

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 2016)

- 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
- 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
- Support for Specialist Commissioning at an SHA
- Modelling of activity required for next years contract for two PCTs

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- 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 2016 onward publications are on the web server but not the website. Simply type the name of the article into a web search and you will be able to locate a draft version.

All *British Journal of Healthcare Management (BJHCM)* articles can be downloaded using an NHS Athens login on the *BJHCM* website: 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.
- 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
- Jones R (2016) Rising emergency admissions in the UK and the elephant in the room. *Epidemiology (Sunnyvale): Open Access* 6(4): 1000261

Healthcare Analysis & Forecasting

www.hcaf.biz

Supporting your commitment to excellence

Outbreaks of a New Type of Infectious Immune Impairment affecting deaths and medical admissions

- Jones R (2010) Unexpected, periodic and permanent increase in medical inpatient care: man-made or new disease. *Medical Hypotheses* 74: 978-83. doi: <http://dx.doi.org/10.1016/j.mehy.2010.01.011>
- Jones R (2010) Can time-related patterns in diagnosis for hospital admission help identify common root causes for disease expression. *Medical Hypotheses* 75: 148-154. doi: <http://dx.doi.org/10.1016/j.mehy.2010.02.009>
- Jones R (2010) The case for recurring outbreaks of a new type of infectious disease across all parts of the United Kingdom. *Medical Hypotheses* 75: 452-457. doi: <http://dx.doi.org/10.1016/j.mehy.2010.04.023>
- Jones R (2013) Do recurring outbreaks of a type of infectious immune impairment trigger cyclic changes in the gender ratio at birth? *Biomedicine International* 4(1): 26-39.
- Jones R (2013) Widespread outbreaks of a subtle condition leading to hospitalization and death. *Epidemiology: Open access* 4(3): 137. doi: [10.4172/2161-1165.1000137](http://dx.doi.org/10.4172/2161-1165.1000137)
- Jones R (2014) Unexpected single-year-of-age changes in the elderly mortality rate in 2012 in England and Wales. *British Journal of Medicine and Medical Research* 4(16): 3196-3207. doi: [10.9734/BJMMR/2014/9072](http://dx.doi.org/10.9734/BJMMR/2014/9072)
- Jones R (2014) Infectious-like Spread of an Agent Leading to Increased Medical Admissions and Deaths in Wigan (England), during 2011 and 2012. *British Journal of Medicine and Medical Research* 4(28): 4723-4741. doi: [10.9734/BJMMR/2014/10807](http://dx.doi.org/10.9734/BJMMR/2014/10807)
- Jones R, Beauchant S (2015) Spread of a new type of infectious condition across Berkshire in England between June 2011 and March 2013: Effect on medical emergency admissions. *British Journal of Medicine and Medical Research* 6(1): 126-148. doi: [10.9734/BJMMR/2015/14223](http://dx.doi.org/10.9734/BJMMR/2015/14223)
- Jones R (2015) Unexpected and Disruptive Changes in Admissions Associated with an Infectious-like Event Experienced at a Hospital in Berkshire, England around May of 2012. *British Journal of Medicine and Medical Research* 6(1): 56-76. doi: [10.9734/BJMMR/2015/13938](http://dx.doi.org/10.9734/BJMMR/2015/13938)
- Jones R (2015) Are emergency admissions contagious? *BJHCM* 21(5): 227-235.
- Jones R (2015) Recurring Outbreaks of an Infection Apparently Targeting Immune Function, and Consequent Unprecedented Growth in Medical Admission and Costs in the United Kingdom: A Review. *British Journal of Medicine and Medical Research* 6(8): 735-770. doi: [10.9734/BJMMR/2015/14845](http://dx.doi.org/10.9734/BJMMR/2015/14845)
- Jones R (2015) A new type of infectious outbreak? *SMU Medical Journal* 2(1): 19-25.
- Jones R (2015) Small area spread and step-like changes in emergency medical admissions in response to an apparently new type of infectious event. *FGNAMB I*(2): 42-54. doi: [10.15761/FGNAMB.1000110](http://dx.doi.org/10.15761/FGNAMB.1000110)
- Jones R (2015) Infectious-like spread of an agent leading to increased medical hospital admission in the North East Essex area of the East of England. *FGNAMB* 1(3): 98-111. doi: [10.15761/FGNAMB.1000117](http://dx.doi.org/10.15761/FGNAMB.1000117)
- Jones R (2015) Simulated rectangular wave infectious-like events replicate the diversity of time-profiles observed in real-world running 12 month totals of admissions or deaths. *FGNAMB* 1(3): 78-79. doi: [10.15761/FGNAMB.1000114](http://dx.doi.org/10.15761/FGNAMB.1000114)
- Jones R (2015) A time series of infectious-like events in Australia between 2000 and 2013 leading to extended periods of increased deaths (all-cause mortality) with possible links to increased hospital medical admissions. *International Journal of Epidemiologic Research* 2(2): 53-67. http://ijer.skums.ac.ir/article_12869_2023.html
- Jones R (2016) Deaths in English Lower Super Output Areas (LSOA) show patterns of very large shifts indicative of a novel recurring infectious event. *SMU Medical Journal* 3(2): 23-36.
- Jones R (2016) A presumed infectious event in England and Wales during 2014 and 2015 leading to higher deaths in those with neurological and other disorders. *Journal of Neuroinfectious Diseases* 7(1): 1000213. doi: [10.4172/2314-7326.1000213](http://dx.doi.org/10.4172/2314-7326.1000213)
- Jones R (2016) Unusual trends in NHS staff sickness absence. *BJHCM* 22(4): 239-240.
- Jones R (2016) A regular series of unexpected and large increases in total deaths (all-cause mortality) for male and female residents of mid super output areas (MSOA) in England and Wales: How high level analysis can miss the contribution from complex small-area spatial spread of a presumed infectious agent. *Fractal Geometry and Nonlinear Analysis in Medicine and Biology* (submitted)

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.
- Jones R (2013) An unexplained increase in deaths during 2012. *BJHCM* 19(5): 248-253.
- 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. doi: [10.9734/BJMMR/2015/14285](http://dx.doi.org/10.9734/BJMMR/2015/14285)
- 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](http://dx.doi.org/10.4172/2314-7326.1000172)
- Jones R (2015) Influenza-like-illness, deaths and health care costs. *BJHCM* 21(12): 587-589.

- Jones R (2015) Simulated rectangular wave infectious-like events replicate the diversity of time-profiles observed in real-world running 12 month totals of admissions or deaths. *FGNAMB* 1(3): 78-79. doi: [10.15761/FGNAMB.1000114](https://doi.org/10.15761/FGNAMB.1000114)
- Jones R (2016) The real reason for the huge NHS overspend? *BJHCM* 22(1): 40-42.
- Jones R (2016) A fatal flaw in mortality-based disease surveillance. *BJHCM* 22(3): 143-145.
- 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](https://doi.org/10.4172/2161-1165.1000261)
- Jones R (2016) Deaths and the marginal changes in healthcare costs. *BJHCM* 22(10): 503-509.
- Jones R (2016) Trend in proportion of deaths occurring in hospital. *BJHCM* 22(11): 572-573.
- Jones R (2016) Unrecognised infectious outbreaks lead to higher winter mortality and how disease surveillance has completely failed to detect these events. *In preparation*
- Jones R (2016) The rise in medical admissions, a “wicked problem” with additional complexity arising from periods of unexplained higher deaths. *In preparation*
- Jones R (2016) A time series of deaths in New Zealand – are hidden epidemics concealed in the trends? *In preparation*
- Jones R (2016) A time series of deaths in Scotland – evidence for hidden epidemics and their interaction with influenza-like illness. *In preparation*

Cytomegalovirus (CMV) and Human Disease

- Jones R (2011) CMV and health care costs. *BJHCM* 17(4): 168-169.
- Jones R (2013) Could cytomegalovirus be causing widespread outbreaks of chronic poor health? In *Hypotheses in Clinical Medicine*, pp 37-79, Eds M. Shoja, et al. New York: Nova Science Publishers Inc. Available from: http://www.hcaf.biz/2013/CMV_Read.pdf
- Jones R (2014) A Study of an Unexplained and Large Increase in Respiratory Deaths in England and Wales: Is the Pattern of Diagnoses Consistent with the Potential Involvement of Cytomegalovirus? *British Journal of Medicine and Medical Research* 4(33): 5179-5192. doi : [10.9734/BJMMR/2014/11382](https://doi.org/10.9734/BJMMR/2014/11382)
- Jones R, Goldeck D (2014) Unexpected and unexplained increase in death due to neurological disorders in 2012 in England and Wales: Is cytomegalovirus implicated? *Medical Hypotheses* 83(1): 25-31. <http://dx.doi.org/10.1016/j.mehy.2014.04.016>
- Jones R (2014) Trends in emergency admissions per death. *BJHCM* 20(9): 446-447.
- Jones R (2015) Roles for cytomegalovirus in infection, inflammation and autoimmunity. In *Infection and Autoimmunity*, 2nd Edition, Eds: N Rose, et al. Elsevier: Amsterdam. Chapter 18, pp 319-357. doi: [10.1016/B978-0-444-63269-2.00068-4](https://doi.org/10.1016/B978-0-444-63269-2.00068-4)
- Jones R (2015) An unexpected increase in adult appendicitis in England (2000/01 to 2012/13): Could cytomegalovirus (CMV) be a risk factor? *British Journal of Medicine and Medical Research* 5(5): 579-603. doi: [10.9734/BJMMR/2015/13302](https://doi.org/10.9734/BJMMR/2015/13302)
- Jones R (2016) Is cytomegalovirus involved in recurring periods of higher than expected death and medical admissions, occurring as clustered outbreaks in the northern and southern hemispheres? *British Journal of Medicine and Medical Research* 11(2): 1-31. doi: [10.9734/BJMMR/2016/20062](https://doi.org/10.9734/BJMMR/2016/20062)

Understanding Hospital Mortality

- Jones R (2015) A ‘fatal’ flaw in hospital mortality models: How spatiotemporal variation in all-cause mortality invalidates hidden assumptions in the models. *FGNAMB* 1(3): 82-96. doi: [10.15761/FGNAMB.1000116](https://doi.org/10.15761/FGNAMB.1000116)
- Jones R (2015) Links between bed occupancy, deaths and costs. *BJHCM* 21(11): 544-545.
- Jones R (2016) Hospital bed occupancy and deaths (all-cause mortality) in 2015. *BJHCM* 22(5): 283-285.
- Jones R (2016) Clear the decks of Summary Hospital-level Mortality Indicator. *BJHCM* 22(6): 335-338.
- Jones R (2016) Bed occupancy and hospital mortality. *BJHCM* 22(7): 380-381.
- Jones R (2016) Hospital deaths and length of stay. *BJHCM* 22(8): 424-425.
- Jones R (2016) Hospital mortality rates and changes in activity. *BJHCM* 22(10): 519-521.
- Jones R, Sleet G, Pearce O, Wetherill M (2016) Complex changes in blood biochemistry revealed by a composite score derived from Principal Component Analysis: Effects of age, patient acuity, end of life, day-of week, and potential insights into the issues surrounding the ‘Weekend’ effect in hospital mortality. *British Journal of Medicine and Medical Research* 18(5): 1-28. doi: [10.9734/BJMMR/2016/29355](https://doi.org/10.9734/BJMMR/2016/29355)
- Jones R (2016) Trends in proportion of deaths occurring in hospital. *BJHCM* 22 (11): 572-573.
- Jones R (2016) Trends in crude death rates in English hospitals. *BJHCM* 22 (12): in press
- Jones R (2017) Is the ‘weekend’ mortality effect real? *BJHCM* 23 (1): in press

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 and Jones R (1997) Socio-economic and demographic factors in patient non-attendance. *BJHCM* 3(10): 523-528.
- 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) <http://www.rcm.org.uk/midwives/features/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.
- 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)
- Beeknoo N, Jones R (2016) Using social groups to locate areas of high utilization of critical care. *BJHCM* 22(11): 551-560.
- Beeknoo N, Jones R (2016) 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* (in press)
- Beeknoo N, Jones R (2016) Forecasting emergency admissions for capacity and financial planning. *Health Care Management Science* (submitted)

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

- Jones R (2001) Bed occupancy: Don't take it lying down. *Health Service Journal* 111(5752): 28-31
- Jones R (2001) New approaches to bed utilisation – making queuing theory practical. Presented at 'New Techniques for Health and Social Care'. Harrogate Management Centre Conference 27th Sep, 2001. http://www.hcaf.biz/Hospital%20Beds/New_Approaches_Bed_Utilisation.pdf
- Jones R (2003) Bed management - Tools to aid the correct allocation of hospital beds. Presented at 'Re-thinking bed management – Opportunities and challenges'. Harrogate Management Centre Conference, 27th January, 2003. <http://www.hcaf.biz/Hospital%20Beds/Microsoft%20Word%20-%20Bed%20planning%20HMC.pdf>
- Jones R (2009) Emergency admissions and hospital beds. *BJHCM* 15(6): 289-296.
- Jones R (2009) Building smaller hospitals. *BJHCM* 15(10): 511-512.
- Jones R (2009) Length of stay efficiency. *BJHCM* 15(11): 563-564.
- Jones R (2009) Crafting efficient bed pools. *BJHCM* 15(12): 614-616.
- Jones R (2010) Myths of ideal hospital size. *Medical Journal of Australia* 193(5): 298-300.
- Jones R (2010) Benchmarking length of stay. *BJHCM* 16(5): 248-250.
- 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) Hospital bed occupancy demystified and why hospitals of different size and complexity must operate at different average occupancy. *BJHCM* 17(6): 242-248.
- Jones R (2011) A&E performance and inpatient bed occupancy. *BJHCM* 17(6): 256-257
- Jones R (2011) Bed occupancy – the impact on hospital planning. *BJHCM* 17(7): 307-313
- Jones R (2011) Factors determining the need for single room accommodation in hospital. *BJHCM* 17(7): 316-317
- Jones R (2011) Factors influencing demand for hospital beds in English Primary Care Organisations. *BJHCM* 17(8): 360-367.
- Jones R (2011) A paradigm shift for bed occupancy. *BJHCM* 17(8): 376-377.
- Jones R (2011) Volatility in bed occupancy for emergency admissions. *BJHCM* 17(9): 424-430.
- Jones R (2012) Maternity bed occupancy: all part of the equation. *Midwives Magazine* 15(1): <http://www.rcm.org.uk/midwives/features/all-part-of-the-equation/>
- Jones R (2012) A simple guide to a complex problem – maternity bed occupancy. *British Journal of Midwifery* 20(5): 351-357.
- Jones R (2013) A guide to maternity costs – why smaller units have higher costs. *British Journal of Midwifery* 21(1): 54-59.
- Jones R (2013) Average length of stay in hospitals in the USA. *BJHCM* 19(4): 186-191.
- Jones R (2013) Optimum bed occupancy in psychiatric hospitals. *Psychiatry On-Line* http://www.priory.com/psychiatry/psychiatric_beds.htm
- Jones R (2013) The NHS England review of urgent and emergency care. *BJHCM* 19(8): 406-407.
- Jones R (2014) Medical bed occupancy and cancelled operations. *BJHCM* 20(12): 594-595.
- Jones R (2015) A&E tipping points. *BJHCM* 21(5): 248-249.
- Jones R (2015) Is length of stay a reliable efficiency measure? *BJHCM* 21(7): 344-345.
- Jones R (2015) Bed occupancy, efficiency and infectious outbreaks. *BJHCM* 21(8): 396-397.
- Jones R (2015) Declining length of stay and future bed numbers. *BJHCM* 21(9): 440-441. doi: [10.12968/bjhc.2015.21.9.440](https://doi.org/10.12968/bjhc.2015.21.9.440)
- Jones R (2015) Links between bed occupancy, deaths and costs. *BJHCM* 21(11): 544-545.
- Jones R (2016) Hospital bed occupancy and deaths (all-cause mortality) in 2015. *BJHCM* 22(5): 283-285.
- Jones R (2016) Clear the decks of Summary Hospital-level Mortality Indicator. *BJHCM* 22(6): 335-338.
- Jones R (2016) Bed occupancy and hospital mortality. *BJHCM* 22(7): 380-381.
- Jones R (2016) Hospital deaths and length of stay. *BJHCM* 22(8): 424-425.
- Jones R (2016) Where next for overnight stay admissions, length of stay and bed days? *BJHCM* 22(9): 475-477.
- Beeknoo N, Jones R (2016) Achieving economy of scale in critical care, and planning information necessary to support the choice of bed numbers. *British Journal of Medicine and Medical Research* 17(9):1-15. doi: [10.9734/BJMMR/2016/28736](https://doi.org/10.9734/BJMMR/2016/28736)

Beeknoo N, Jones R (2016) A simple method to forecast next years bed requirements: a pragmatic alternative to queuing theory.

British Journal of Medicine and Medical Research 18(4): 1-20. doi: 10.9734/BJMNR/2016/29518

Beeknoo N, Jones R (2016) The demography myth - how demographic forecasting 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 (in press)

Jones R (2017) To what extent can acute beds be reduced in the STPs. *BJHCM* 23(2): in press.

Financial Risk in Healthcare <http://www.hcaf.biz/financialrisk.html>

Jones R (2004) Financial risk in healthcare provision and contracts. Proceedings of the 2004 Crystal Ball User Conference, June 16-18th, 2004. Denver, Colorado, USA. http://www.hcaf.biz/Financial%20Risk/CBUC_FR.pdf

Jones R (2008) Financial risk in practice based commissioning. *BJHCM* 14(5): 199-204.

Jones R (2008) Financial risk in health purchasing Risk pools. *BJHCM* 14(6): 240-245.

Jones R (2008) Financial risk at the PCT/PBC Interface. *BJHCM* 14(7): 288-293.

Jones R (2009) The actuarial basis for financial risk in practice-based commissioning and implications to managing budgets.

Primary Health Care Research & Development 10(3): 245-253.

Jones R (2010) What is the financial risk in GP Commissioning? *British Journal of General Practice* 60(578): 700-701.

Jones R (2010) Cyclic factors behind NHS deficits and surpluses. *BJHCM* 16(1): 48-50.

Jones R (2010) Do NHS cost pressures follow long-term patterns? *BJHCM* 16(4): 192-194.

Jones R (2010) Nature of health care costs and financial risk in commissioning. *BJHCM* 16(9): 424-430.

Jones R (2010) Trends in programme budget expenditure. *BJHCM* 16(11): 518-526.

Jones R (2011) Cycles in inpatient waiting time. *BJHCM* 17(2): 80-81.

Jones R (2012) Time to re-evaluate financial risk in GP commissioning. *BJHCM* 18(1): 39-48.

Jones R (2012) Gender ratio and cycles in population health costs. *BJHCM* 18(3): 164-165.

Jones R (2012) Why is the 'real world' financial risk in commissioning so high? *BJHCM* 18(4): 216-217.

Jones R (2012) Volatile inpatient costs and implications to CCG financial stability. *BJHCM* 18(5): 251-258.

Jones R (2012) Cancer care and volatility in commissioning. *BJHCM* 18(6): 315-324.

Jones R (2012) Gender and financial risk in commissioning. *BJHCM* 18(6): 336-337.

Jones R (2012) End of life care and volatility in costs. *BJHCM* 18(7): 374-381.

Jones R (2012) Age and financial risk in healthcare costs. *BJHCM* 18(7): 388-389.

Jones R (2012) High risk categories and risk pooling in healthcare costs. *BJHCM* 18(8): 430-435.

Jones R (2012) Year-to-year volatility in medical admissions. *BJHCM* 18(8): 448-449.

Jones R (2012) Risk in GP commissioning: the loss ratio. *BJHCM* 18(11): 605-606.

Jones R (2012) Financial risk in GP commissioning: lessons from Medicare. *BJHCM* 18(12): 656-657.

Jones R (2013) Financial risk and volatile elderly diagnoses. *BJHCM* 19(2): 94-96.

Jones R (2013) Financial risk and volatile childhood diagnoses. *BJHCM* 19(3): 148-149.

Jones R (2013) Environmental volatility and healthcare costs. *BJHCM* 19(4): 198-199.

Jones R (2013) What every GP needs to know about financial risk in commissioning.

General Practice Online http://www.priory.com/family_medicine/GP_commissioning_risk.htm

Jones R (2013) The funding dilemma: a lagged cycle in cancer costs. *BJHCM* 19(12): 601-605.

Jones R (2014) Financial volatility in NHS contracts. *BJHCM* 20(10): 489-491.

Jones R (2016) The real reason for the huge NHS overspend? *BJHCM* 22(1): 40-42.

Jones R (2017) Why is NHS financial management failing? *BJHCM* 23: in press.

Limitations of the HRG Tariff <http://www.hcaf.biz/HRGPbR.html>

Jones R (2008) Limitations of the HRG tariff: excess bed days. *BJHCM* 14(8): 354-355.

Jones R (2008) Limitations of the HRG tariff: day cases. *BJHCM* 14(9): 402-404.

Jones R (2008) A case of the emperor's new clothes? *BJHCM* 14(10): 460-461.

Jones R (2008) Limitations of the HRG tariff: the trim point. *BJHCM* 14(11): 510-513.

Jones R (2008) Costing orthopaedic interventions. *BJHCM* 14(12): 539-547

Jones R (2009) Limitations of the HRG tariff: efficiency. *BJHCM* 15(1): 40-43.

Jones R (2009) Limitations of the HRG tariff: the RCI. *BJHCM* 15(2): 92-95.

Jones R (2009) Limitations of the HRG tariff: local adjustments. *BJHCM* 15(3): 144-147

Jones R (2010) A maximum price tariff. *BJHCM* 16 (3): 146-147.

Jones R (2010) Nature of health care costs and the HRG tariff. *BJHCM* 16(9): 451-452.

Jones R (2010) Emergency assessment tariff: lessons learned. *BJHCM* 16(12): 574-583.

Jones R (2010) High efficiency or unfair financial gain? *BJHCM* 16(12): 585-586.

Jones R (2011) Impact of the A&E targets in England. *BJHCM* 17(1): 16-22.

Jones R (2011) Costs of paediatric assessment. *BJHCM* 17(2): 57-63.

Jones R (2011) Is the short stay emergency tariff a valid currency? *BJHCM* 17(10): 496-497.

Jones R (2011) Limitations of the HRG tariff: the national average. *BJHCM* 17(11): 556-557.

Jones R (2011) Limitations of the HRG tariff: gross errors. *BJHCM* 17(12): 608-609

Jones R (2012) Is the Health Resource Group (HRG) tariff fit for purpose? *BJHCM* 18(1): 52-53.

Jones R (2013) A guide to maternity costs - why smaller units cost more. *British Journal of Midwifery* 21(1): 54-59

Healthcare Analysis & Forecasting

www.hcaf.biz

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Funding & the Funding Formula (also see the 'Benchmarking' series <http://www.hcaf.biz/forecastingdemand.html>)

Jones R (1994) GP Fundholding: Readies reckoner. *HSJ* 104 (10th Feb): 31.
Jones R (2011) Infectious outbreaks and the capitation formula. *BJHCM* 17(1): 36-38.
Jones R (2011) Death and future healthcare expenditure. *BJHCM* 17(9): 436-437.
Jones R (2013) A fundamental flaw in person-based funding. *BJHCM* 19(1): 32-38.
Jones R (2013) Population density and healthcare costs. *BJHCM* 19(1): 44-45.

Data Quality

Jones R (1995) Check your outpatient data. *Fundholding* 4(6): 24-25.
Jones R (1996) Getting the best from hospital patient information. Healthcare Analysis & Forecasting, Camberley, UK.
<http://www.hcaf.biz/Recent/Handbook.pdf>
Jones R (2007) A level playing field? A discussion document for PCT's exploring the implications of how events get counted at acute trusts. Healthcare Analysis & Forecasting, Camberley, UK.
<http://www.hcaf.biz/For%20PCTs/Microsoft%20Word%20-%20Level%20playing%20field.pdf>

Commissioning to Achieve a Waiting Time Target <http://www.hcaf.biz/capacitymanagement.html>

Jones R (2000) Outpatient appointments: Feeling a bit peaky. *HSJ* 110(5732) 28-31
Jones R (2001) Outpatient waiting time: A pretty little sum. *HSJ* 111(5740): 28-31
Jones R (2001) Guaranteed waiting times: Quick, quick, slow. *HSJ* 111(5778): 20-24
Jones R (2009) What next for 18 weeks? *BJHCM* 15(8): 404-405.
Jones R (2009) How to maintain 18 weeks. *BJHCM* 15(9): 456-457.
Jones R (2011) Cycles in inpatient waiting time. *BJHCM* 17(2): 80-81.

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