

MEDICINES AND CLINICAL POLICIES TEAM

Patient Led Ordering
(PLO) policy
(rationalising changes to third party
repeat prescription ordering)

(Acknowledgements must be made to Dorset ICB, Nottinghamshire ICB and Greater Manchester ICB for kindly providing and sharing their resources on PLO policy)



REVIEW AND AMENDMENT LOG:

Version	Type of Change	Date	Description of Change	Name
1	New	August 2025	1 st Draft Version	Sukhy Somal
2	Additional notes to ensure clarity of policy	September 2025	Clarification on why the policy is required, how to communicate and changes to remove timeline restrictions. Change of title and edits on page 7 & 8.	Anna Stone
3	Various	October 2025	Changes to title, addition of acronym/glossary page, changes to template, addition of sources, changes for lists to tables.	Annabel Smith
4	Page 14 edits	October 2025	Clarity on exemptions added to page 6	Tahera Fardous
5	Acronyms/glossary changes	October 2025	Acronyms/glossary edits	Sandeep Pahal
6	Page 7 edits	October 2025	Changes to the SMS text message	Jag Sangha
7	Various	October 2025	Minor changes to wording.	Anna Stone



CONTENTS

Glossary:	3
What is third-party ordering and what is patient-led ordering (PLO)?	4
Background	4
The issues and purpose of the change:.....	5
How can patients order their medication?.....	6
Exception to the change:	6
Checklist of Actions for ICB before the “Go Live” date:	6
Communication of changes to nursing homes/residential care homes and domiciliary care	8
Electronic Repeat Dispensing (eRD) :.....	8
Key Messages:	9
Procedure:.....	10
Suggested Roles and Responsibilities:	11-12
Frequently Asked questions and links:	12-14
Flow Chart for PLO:	15



Glossary:

Acronym	Explanation
PLO	Patient Led Ordering (see page 4)
Third Party	Ordering is done on behalf of the patient by someone other than the patient. (see page 4)
ICB	Integrated Care Board
BC ICB	Black Country Integrated Care Board
CPBC LPC	Community Pharmacy Black Country Local Pharmaceutical Committee
OWM	Office of West Midlands
PCN	Primary Care Network
eRD	Electronic Repeat Dispensing



What is third party ordering and what is patient led ordering (PLO)?

Third party ordering is a service for patients that has been agreed primarily between the community pharmacy and an individual patient, where the community pharmacy is empowered by the patient to order and collect their repeat prescription or have it delivered.

Patient Led Ordering (PLO) is where the patient/patient representative is empowered to order their own repeat prescriptions without the use of a third party.

Background

The way repeat prescriptions are ordered is changing. All patients (who can do so) are required to order prescriptions directly from the GP practice. This means that for the majority of patients, the pharmacy will no longer order prescriptions on their behalf.

Black Country Medicines and Clinical Policies team is sometimes asked by practices for help and support in stopping third-party ordering and supporting with patient-led ordering (PLO). Practices and community pharmacies have both expressed a wish to support patients who can order their own repeat medicines to do so, without the need to ask a third party.

Community pharmacies and GP practices are being encouraged to empower patients to take responsibility for ordering their own medicines as they need them, each month, via the NHS App wherever possible. To support our practices, we have developed some tools that practices can use when deciding to stop third-party ordering.

This support pack provides generic templates and information that the practice may wish to use when implementing changes to third-party ordering. The information in this policy has been shared and kindly provided by Greater Manchester ICB, Dorset ICB and Nottingham ICB and several practices that have already implemented these changes within their own practice.

It is good practice to ensure that all stakeholders affected by this change have been consulted before any final decision is made by the practice. Practices should ensure they have a robust, safe process in place to ensure all patients are informed and supported throughout the process.

The rollout to practices of PLO will commence on 01/03/2026. This allows a lead time of nearly 16 weeks and does not interfere with winter pressures. This will allow enough time to manage all the steps required before a 'go-live' date, including time to communicate with patients, update practice procedures and carry out staff training. Further details on the steps to follow are outlined in the support guides listed in the table below.

Patients who already take their repeat prescription request slips into the GP practice or order their repeat medication online are not affected.



The issues and purpose of the change:

The issues..



(Source - Nottinghamshire ICB)

GP practices, community pharmacies and patients have provided feedback that there is too much time spent waiting to order repeat prescriptions over the phone, patient frustration of not knowing what can be ordered on repeat and what cannot, complaints of medication stockpiling of items such as inhalers, insulin pens, stopped medication, etc....several other ICBs have also had similar feedback and to resolve these issues have moved over to PLO of repeat prescriptions.

The purpose and change aim to:

- Reduce medicine waste. Current arrangements mean that many medicines are routinely ordered but not needed.
- Give patients better control over the ordering of their own medication
- Improve safety by avoiding stockpiling of medication and preventing medication that has been stopped from being re-ordered by mistake
- Save practice time (especially if prescriptions are ordered online) with less time spent chasing and processing prescriptions and answering the phone to queries and complaints



How will patients be able to order their medication?

Patients can order repeat medication in one of the following ways:

- Online via the GP practice online ordering process or the NHS App – this is the safest and easiest way
- Via the repeat prescription box at the GP practice

Not all GP practices have repeat drop boxes, but for those that do, patients will still be able to use this as a means to order their repeat prescription if they are unable to use the NHS App or any other practice's online ordering service. This box is **not** for community pharmacies to drop off repeat requests.

- Via post to the GP practice using the repeat prescription slip
- Via the telephone
- Via walking into a GP practice
- Via any other online option the practice has available

Patients will not be able to order medicines through their community pharmacy except for:

- The exception to the PLO will be patients who are unable to order their medication by any of the recommended routes, are vulnerable, and/or housebound.
- GPs could work closely with pharmacies to ensure patients who require additional assistance (Assisted Patients) get access to support and specific policies geared to their personal needs.
- Patients who are unable to access digital devices or have a family to support.
- This could mean that pharmacies continue to order on behalf of some patients, where all partners agree this is the best solution for a particular individual.

Checklist of Actions for ICB before the “Go Live” date:

• Communication of changes to community pharmacy:

BC ICB will communicate the changes being made and the reasons why to all community pharmacies. This will be done in three ways: 1- Through the CPBC LPC, 2 – Through the BC



ICB community pharmacy newsletter and 3 – An email sent directly to every BC ICB community pharmacy via OWM.

• **Communication of changes to GP practices:**

BC ICB will communicate these changes via the GP practice primary care communication pathways, bulletins, PCNs meeting, Primary Care Collaborative, etc.

• **Communication of changes to patients:**

The community pharmacies and the practices must communicate the change to the patients. The practices may choose to send an SMS message to all patients who have signed up to receive text messaging (see the example created) or those identified on a case-by-case basis, as the practice sees appropriate. Community pharmacies are no longer required to provide the repeat slip of the patient's prescription copy and therefore, you can put a note on the right-hand side, but you cannot assume this will be handed to the patient. However, the pharmacy can view the repeat side on their Patient Medication Record (PMR) system and so can pass on details of the new Patient Led Ordering (PLO) service to the patient.

Please remember message sent via the NHS App are free to send, messages sent via systems e.g. Accurx are attached to a cost to BC ICB.

THIS IS EXAMPLE 1 OF A TEXT MESSAGE THAT COULD BE USED:

From 01/03/2026, you will need to order your repeat prescription from your GP – not through your local pharmacy. The NHS App is the safest and easiest way for you to request your repeat prescription. Ordering through the app will give you more control over your own healthcare and save you a trip to the GP practice. Find out more at www.nhs.uk/nhsapp. If you think you, or someone you care for, will struggle to order your own repeat prescriptions, please notify the practice as soon as possible. You could set up proxy access to support this instead.

THIS IS EXAMPLE 2 OF A TEXT MESSAGE THAT COULD BE USED:

We are encouraging patients who can order their own prescriptions to do so. We no longer accept repeat prescription requests from community pharmacies on behalf of patients. Patients (or their carer, nominated family member/friend) can order repeat prescriptions directly from the GP practice, but the preferred method of ordering is via the NHS App: [How to order a repeat prescription - NHS](#).

Please note – pharmacies are no longer obligated to provide patients with a copy of their repeat slips unless requested by the patient and therefore practices should not assume all patients are receiving copies of these slips. Therefore, it is always better to send communication to the patients via the NHS App.



Example of the Right-hand side of the prescription message:

We will **no longer** accept repeat prescription requests from community pharmacies on behalf of patients from 01/03/2026 as we move towards patient led ordering, preferably via the NHS App. However, some patients may need pharmacy support with repeat prescription ordering. This can be agreed upon between the practice and the pharmacy.

Communication of changes to nursing homes/residential care homes/domiciliary care, etc

BC ICB will provide communication that will be shared with nursing homes/residential care homes/domiciliary care, etc. This will explain the changes and the need for the changes and what options they have for future repeat prescription ordering, including proxy ordering.

- **Feedback:** Any patient feedback should be dealt with by the practice as per practice policy.

Some patients may need to continue having their medications ordered by a third party; the practice may wish to set up its own system to identify these patients. Once practices are satisfied that they have identified those patients, practices could then add an alert to their patient records to easily identify these “vulnerable/non-patient-led ordering” patients. Practices could use a “consent code” in the records as well.

Practice website: Add information regarding changes to the repeat ordering process. The practice may want to add a message promoting online ordering via the website or the NHS app.

Electronic Repeat Dispensing (eRD)

To enable patients to still access their repeat medicines easily, where appropriate, patients should be offered eRD. eRD is suitable for patients who are on a stable repeat medicine regimen, with no recent or anticipated changes.

Guidance and further resources to support the implementation of eRD can be accessed from [BCICB Repeat Prescription Guidance Vs 3.0.pdf](#)



An example of a standard statement to highlight this service is below.

Example of eRD statement:

If you or someone you care for takes the same medication regularly, you may be eligible for the NHS electronic Repeat Dispensing (eRD) service. This service eliminates the need for you to order a prescription from your GP every time you require additional medication. Your prescription is automatically sent to your nominated pharmacy every month, and you will pick up your medication from this pharmacy. You will be reminded by your pharmacy when you are coming to the end of your repeat batch, and you may need to be reviewed by your GP before the next batch of prescriptions will be issued. Speak with a member of your GP practice or your regular pharmacy to find out if this service is appropriate for you.

To help prescribers and practice staff with patient queries around PLO of repeat prescriptions changes.

Key messages to relay:

1. This change only affects patients who are on a repeat prescription and who order their prescription in the following way:

- a) Have an agreement with a pharmacy to order/request a prescription on their behalf.
- b) Take their counterfoil/ repeat prescription to a community pharmacy for them to request prescriptions on their behalf.
- c) Where community pharmacies have been “auto-ordering” on the patient's behalf without patient involvement.
- d) Where the pharmacy or the patient calls the pharmacy and a repeat order request is carried out.

Patients who use the GP practice/online ordering/NHS app to request prescriptions are not affected.

2. Patients will receive their first prescription as normal from but from 01/03/2026 will need to order the next repeat prescription themselves or via their identified proxy directly from their GP Practice, online if accepted by the practice, or via the NHS app, if applicable.

3. This affects the prescription request part of the process only. Therefore, patients can continue to have their prescription collected from the GP practice or sent via Electronic Prescription Service (EPS) by their chosen pharmacy and can then collect their medication from the pharmacy, or if the pharmacy offers a delivery service and the patient uses this service, can have it delivered to their home.



4. Drop boxes and over-the-counter requests within the practice will continue to be available for patients/carers to request repeat medication.

5. Stopping non-patient-initiated requests aims to decrease medication waste and unnecessary prescriptions. It also reduces safety concerns, such as medicines being stopped from being ordered or no longer being required, resulting in patients receiving discontinued/changed medications or over overstock of medicines, leading to medicines expiring. This will provide the patient with greater control over ordering their usual medication.

6. Some patients may continue to need pharmacy support with repeat prescription ordering. GP practices, pharmacies and carers must work together to ensure that vulnerable patients are not at risk due to this change. If a patient is concerned that they or someone they care for is vulnerable, they should contact the practice

We know that some people may continue to need pharmacy support with repeat medication ordering. Examples are listed below:

- Patients who are housebound and cannot order online, or do not have a carer or representative who can order on their behalf.
- Patients who do not have capacity and do not have a carer or representative who can order on their behalf, e.g., patients with learning disabilities, dementia.

For any patients who fall within the exceptions criteria, a relevant member of the practice staff could ensure an alert is added to the patient’s record stating who has been identified to order on the patient’s behalf.

Procedure

Prescription requests made by patients using the NHS app	Process the request as per your usual practice procedure
Prescription requests made by patients <u>NOT</u> using the NHS app	<p>Process the request as per usual practice procedure and promote the NHS App use if possible.</p> <p>If agreed patient is vulnerable and unable to use the NHS App, process the request as appropriate.</p> <p>Patients who are already identified on the agreed vulnerable patients list, process the request as per the usual procedure for vulnerable patients the practice sees appropriate.</p>
Patients who are NOT on the agreed vulnerable patients list	Review patient & identify if they should be confirmed as “vulnerable”, if they are, then follow the process you have decided to record they are vulnerable on your IT system and how you have agreed for them to order their prescriptions. If



	they are not vulnerable, then encourage them to order their prescriptions via the NHS App or other method they prefer.
If the patient should be included in the agreed vulnerable list	Liaise with the patient's nominated community pharmacy to agree and confirm that the patient is vulnerable and should be on the agreed vulnerable list.
The practice's vulnerable patients list is updated to include the newly identified patient	<p>Patient's medical notes are updated to reflect the vulnerable status in relation to ordering their medication and their exclusion from using the NHS app</p> <p>Process the request as per the agreed vulnerable patient procedure</p>
If the patient should NOT be included in the agreed vulnerable list	<p>If the medication request is urgent, then consider whether an exception to the use of the NHS app to request medication is warranted, confirming the procedure to be used by the patient for future requests before processing the request as per the usual practice's procedures.</p> <p>Patient to be provided with support and guidance around the use of the NHS app to order their repeat medication as required</p> <p>If the medication request is NOT urgent, then request the patient to resubmit their repeat medication request via the NHS app, providing support and guidance around the use of the NHS app to order their repeat medication as required</p>

Suggested Roles and Responsibilities

Practice Manager

To incorporate PLO into their existing repeat prescriptions policy/ guideline/ guidance/ SOP/ process.
Ensure all staff and clinicians have read and understood the patient-led ordering policy/ guideline/ guidance/ SOP/ process.
Ensure nominated and new members of staff are trained on PLO



Ensure that the policy/ guideline/ guidance/ SOP/ process is regularly reviewed in line with other general practice's policies. The practice could nominate a PLO champion for their practice
Take responsibility for adapting this PLO policy for their practice.
Ensure that the agreed vulnerable patients are appropriately supported
Taking responsibility for communicating the PLO to patients
Taking responsibility for communicating the changes to other key stakeholders, e.g. affected community pharmacies
Suggestion to identify possible PLO Champions/ NHS Ambassadors (Nominated practice staff member)
Act as the PLO/NHS Ambassador/champion within their practice
Promote patient-led ordering using the NHS App and support vulnerable patients with ordering their medication. Maintain the agreed vulnerable list and ensure the requests from patients excluded from PLO are managed appropriately
Resolve any patient queries or complaints relating to patient-led ordering. Escalate to the Practice Manager if unable to resolve
Support with the identification of "vulnerable patients" who will require an alternative ordering option at rollout and ongoing basis

Practice clinicians:

Support the use of the NHS App for patient-led ordering with their patients.
Support with the identification of "vulnerable patients" who will require an alternative ordering option at rollout and ongoing basis

Other practice staff:

Support the use of the NHS App for patient-led ordering with their patients



Support with the identification of “vulnerable patients” who will require an alternative ordering option at rollout and ongoing basis

Resolve any patient queries or complaints relating to patient-led ordering if appropriate

Escalate to the PLO champion/ NHS Ambassador/Practice Manager if unable to resolve

Patient-Led Ordering of Medicines via the NHS App (PLO)

Frequently Asked Questions

Q. How is a vulnerable patient defined in the context of PLO?

A vulnerable patient, in the context of PLO, refers to individuals who may face challenges using the NHS App to order their medications due to various factors such as medical, cognitive, digital or language barriers. This includes, but is not limited to, patients with severe disabilities, cognitive impairments, those who are at risk of medication misuse or require additional support with managing their prescriptions.

Q. What does "redacted patient access" mean?

"Redacted patient access" refers to restricted visibility of certain medical records or services within a patient's online account, often due to safeguarding concerns, confidentiality requirements, or data protection policies. More information on managing patient access settings in EMIS Web is available [here](#).(source – Optum)

Q. Can our practice accept repeat medication requests from third party prescription ordering apps other than the NHS App?

The NHS App is the recommended platform for ordering repeat medication prescriptions. However, there are several third-party apps available that offer digital prescription request services. Many of these apps provide additional features such as full medical records access, appointment management, and online messaging, depending on the functionality supported by the GP practice. If a third-party app is used, it must authenticate via NHS login and link directly with the GP practice system. Apps meeting these criteria are considered acceptable alternatives.

Q. How can a family member order repeat medication on behalf of a patient using the NHS app (e.g. parents of children or carers for elderly patients)?

The NHS App allows proxy access, enabling parents, carers, or family members to order medication on behalf of a patient. To set up proxy access, the patient and the person requesting the proxy access must be registered with the same GP practice and will need to request an access authorisation through their GP practice. Once approved, the nominated individual can access the patient's medication records and place repeat prescription orders on their behalf.



Q. Are care home residents exempt from PLO?

Yes, care home residents are exempt from Patient-Led Ordering (PLO) via the NHS App, as this functionality is currently unavailable. Care homes are responsible for ordering medication for their residents and a third party should not do this. Care home teams can currently order residents' prescriptions using one of the following methods:

- Using a third-party app (e.g., Patient Access for EMIS practices)
- Via Proxy ordering ([What is proxy access? - NHS](#))(speak to your place care homes lead to support care homes with this).[NHS England » Ordering medication using proxy access: Guidance for care homes, GP practices and community pharmacies](#)
- Directly from the GP practice via email, repeat slips, or any other locally agreed manual process

Q. Are patients who receive Medicine Compliance Aids (MCA)through community pharmacies exempt from PLO?

As an interim measure, MCA patients will initially be exempt from PLO until Community Pharmacies conduct a full review of their suitability for receiving MCA. Once the final list of MCA patients is agreed upon by the practice and Community Pharmacies, their medication ordering management will be handled either by the patient through an agreed system or by the Community Pharmacies as agreed between the patient, practice and pharmacy. Please see the BC ICB guidance for MCAs:

[Black Country ICB 7-day and MDS Prescribing policy - version 6.1.pdf](#)

Q. What will be the impact on workload?

Based on the experiences of other ICBs that have already gone through a similar change in process, there will be an initial period of increased workload (first 4-6 weeks) whilst patients are communicated to and get used to the new system. Following this should be a decrease in the workload for both GP practices and community pharmacies, as the majority of the administration and queries associated with managing and ordering repeats are removed by moving from analogue to digital. We envisage that this will lead to increased efficiency in the repeat prescription process for both community pharmacies and GP practices as more patients are empowered to use the NHS App.

Q. Why not just change to Electronic Repeat Dispensing (eRD)?

eRD is seen as a key tool to help improve efficiency and effectiveness and many practices are actively seeking to increase usage of this option. However, eRD is not suitable for all patients and patients need to be assessed on an individual basis for suitability. For further information, toolkits and training on eRD, please see the link below:- [Black Country ICB 7-day and MDS Prescribing policy - version 6.1.pdf](#)



Q. What will happen if patients run out of medicines?

There needs to be excellent communication between GPs, Patients and Pharmacies to ensure patients understand any changes that might affect them and so order their medicines in a timely manner so that they do not run out. Patients requiring assistance with ordering will have special considerations/support, which will significantly reduce this risk. If a patient has run out of medicine, they should follow the same processes they follow now.

Q. What if patients have no online capability and are not mobile enough to make it to the GP Practice?

The patient could ask a relative or carer to order on their behalf, either by making an online request for them, by dropping the repeat prescription request at the surgery or even posting the repeat prescription request. Black Country ICB is loaning Laptops to local people to help improve digital access to NHS services to help support digital inequality. More information can be found on this link: [Free NHS laptops to help tackle digital inequality :: Black Country ICB](#).

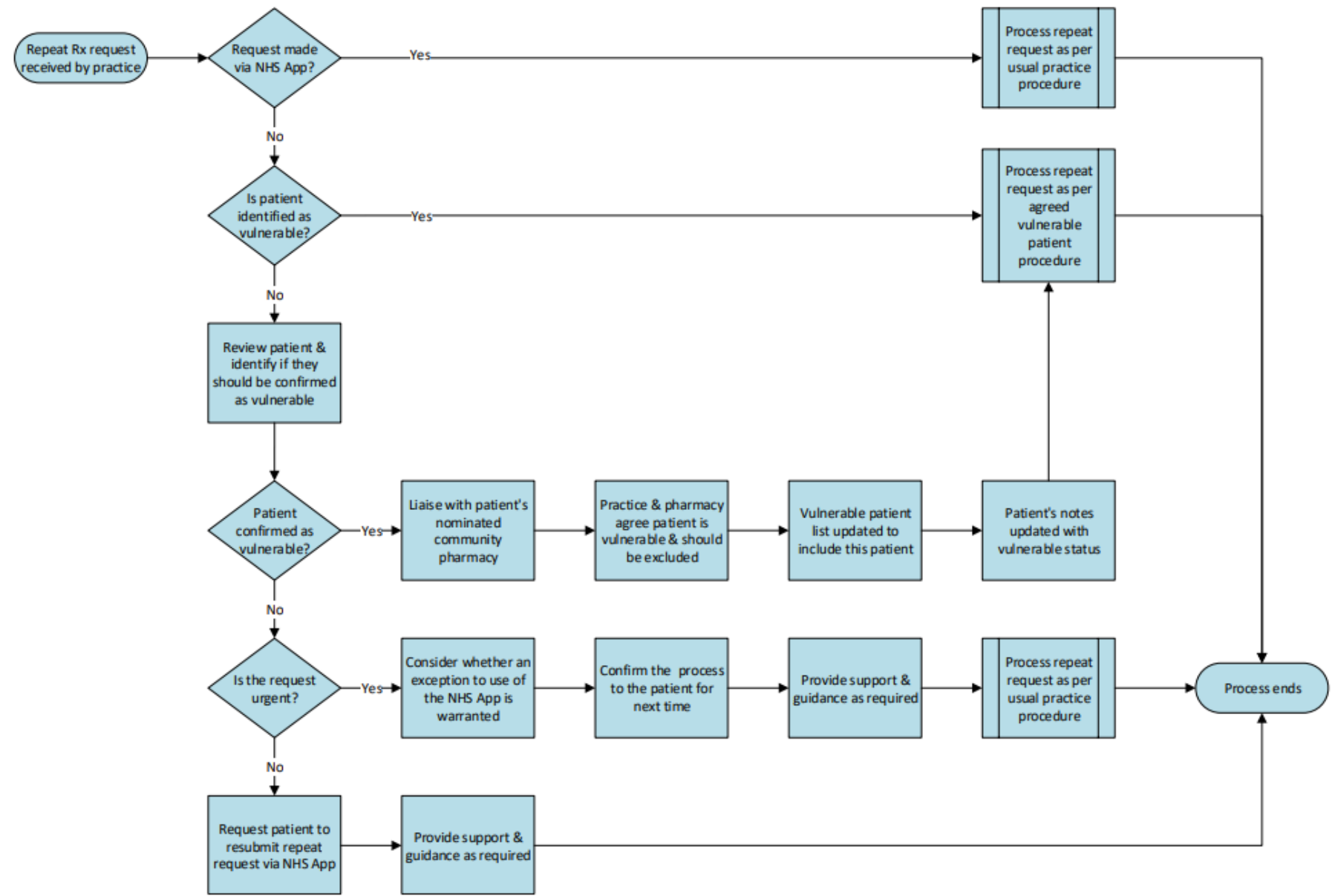
It directs to certain pharmacies and it suggests some apps that are not integrated with GP systems and are therefore not recommended.

Q. What other tools have been created to support this PLO policy: [Patient Led Ordering](#)

1. Communication Toolkit
2. Letter to Community Pharmacies from practices template
3. Communication from ICB and CPBC to community pharmacies
4. Example communication letter for patients
5. PLO Implementation/Roll-out planner
6. HEAT assessment



PATIENT LED ORDERING (PLO) FLOWCHART



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