportion\\_hospital.pdf](http://hcaf.biz/2016/Trend_proportion_hospital.pdf)
- Jones R (2017) Anticipated ambulance workload during the 2016/17 winter. *Journal of Paramedic Practice* 9(2): 52-54.
- Jones R (2017) In-hospital deaths, all-cause mortality and medical admissions. *BJHCM* 23(5): 239-240.  
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## Understanding Hospital Mortality

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## Understanding Hospital Bed Planning & Occupancy <http://www.hcaf.biz/hospitalbeds.html> also <http://www.hcaf.biz/Hospitalefficiency.html>

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