

In the evolving landscape of private healthcare for medicinal cannabis, prospective patients often encounter the term **MDT review**, or multidisciplinary team review. Cannabis clinics tout this approach as a *quality signal*, reassuring patients that their treatment plans are overseen by a team of healthcare professionals rather than a single clinician working in isolation. But what does an MDT review truly entail? What role does it play in **clinical governance**, and why is it particularly relevant in the context of cannabis prescribing in the UK? This blog post will clarify these questions, dissect common marketing claims, and separate the realities of legality, access, and regulation.

Understanding the MDT Review

An **MDT review** consists of multiple healthcare professionals from different disciplines collaborating to evaluate and plan patient care. Traditionally, such teams might include doctors, nurses, pharmacists, psychologists, and other specialists, working together to offer a holistic and balanced perspective on a patient's condition and treatment options.

In private cannabis clinics, an MDT typically involves specialists familiar with the therapeutic applications and risks of medicinal cannabis, along with general practitioners or consultants, pharmacists, and sometimes mental health professionals. The aim is to ensure treatments align with best clinical practice standards and patient safety protocols.

Why Cannabis Clinics Promote MDT Reviews

- **Quality Signal:** Having an MDT ostensibly suggests robust clinical governance and thorough treatment scrutiny.
- **Complexity of Treatment:** Medicinal cannabis prescriptions require nuanced decisions—considering patient history, contraindications, and potential drug interactions—making input from multiple professionals valuable.
- **Regulatory Confidence:** Clinics may use MDT language to demonstrate oversight, compliance with regulation, and to satisfy oversight bodies.

However, it is important to critically assess how these MDTs function in practice, especially in private cannabis clinics where regulation and genuine team involvement can vary widely.

Legality vs Real-World Access: The Uneven Terrain

Since November 2018, medicinal cannabis has been legal in the UK, including England, Wales, Scotland, and Northern Ireland. However, real-world access remains limited. NHS prescriptions are extremely rare due to strict guidelines and the lack of high-quality evidence meeting the NHS's cost-effectiveness and clinical thresholds.

This leads many patients to seek private clinics offering cannabis prescriptions. These clinics argue they fill an unmet need, operating in a market shaped by an NHS funding gap. Yet, there is a delicate balance between legality (what is lawful under UK law) and availability (whether patients can realistically access treatment through the NHS or privately).

You ever wonder why private cannabis clinics, therefore, often emphasise tools like mdt reviews to differentiate themselves in a competitive market and project clinical legitimacy. But transparency around costs, consultation protocols, and follow-up prescribing practices is often lacking.

Who Can Prescribe Medicinal Cannabis and Why the GMC Specialist Register Matters

In all UK nations, only doctors on the **GMC Specialist Register** can initiate and prescribe medicinal cannabis. This is a legal requirement to ensure prescribers have the appropriate expertise to assess complex cases safely.

The Specialist Register includes consultants and specialists who have demonstrated advanced knowledge and training in specific medical fields. For medicinal cannabis, examples might include pain specialists, neurologists, or psychiatrists. This safeguard aims to limit inappropriate prescribing.

Clinics that use the MDT approach must ensure their prescribers meet these professional criteria. Simply having a multidisciplinary label does not guarantee each member's credentials or direct involvement in the prescribing decision.

Regulation and the Role of the CQC in England

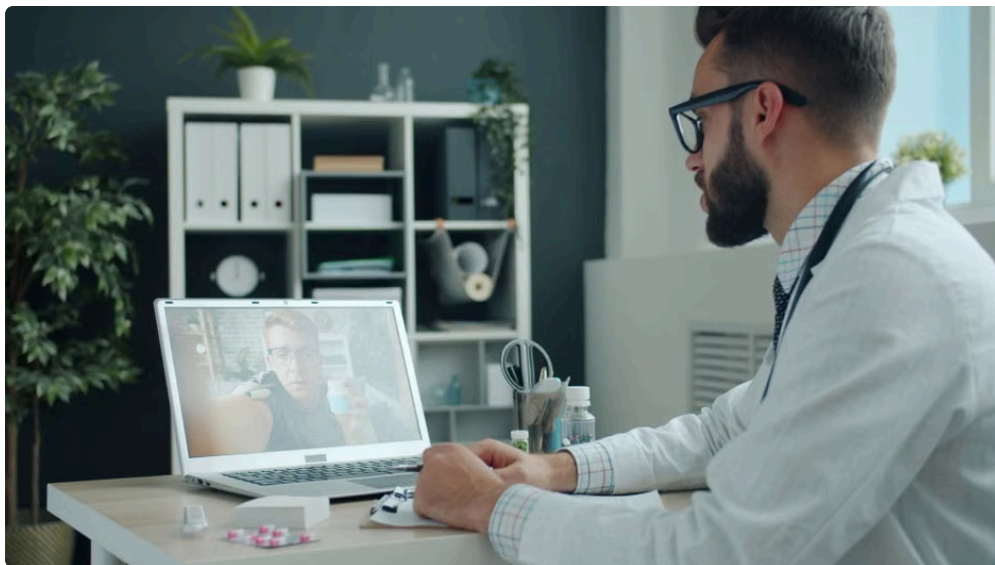
In England, cannabis clinics fall under the oversight of the **Care Quality Commission (CQC)** as registered healthcare providers. This means they must meet standards relating to patient safety, clinical governance, and quality of care.

Importantly, if a clinic offers **remote consultations** and **remote prescribing**—both commonplace in cannabis prescribing—they must declare these services to the CQC. Transparency post-declaration includes:

- Clear protocols for verifying patient identity and medical history
- Safe and secure remote prescribing systems
- Follow-up and monitoring policies

Despite these rules, many clinics do not disclose consultation fees or prescription pricing [todaynews.co.uk](https://www.todaynews.co.uk) clearly on their websites, leaving patients in the dark about the full cost implications.





Common Mistake: Lack of Transparency on Pricing

A recurring issue in the private medicinal cannabis market is failure to state consultation and prescription costs upfront. Patients frequently report discovering additional fees only after initial contacts.

Best practice for reputable clinics includes transparent pricing that covers:

1. Initial consultation (including MDT involvement if applicable)
2. Follow-up appointments
3. Cost of prescriptions, including potential repeats
4. Additional support services (e.g., pharmacist counselling)

Without this clarity, patients cannot make informed choices, and the risk of unclear financial commitments undermines trust in clinical governance claims.

The Role of Video Consultations in MDT Reviews

The rise of video consultations enables multidisciplinary teams to collaborate efficiently, especially when specialists are geographically remote. This technology supports:

- Joint case discussions without requiring patients to attend multiple in-person appointments
- Timely remote assessment and management
- Patient convenience and reduced travel burdens

For cannabis clinics, video appointments combined with remote prescribing form the backbone of modern service delivery. However, clinics must still comply with regulatory requirements, safeguarding patient confidentiality and ensuring clinical decisions remain evidence-informed.

Checklist: Evaluating the Value of an MDT Review in a Cannabis Clinic

Checklist Item What to Look For Why It Matters Qualified Prescribers on GMC Specialist Register Names and specialisms stated publicly Ensures appropriate expertise for safe prescribing Declared MDT Members and Roles Clear description of who is involved and how Confirms genuine multidisciplinary input over tokenism CQC Registration and Declarations Explicit mention of video consultations and remote prescribing Compliance with legal requirements; patient safety assurances Transparent Pricing Information Consultation and prescription costs stated

upfront Allows informed patient decisions; avoids hidden fees Evidence-Based Clinical Governance Policies
Published protocols, audit statements, patient feedback Indicates commitment to care quality and continuous improvement

Conclusion

An **MDT review** in private cannabis clinics can be a valuable *quality signal* indicating structured clinical governance and collaborative prescribing decisions. However, patients should approach such claims critically, verifying the credentials of prescribers, understanding the nature of the team's involvement, and seeking full transparency regarding consultation and prescription costs.

One client recently told me made a mistake that cost them thousands.. While UK law permits medicinal cannabis prescribing by qualified specialists, the gap in NHS funding and access creates a private market with variable standards. Regulatory oversight by bodies like the CQC in England helps set minimum safety and quality bars, especially for remote consultations and prescribing.

Ultimately, informed patients demand clarity and accountability. Cannabis clinics using MDT reviews should embrace transparency and robust governance to genuinely deliver safe, legal, and effective care—not just marketing buzzwords.