

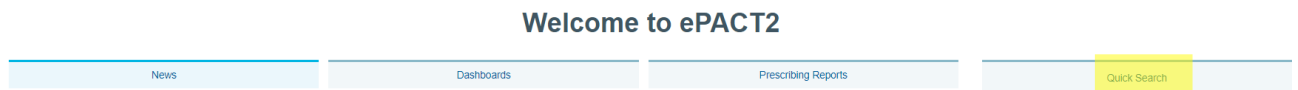
Welcome to our first ever NHSBSA Data Services blog post – we hope that this is the first of many editions.

The July 2023 edition of the blog was written and compiled by Kate Nordstrom who is a Training & Engagement Officer within the Data Services Training Team. We'll be trying to feature a different 'guest editor/author' each edition and would love for any users, both internal and external, to get in touch with us if they'd like the opportunity to feature within this guest spot.

Do you have any tips or tricks you'd like to share with other users? Or perhaps you've created an analysis – with or without the assistance of Data Services – and would like to share this with the readers. Found something particularly useful with ePACT2? Let us all know!

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Users with access to analysis creation within ePACT2 may have noticed the Quick Search function which appears within the banner as follows:



From feedback received in our training sessions, we are aware that this is an overlooked and under implemented tool. However, once our users become aware of the tool then it is indeed highly praised.

The Quick Search is an excellent tool when looking to uncover new areas of interest or possible concern. It provides a very simple way to drill down into the initially basic data searched and uncover trends whilst also comparing similar organisations.

Month Mar-23 Prescribing Organisation BNF - Hierarchy OK Reset

[Edit - Refresh](#)

Creating a comparable bespoke ePACT2 analysis can be quite complex, depending on how experienced the user is with the nuances and rules pertaining to the system.

With all users, we'd recommend attending training sessions – they are particularly beneficial when users are new to the system, are tasked with creating their own analyses or when new functionality or content is introduced into the system.

We do not run a session solely providing training in using the Quick Search, rather this is a part of the system to which we touch upon (depending on the topic of the session provided providing and any time limitations).

Prescribing Organisation	BNF - Hierarchy	Items	Net Ingredient Cost (£)	Actual Cost (£)	Quantity X Items	Actual Cost per Item (£)
▶ ENGLAND (1)	▶ All BNF					

[Return](#) - [Refresh](#) - [Print](#) - [Export](#) - [Add to Briefing Book](#)

Initially, the Quick Search can be used to bring back very basic data, as shown in the example above, but this overview can be used to drill down further and is particularly useful when initiating 'fact-finding missions' or instances wherein you're not sure where an issue lies.

Prescribing Organisation	BNF - Hierarchy	Items	Net Ingredient Cost (£)	Actual Cost (£)	Quantity X Items	Actual Cost per Item (£)
ENGLAND (1)	AII BNF					

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Expanding the Prescribing Organisation as shown above will enable further insight:

Prescribing Organisation	BNF - Hierarchy	Items	Net Ingredient Cost (£)	Actual Cost (£)	Quantity X Items	Actual Cost per Item (£)
ENGLAND (1)	AII BNF					
EAST OF ENGLAND (Y61)	AII BNF					
ENGLISH/WELSH DUMMY DENTAL (DW_RG_-10003_39)	AII BNF					
LONDON (Y56)	AII BNF					
MIDLANDS (Y60)	AII BNF					
NORTH EAST AND YORKSHIRE (Y63)	AII BNF					
NORTH WEST (Y62)	AII BNF					
SOUTH EAST (Y59)	AII BNF					
SOUTH WEST (Y58)	AII BNF					

Clicking to expand the Organisations further will enable users to view a more detailed data breakdown:

Prescribing Organisation	BNF - Hierarchy	Items	Net Ingredient Cost (£)	Actual Cost (£)	Quantity X Items	Actual Cost per Item (£)
ENGLAND (1)	AII BNF					
EAST OF ENGLAND (Y61)	AII BNF					
NHS BEDFORDSHIRE, LUTON AND MILTON KEYNES INTEGRATED CARE BOARD (QH9)	AII BNF					
BEDFORDSHIRE HOSPITALS NHS FOUNDATION TRUST (RC900)	AII BNF					
EAST LONDON NHS FOUNDATION TRUST (RWK00)	AII BNF					
MILTON KEYNES UNIVERSITY HOSPITAL NHS FOUNDATION TRUST (RD800)	AII BNF					
NHS BEDFORDSHIRE, LUTON AND MILTON KEYNES ICB - M1J4Y (M1J4Y)	AII BNF					
ARLESEY MEDICAL CENTRE (Y00260) (D 01-Nov-22)	AII BNF					
ASHBURNHAM ROAD SURGERY (E81615)	AII BNF					
ASHFIELD MEDICAL CENTRE (K82054)	AII BNF					
ASPLANDS MEDICAL CENTRE (E81050)	AII BNF					

Additionally, users can also breakdown the BNF Hierarchy down to BNF Presentation level:

BNF - Hierarchy
AII BNF
Gastro-Intestinal System (01)
Dyspepsia and gastro-oesophageal reflux disease (0101)
Antacids and simeticone (010101)
Antacids and simeticone (0101010)
Magnesium carbonate (0101010F0)
Magnesium carbonate (Antacid) (0101010F0AA)
Magnesium carbonate heavy 500mg capsules (0101010F0AAAUAU)

Or combine the breakdowns:

ENGLAND (1)	AII BNF
EAST OF ENGLAND (Y61)	AII BNF
NHS BEDFORDSHIRE, LUTON AND MILTON KEYNES INTEGRATED CARE BOARD (QH9)	AII BNF
BEDFORDSHIRE HOSPITALS NHS FOUNDATION TRUST (RC900)	AII BNF
EAST LONDON NHS FOUNDATION TRUST (RWK00)	AII BNF
MILTON KEYNES UNIVERSITY HOSPITAL NHS FOUNDATION TRUST (RD800)	AII BNF
NHS BEDFORDSHIRE, LUTON AND MILTON KEYNES ICB - M1J4Y (M1J4Y)	AII BNF
ARLESEY MEDICAL CENTRE (Y00260) (D 01-Nov-22)	AII BNF
ASHBURNHAM ROAD SURGERY (E81615)	AII BNF
ASHBURNHAM ROAD SURGERY (E81615)	Gastro-Intestinal System (01)
ASHBURNHAM ROAD SURGERY (E81615)	Dyspepsia and gastro-oesophageal reflux disease (0101)
ASHBURNHAM ROAD SURGERY (E81615)	Antacids and simeticone (010101)
ASHBURNHAM ROAD SURGERY (E81615)	Antacids and simeticone (0101010)
ASHBURNHAM ROAD SURGERY (E81615)	Magnesium carbonate (0101010F0)
ASHBURNHAM ROAD SURGERY (E81615)	Magnesium carbonate (Antacid) (0101010F0AA)
ASHBURNHAM ROAD SURGERY (E81615)	Magnesium carbonate heavy 500mg capsules (0101010F0AAAUAU)

As noted earlier, the equivalent analysis would be rather complex to create in order to view different organisation and BNF levels within the same analysis – complex but exceedingly valuable.

We'd urge users to try out the Quick Search as it may save them a lot of time whilst also providing a great deal of insight. You can start with nothing and then very quickly pick out areas of interest which you may want to then focus in on further using an analysis of your own.

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Kate's a bit of a self-proclaimed nerd in some respects and has a favourite report within ePACT2: the Potential Generic Savings report which is found under Prescribing Reports.

The Potential Generic Savings report details prescribing of branded presentations wherein potential savings could have been achieved if the generic equivalent was prescribed instead.

We're all aware of how the NHS unfortunately is struggling across all aspects and so these potential savings reports – when combined with the fabulous users of ePACT2 who review such reports and action any possible behaviour changes or communicate out prescribing guidelines accordingly – can potentially lead to savings. We understand that there are many factors when considering such data reports – patient preferences and clinical reasonings are to name but a few possible blockers.

However, we'd always point out that every little helps where the NHS is concerned. It's interesting to note that drilling down to Practice level will often result in single item counts where the potential saving can be quite surprising – we'd advise perhaps starting off with these low item count presentations as this will enable you to investigate such prescribing instances in detail and communicate with individual practices directly with minimal resources required.

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Kate also always stresses the importance of the ePACT2 newsfeed – which features both 'good' and 'bad' updates that we'd like to communicate out to our users. If you are exporting data from the system and using it to report on in your organisation then it's really important to check the newsfeed every now and again – this is to ensure that the data you have exported is not at a later date found to be incorrect for whatever and we've had to direct our users to run the data again. Although errors are kept to a minimum, ePACT2 and the data contained within this system is vast – errors and mistakes are always going to be a possibility.

Keeping an eye on the newsfeed also ensures users will be aware of any new releases in terms of Prebuilt Reports and Dashboards. We'll also let users know if we've had to temporarily suspend or decommission any features.

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The best part of Kate's current role is interacting with our users – be that in emails, pre-planned Team's Webinars or ad-hoc Team's calls in response to emails requesting a chat. Working from home is still rather isolating but speaking to our lovely users is a highlight of her day.

Please don't ever hesitate to contact us asking for a Teams call – ePACT2 can, admittedly, be a very daunting system. Kate was previously terrified of using or breaking the system and now she is part of the Training Team – everyday miracles can happen with the right training

resources, guidance and the confidence to know that we are here to answer any queries you may have.

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Kate finds the ePACT2 user guides and data dictionary to be particularly important in the ongoing training journey and in learning to understand the system as a beginner. Even if users have been in the medical field for a long period, there is very likely going to be terms that feature in ePACT2 which they may never have heard of or are unfamiliar with.

Users often contact Data Services with queries that can be answered using the guides and other resources available to everyone on the NHSBSA ePACT2 webpages. We'd appreciate it if users could attempt to self-serve as best they possibly can – keeping in mind that Data Services as a department is exceptionally busy and the five working day turnaround for emails received may be pushed to the limit at times.

Self-service may enable users to answer basic queries for themselves which would otherwise be waiting up to five working days for a response – hence why we promote it. If we're answering basic queries then our time is being taken away from answering complex and bespoke queries as quick as we could be without other simpler queries taking away our attention and resources.

Similarly, this is why we'd always recommend attending any and all training sessions which are of benefit to your job role and organisation. These will provide many tips and tricks that can again avoid many simple queries we receive from our users.

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Kate previously was lucky enough to take part in some work experience for the User Research team and had the pleasure of posing questions and discussion points to some of the most prominent users of our systems. Kate recalls that this was a particularly eye-opening experience and one that was very beneficial.

We're always very welcoming of any feedback from our users and that's why we've recently sent out a survey in conjunction with our fabulous User Research team. The survey has now ended and we're collating the findings and pulling out any conclusions but that doesn't mean you can't still send in any feedback.

We sincerely hope that you've enjoyed this blog and are looking forward to the next edition.