

Dr Rodney P Jones

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Dr Rodney Jones has a B.Sc. (Hon) in Microbiology/Biochemistry and a Ph.D. in Chemical Engineering; is a qualified management accountant and has completed the Hewlett Packard course in Total Quality Management. His career outside the NHS covers 7 years in academia & research (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 29 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.

Rod has developed unique expertise in:

- Forecasting demand and capacity planning
- Financial risk in healthcare budgets
- 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 the International Journal of Environmental Research and Public Health. For many years he ran a regular feature 'Money Matters' which investigated the application of statistical methods and trend analysis into the understanding of how costs behave in the real world of health care.

According to Research Gate his research places him in the top 2,5% of international researchers and academics.

Recent Projects (2011 to 2021)

- An extended series of studies into international under reporting of COVID-19 deaths and the impact of the pandemic on hospital capacity pressures
- A large international study on the effects of influenza vaccination on excess winter mortality (EWM)
- Assisting a CCG understand their level of elective demand
- A review of international comparisons of hospital bed numbers
- A review of international comparisons in critical care bed numbers

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- 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 several 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 a SHA
- Modelling of activity required for next year's 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.

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- 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

Papers are written in a non-academic style so that busy healthcare managers and policy makers can understand the issues. The fundamental insight into the issues comes from a 29-year career in healthcare, with hard-won understanding by long experience and extensive supporting literature research. JAMMR was formerly called BJMMR.

All **British Journal of Healthcare Management (BJHCM)** articles can be downloaded using an NHS Athens login on the **BJHCM** website: British Journal of Healthcare Management from MAG Online Library. **BJHCM** drafts are with permission.

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. http://www.hcaf.biz/Hospital%20Beds/EM_Admissions_HSI.pdf

Jones R (2009) Trends in emergency admissions. *BJHCM* 15(4): 188-196. http://www.hcaf.biz/Recent/Trends_in_emergency_admissions.pdf

Jones R (2009) Cycles in emergency admissions. *BJHCM* 15(5): 239-246. http://www.hcaf.biz/2010/Emergency_Admissions_Part_2.pdf

Jones R (2010) Emergency preparedness. *BJHCM* 16(2): 94-95. http://www.hcaf.biz/2010/Emergency_Preparedness.pdf

Jones R (2010) Gender ratio and hospital admissions. *BJHCM* 16(11): 541. http://www.hcaf.biz/2010/Gender_ratio.pdf

Jones R (2011) Cycles in gender-related costs for long-term conditions. *BJHCM* 17(3): 124-125. http://www.hcaf.biz/2011/Gender_Cycles_in_Cost.pdf

Jones R (2012) Gender ratio and cycles in population health costs. *BJHCM* 18(3): 164-165. http://www.hcaf.biz/2012/Gender_ratio_cost_cycles.pdf

Jones R (2012) Environment induced volatility and cycles in population health. *Positive Health Online* 194 (May): <http://www.positivehealth.com/article/clinicalpractice/environment-induced-volatility-and-cycles-in-population-health>

Jones R (2013) Is the demographic shift the real problem? *BJHCM* 19(10): 509-511. http://www.hcaf.biz/2013/Demographic_shift.pdf

Jones R (2013) Trends in elderly diagnoses: links with multi-morbidity. *BJHCM* 19(11): 553-558. http://www.hcaf.biz/2013/Elderly_Trends.pdf

Jones R (2014) What is happening in unscheduled care? *Journal of Paramedic Practice* 5(2): 60-62. http://www.hcaf.biz/2014/Urgent_Care_Extract.pdf

Jones R (2014) Forecasting conundrum: a disease time cascade. *BJHCM* 20(2): 90-91. http://www.hcaf.biz/2014/Forecasting_conundrum.pdf

Jones R (2014) Long-term cycles in admissions for neurological conditions. *BJHCM* 20(4): 192-193. http://www.hcaf.biz/2014/Neurological_cycles.pdf

Jones R (2014) Trends in admission for allergy. *BJHCM* 20(7): 350-351. http://www.hcaf.biz/2014/Trends_Allergy.pdf

Jones R (2015) Forecasting medical emergency admissions. *BJHCM* 21(2): 98-99. http://www.hcaf.biz/2015/Forecast_Medical.pdf

Jones R (2015) Estimating acute costs. *BJHCM* 21(3): 152-153. http://www.hcaf.biz/2015/Medical_Costs.pdf

Jones R (2015) Understanding growth in emergency admissions. *BJHCM* 21(4): 195-197.

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: Open Access* 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: Open Access* 6(4): 1000261 [doi: 10.4172/2161-1165.1000261](http://dx.doi.org/10.4172/2161-1165.1000261)

Trends in Emergency Department Attendances & Subsequent Admission

Jones R (2010) Forecasting emergency department attendances. *BJHCM* 16(10): 495-496. http://www.hcaf.biz/2010/A&E_attendances.pdf

Jones R (2012) Ambulance call-outs and disruptive technology. *BJHCM* 18(2): 112-113. http://www.hcaf.biz/2012/Ambulance_call_out.pdf

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Jones R (2013) Hidden complexity in A&E trends in England. *BJHCM* 19(7): 354-355. http://www.hcaf.biz/2013/A&E_complexity.pdf
Jones R (2013) A&E attendance: the tip of a wider trend. *BJHCM* 19(9): 458-459. http://www.hcaf.biz/2013/A&E_Tip_of_trend.pdf
Jones R (2014) Untangling the A&E crisis. *BJHCM* 20(5): 246-247. http://www.hcaf.biz/2014/Untangling_A&E.pdf
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Beeknoo N, Jones R (2016) Factors influencing A&E attendance, admissions and waiting times at two London hospitals. *Journal of Advances in Medicine and Medical Research* 17(10): 1-29. <http://www.sciencedomain.org/abstract/16193>
Beeknoo N, Jones R (2016) Using Social Groups to Locate Areas with High Emergency Department Attendance, Subsequent Inpatient Admission and Need for Critical Care. *Journal of Advances in Medicine and Medical Research* 18(6): 1-23. <http://www.sciencedomain.org/abstract/16693>

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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 (2014) Expected trends in births and deaths to 2037. *BJHCM* 20(8): 402-403. http://www.hcaf.biz/2014/Births_Deaths.pdf
Jones R (2015) Unexplained infectious events leading to deaths and medical admissions. *BJHCM* 21(1): 46-47. http://www.hcaf.biz/2015/Belfast_Outbreaks.pdf
Jones R (2015) Forecasting medical emergency admissions. *BJHCM* 21(2): 98-99. http://www.hcaf.biz/2015/Forecast_Medical.pdf
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Beeknoo N, Jones R (2016) Using social groups to locate areas of high utilization of critical care. *BJHCM* 22(11): 551-560. http://www.hcaf.biz/2016CCU_OA.pdf
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Beeknoo N, Jones R (2017) Information asymmetry in financial forecasting within healthcare and simple methods to overcome this deficiency. *Journal of Advances in Medicine and Medical Research* 20(4): 1-12. doi: [10.9734/BJMMR/2017/31474](https://doi.org/10.9734/BJMMR/2017/31474)
Jones R (2017) What is driving growth in the English NHS? *BJHCM* 23(3): 134-137. http://www.hcaf.biz/2017/NHS_Growth.pdf
Jones R (2017) Volatility in emergency admissions per death. *BJHCM* 23(11): 552-554. http://www.hcaf.biz/2017/EM_per_death.pdf
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Trends in Outpatient Attendance and Follow-up to First Appointments <http://www.hcaf.biz/capacitymanagement.html>

Beauchant S, Jones R (1997) Socio-economic and demographic factors in patient non-attendance. *BJHCM* 3(10): 523-528.
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Jones R (2001) Outpatient waiting times: Quick, quick, slow. *Health Service Journal* 111(5778): 20-23.
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Jones R (2009) How to maintain 18 weeks. *BJHCM* 15(9): 456-457. http://www.hcaf.biz/Recent/Maintain_18_weeks.pdf
Jones R (2012) Are there cycles in outpatient costs? *BJHCM* 18(5): 276-277. http://www.hcaf.biz/2012/Cycles_in_outpatient_costs.pdf
Jones R (2012) Increasing GP referrals: collective jump or infectious push? *BJHCM* 18(9): 487-495. http://www.hcaf.biz/2012/GP_referral.pdf
Jones R (2012) GP referral to dermatology: which conditions? *BJHCM* 18(11): 594-596. http://www.hcaf.biz/2012/GP_ref_dermatol.pdf
Jones R (2012) Trends in outpatient follow-up rates, England 1987/88 to 2010/11. *BJHCM* 18(12): 647-655. http://www.hcaf.biz/2012/Follow-up_rates.pdf
Jones R (2014) Unexpected changes in outpatient first attendance. *BJHCM* 20(3): 142-143. http://www.hcaf.biz/2014/OP_Immune.pdf
Jones R (2016) Recent trends in outpatient follow-up rates. *BJHCM* 22(2): 92-94. http://www.hcaf.biz/2016/Followup_Trends.pdf

Understanding Excess Winter Mortality (EWM) and Winter Capacity Planning

Jones R (2017) The link between seasonal death rates and workloads. *BJHCM* 23(9): 448-450. http://www.hcaf.biz/2017/Seasonal_Workload.pdf
Jones R (2017) Anticipated ambulance workload during the 2016/17 winter. *Journal of Paramedic Practice* 9(2): 52-54.
Jones R (2019) Does on/off switching of deaths modify NHS winter workload? *Journal of Paramedic Practice* 11(4): 172-173.
Jones R (2019) Will the winter of 2019/2020 have unusually high service demand? Part 1: Lessons. *Journal of Paramedic Practice* 11(11): 492-494.
Jones R (2019) Will the winter of 2019/2020 have unusually high service demand? Part 2: Strategy. *Journal of Paramedic Practice* 11(12): 538-540.

Jones R (2020) Excess winter mortality (EWM) and stalling international improvements in life expectancy and mortality rates. *BJHCM* 26(12); <https://doi.org/10.12968/bjhc.2020.0020>

Jones R (2021) Excess winter mortality (EWM) as a dynamic forensic tool: Where, when, which conditions, gender, ethnicity, and age. *Int J Environmental Research and Public Health* 18(4): 2161. <https://doi.org/10.3390/ijerph18042161>

Jones R (2021) The influenza vaccination paradox: why has vaccination not reduced excess winter mortality (EWM)? In preparation

Understanding Hospital Length of Stay (LOS)

Jones R (2009) Length of stay efficiency. *BJHCM* 15(11): 563-564. http://www.hcaf.biz/Hospital%20Efficiency/LOS_efficiency.pdf

Jones R (2010) Benchmarking length of stay. *BJHCM* 16(5): 248-250. http://www.hcaf.biz/2010/Benchmarking_LOS.pdf

Jones R (2013) Average length of stay in hospitals in the USA. *BJHCM* 19(4): 186-191. http://www.hcaf.biz/2013/USA_ALOS.pdf

Jones R (2015) Is length of stay a reliable efficiency measure? *BJHCM* 21(7): 344-345. http://hcaf.biz/2015/LOS_deaths.pdf

Jones R (2015) Declining length of stay and future bed numbers. *BJHCM* 21(9): 440-441. http://hcaf.biz/2015/Future_bed_LOS.pdf

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http://www.hcaf.biz/2017/Growth_LOS_Admissions.pdf

Jones R (2018) Maternity length of stay efficiency and neonatal admissions. *BJHCM* 24(3): 122-124. http://www.hcaf.biz/2018/Maternity_LOS.pdf

Understanding Sickness Absence Rates – which follow the same curious patterns as deaths (see below)

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http://www.hcaf.biz/2019/NHS_sickness_absence.pdf

Jones R (2019) Sickness absence trends for the Department for Work & Pensions (England) follow identical hidden on/off patterns to those seen for NHS staff. doi: 10.13140/RG.2.2.27457 http://www.hcaf.biz/2019/DWP_AWDL_Trend.pdf

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<http://doi.org.10.12968/bjhc.2019.0026> or http://www.hcaf.biz/2020/NHS_SA_Shifts.pdf

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Covid-19 and excess deaths in the UK

Jones R (2020) How many extra deaths really occurred in the UK? See http://www.hcaf.biz/2020/Covid_Excess_Deaths.pdf

Jones R (2021) The COVID-19 counting fiasco: Is the real total of deaths closer to 10 million? In-depth analysis from India and other countries. *Journal of Health Care Finance*, Spring: Special Edition, pp1-8. The COVID-19 counting fiasco: Is the real total of deaths closer to 10 million? In-depth analysis from India and other countries. | Jones, PhD | Journal of Health Care Finance (healthfinancejournal.com)

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

<http://www.hcaf.biz/Hospitalefficiency.html> - bed demand is intrinsically linked to the forecasting demand section

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Jones R (2011) Volatility in bed occupancy for emergency admissions. *BJHCM* 17(9): 424-430. http://www.hcaf.biz/2011/Volatile_bed_occupancy.pdf

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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. http://www.hcaf.biz/2013/Emergency_Urgent_Care.pdf

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