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

**Rollout Activity Planner**

**Introduction**

This document should be used for PLO implementation in conjunction with the PLO SOP content available for download, alongside all other PLO supporting documents, in PDF and Microsoft Word formats from the Greater Manchester Primary Care Provider Board GM PCB website:

<https://www.gmpcb.org.uk/general-practice/working-with-community-pharmacy/patient-led-ordering/>.

To ensure the **safe** and effective implementation of PLO, it is essential that GP practices complete the activities below within the timelines indicated. Work on the implementation of PLO must commence **12 weeks before** the go-live date.

PLO via the NHS app may not be suitable for some patients for various factors. Therefore, it is very important to work closely with community pharmacies and patients to identify those patients who should be exempt from being required to use NHS app to order their medication. Suitable alternative ordering methods must be established and communicated clearly to both patients/carers and their nominated community pharmacy. This could mean that community pharmacies continue to order on behalf of some patients, where all partners agree this is the best solution for a particular individual (please see **section 7** of the rollout activity planner below).

This document is also available and embedded below in Excel format to be used electronically:

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**PLO Implementation Timeline**

**Go-live date**

The vulnerable patients list is regularly reviewed and updated

accordingly

**PLO Rollout Activity Planner**

|  | Activity | By whom? | By when? | Date Completed |
| --- | --- | --- | --- | --- |
|  | **Practice name:****Name of person completing:****PLO go-live date:** |
| 1 | **Pre-Implementation Preparation**  | **Practice Manager or identified PLO champion** | **3 months before go-live** |  |
| Download and read the PLO documents from [GM PCB - Patient-led ordering](https://gmpcb.org.uk/general-practice/working-with-community-pharmacy/patient-led-ordering/) |  |  |  |
| Decide and confirm your go-live date which must allow for **at least 12 weeks** implementation time |  |  |  |
| Review your practice’s policies and procedures for patient access to their online records (see [GP online services clinical system configuration](https://digital.nhs.uk/services/nhs-app/nhs-app-guidance-for-gp-practices/guidance-on-nhs-app-features/accelerating-patient-access-to-their-record/gp-online-services-clinical-system-configuration) for more information) |  |  |  |
| 2 | **Equality and Impact Assessment (EIA)** | **Practice Manager or identified PLO champion**  | **3 months before go-live** |  |
| Use the GM EIA template (see **appendix A**) to adapt to your local community and ensure the mitigations outlined in the template and any locally identified mitigations are in place  |  |  |  |
| Make reasonable adjustments to ensure all needs are met e.g. patient information materials in different languages, different modes of instructions etc |  |  |  |
| Ensure all key personnel are aware of the different needs of the patient population and any mitigating actions that need to be put in place to support patients |  |  |  |
| Put in place suitable processes to support those patients who are unable or decline to use the NHS app for ordering repeat medications |  |  |  |
| 3 | **Community pharmacy, Healthwatch and PCN engagement** | **Practice Manager or identified PLO champion** | **3 months before go-live** |  |
| Contact all your community pharmacies affected by the implementation to inform them of the changes and go-live date in your practice (see **appendix B** for a standard notification template) |  |  |  |
| Inform Community Pharmacy Greater Manchester (CPGM formally known as GMLPC) of your intention of implementing PLO and your go-live date by emailing enquiries@cpgm.org.uk  |  |  |  |
| Share the PLO communication toolkit, roll out activity planer and SOP content with the affected community pharmacies (available to download from [GM PCB - Patient-led ordering](https://gmpcb.org.uk/general-practice/working-with-community-pharmacy/patient-led-ordering/)) |  |  |  |
| Inform your PCN of your PLO implementation and your go-live date |  |  |  |
| Inform your local Healthwatch of your intention to implement PLO and your go-live date |  |  |  |
| Share your best practices with the PCN to increase uptake |  |  |  |
| 4 | **Practice staff training** | **Practice Manager or identified PLO champion** | **At least 3-2 months** |  |
| Assign roles and responsibilities to your teams for the implementation (see **appendix C** for roles & responsibilities) |  |  |  |
| Provide staff training on the use of the NHS app ensuring sufficient numbers of people are trained to provide resilience and continuity (the following resource can be used: <https://digital.nhs.uk/services/nhs-app/resources>) |  |  |  |
| Ensure appropriate staff are able to deal with patient queries |  |  |  |
| Arrange PLO drop-in clinics in your practice to support patients onsite with any queries |  |  |  |
| Agree a communication channel for PLO queries between prescribers, nominated practice staff and the patient’s nominated pharmacy |  |  |  |
| 5 | **Guidance/ guideline/ process/ standard operating procedure (SOP) content** | **Practice Manager or identified PLO champion** | **2 months before go-live** |  |
| GP practices update their existing documents to reflect PLO changes |  |  |  |
| 6 | **Patient Engagement**  | **Practice Manager or identified PLO champion** | **2 months before go-live** |  |
| Communicate the changes with your patients (please see the GM PLO communications toolkit click [here](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fgmpcb.org.uk%2Fwp-content%2Fuploads%2FPatient-led-ordering-2024-communications-toolkit-Final-04-12-24.docx&wdOrigin=BROWSELINK) to download) |  |  |  |
| Inform the affected community pharmacies once patient comms have been sent out |  |  |  |
| Ask the affected community pharmacies to support with discussions about the change with the patients |  |  |  |
| 7 | **Identification of vulnerable patients list** | **Community Pharmacy, all practices staff, practice manager and identified PLO champion** | **2 months before go-live** |  |
| All practice staff involved in prescription processing to identify vulnerable patients who might not be suitable for PLO (see **appendix D** for potential exemptions from PLO e.g. MDS patients) |  |  |  |
| As an interim measure, MDS patients will initially be exempt from PLO until Community Pharmacies conduct a full review of their suitability for receiving MDS. Once the final list of MDS patients is agreed upon by the practice and Community Pharmacies, their medication ordering management will be handled by the Community Pharmacies. |  |  |  |
| Confirm how excluded patients will manage ordering their medication using alternative methods  |  |  |  |
| Ask all affected community pharmacies to identify vulnerable patients who might not be suitable for PLO and to communicate this information back to the practice |  |  |  |
| The practice to compare their list with the community pharmacy’s list and to agree in conjunction with affected community pharmacies a final list of vulnerable patients not suitable for PLO |  |  |  |
| Share the final agreed list with the relevant community pharmacies |  |  |  |
| This to be documented in the practice and affected community pharmacies IT systems |  |  |  |
| Inform these patients on the final list of the agreed alternative method of ordering their medication |  |  |  |
| 8 | **Final Patient Communication**  | **Practice Manager or identified PLO champion** | **2 weeks before go-live** |  |
| Send a reminder text 2 weeks before the go-live date to your patients (please see the GM PLO communications toolkit click [here](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fgmpcb.org.uk%2Fwp-content%2Fuploads%2FPatient-led-ordering-2024-communications-toolkit-Final-04-12-24.docx&wdOrigin=BROWSELINK) for communicating the changes with your patients) |  |  |  |

**Appendix A: GM EIA Template**

The GM EIA template is embedded in this document below and is also available to download, alongside all other supporting documents, in PDF and Microsoft Word from the PCB website (<https://www.gmpcb.org.uk/general-practice/working-with-community-pharmacy/patient-led-ordering/>).



**Appendix B: PLO GP to Community Pharmacy Notification Template**

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Dear Pharmacy Team,

Following the notification of the launch of Patient-Led Ordering of medicines (PLO) via the NHS App by NHS Greater Manchester last year, we are now moving forward with implementation in the coming months, with a planned go-live date on [three months from date].

This change aims to empower patients to take a more active role in managing their repeat prescriptions while helping to reduce medicine waste and improve safety. We recognise that this will be a shift for some patients, and we want to collaborate with you to ensure a smooth transition.

Your partnership is essential in supporting patients through this change. We greatly value your insight in identifying patients who may require exemptions from using the NHS App, such as those receiving medicines via monitored dosage systems (MDS) or those who may struggle to manage their prescriptions independently. Working together, we can ensure these patients continue to receive the support they need.

For more information, please refer to the briefing for community pharmacy: [Patient-Led Ordering Briefing](https://greatermanchester.communitypharmacy.org.uk/wp-content/uploads/sites/118/2025/01/CPGM-PLO-final.pdf). Further details about PLO can also be found on the [Community Pharmacy Greater Manchester](https://greatermanchester.communitypharmacy.org.uk/patient-led-ordering-plo/) website.

**Next Steps:**

1. Please start identifying patients who may require exemptions from PLO of medicines via the NHS App. We will be doing the same on our side
2. Please send your compiled list by [X date] to allow us to review and align with our own records
3. We will be in touch to discuss and agree on the final list of exempted patients
4. Together, we will ensure patients receive appropriate support and communication regarding the changes

If you have any questions or would like to discuss how we can best support patients together, please don’t hesitate to get in touch. We appreciate your collaboration in delivering the best care for our patients.

Best Wishes,

[Your Name]

[Your Role]

[Your Practice]

**Appendix C: 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. Nominate a PLO champion for their practice.
* Take responsibility for adapting the GM EIA template for their practice.
* Ensure agreed vulnerable patients are appropriately supported.
* Taking responsibility for communicating PLO to patients
* Taking responsibility for communicating the changes to other key stakeholders e.g. affected community pharmacies

**Identified PLO Champions (Nominated practice staff member)**

* Act as the PLO 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/ Practice Manager if unable to resolve



**Appendix D: Potential Exemptions from PLO**

**Potential Exemptions from Patient-Led Ordering of Medicines**

Certain patient groups should be considered for exemption from patient-led ordering of medicines to ensure patient safety, continuity of care, and appropriate medication management. GP practices and pharmacies should work together to identify and support these patients.

**Patients Receiving Monitored Dosage Systems (MDS)**

This is an interim measure to allow a review of MDS patients.

At this time all patients using MDS require pharmacy-led ordering to ensure sufficient preparation time and to prevent delays and medication errors. Pharmacies must conduct an equality assessment (if this has not already been completed) to confirm that MDS is necessary based on clinical need rather than convenience. Alternative options, such as MAR charts, may be equally effective for some patients.

During this review period, patients assessed as not requiring MDS should be supported to receive medicines in original packs with appropriate adjustments.

Supporting information is available here: <https://greatermanchester.communitypharmacy.org.uk/mds-and-assisted-medicines-guidance/>

**Other Patient Groups Potentially Requiring Alternative Ordering Methods**
Some patients may need alternative support for ordering medications, particularly if they do not have family or carer assistance. These include:

* **Vulnerable Patients:** Those with learning disabilities, severe mental health conditions, dementia, or cognitive impairments who may struggle with digital ordering systems
* **Patients with Physical Disabilities:** Individuals with conditions such as severe arthritis or neurological disorders that impact dexterity and digital access
* **Patients with Digital or Language Barriers:** Those with low digital literacy, lack of internet access, or language barriers preventing effective use of online systems
* **Patients at Risk of Medication Misuse:** Individuals with substance misuse issues or erratic lifestyles who require closer monitoring of prescriptions

All patients should be assessed individually to determine the most suitable ordering method. Where exemptions apply, clear communication between GP practices and pharmacies is essential to ensure continuity of care. Contingency plans should also be in place for safeguarding concerns or unexpected changes in patient circumstances.

Please note: some patients in the above groups may still wish to manage their own prescription ordering and should be supported to do so where possible.