



Patient Guide

Exploring specialist medical cannabis assessment

People are always part of the picture

A gentle, practical guide to understanding the route and deciding what is right for you

Patient Guide v3 | v0.8.1 | 10 September 2026

SECTION 1

Welcome

You do not need to know everything today.

If you're reading this, there may be more than one thing going on at once: your own health, a clinic you don't know yet, maybe questions about work or home that haven't come up before. That's a lot to be holding, and you don't have to hold it alone.

This Guide is here to help you understand the route into specialist medical cannabis assessment, and to help you decide what, if anything, you want to do next.

There is no obligation to proceed. Reading this Guide does not commit you to anything.

Healing in Motion exists to help untangle exactly this kind of thing: the different systems and steps that don't always join up on their own, worked through with you, not done to you. We can help you understand this route and prepare for it. We do not diagnose, decide whether you are eligible, or make clinical decisions. A specialist clinician does that. Section 7 of this Guide sets out in full what we can and cannot do.

You can read this Guide in one sitting, or come back to it when you are ready. If you would prefer another format, such as large print or an accessible digital version, you can ask for one.

If you need urgent help now, you do not need to read the Guide first. Go straight to section 9 for the quickest routes to help.

What's in this Guide

- Medical cannabis in the UK, briefly
- Is specialist assessment worth exploring?
- Getting ready to talk to a clinician
- Practicalities: records, appointments and costs
- If you are prescribed: everyday life
- What Healing in Motion can and cannot do
- What happens next
- If you need help right now

Start wherever you need to. If you already know why you are here, you may want to go straight to section 2.

SECTION 2**Medical cannabis in the UK, briefly**

It helps to start with the basics, in plain terms, before anything else.

A cannabis-based product for medicinal use is a medicine, prescribed for a named person by a specialist clinician, following an individual assessment.

Cannabis-based products for medicinal use have been legally prescribable in the UK since 1 November 2018. Prescribing happens within a regulated medical framework, with clinical oversight from the prescribing specialist.

Specialist assessment and prescribing arrangements are not all identical. Routes, clinics and processes vary, and this Guide describes the general shape of the route rather than any one clinic's process.

The difference between a prescribed medicine and cannabis that has not been prescribed is not a question of which is more or less serious as a personal choice. It is about whether use is lawfully prescribed for a named person and clinically overseen, or not.

This Guide does not list the conditions medical cannabis may be considered for, and it does not promise that assessment will lead to a particular outcome. What matters is your own situation, discussed with a specialist clinician.

What this means in practice

Medical cannabis is a broad term used for prescription medicines within this area of care. It does not describe one standard medicine or one standard experience. If a specialist thinks a prescription may be suitable, they should explain what they are considering for you, how it would be used, the important risks and side effects, and how your care would be monitored.

You do not need to arrive knowing the language or having an opinion about treatment. If your picture of cannabis comes from headlines, stigma or experiences outside healthcare, it is understandable to have questions. Assessment is the place to ask what may be different in prescribed care, what you might notice, what would count as a concern, and what choices you have.

Being assessed does not commit you to treatment, and being offered a prescription does not mean you have to accept it. You can ask for an explanation in plain language and take the time you need to decide.

SECTION 3**Is specialist assessment worth exploring?**

Whatever has brought you to this page, wanting to understand your options is a reasonable place to start.

People consider specialist assessment for different reasons. Some feel their current treatment or management is not meeting their needs. Some are finding day-to-day life difficult in ways they want to understand differently. Some simply want to know what another option might look like.

Exploring specialist assessment, booking an appointment, and attending do not guarantee that you will be found eligible or that a prescription will follow. A clinician will look at your own circumstances, not a general rule.

Some routes also include an initial step before that assessment, such as a phone call, online form or triage check. This initial step is there to check the basics and see whether it is worth taking your enquiry further. It is not a clinical decision, and getting through it does not mean you have been approved for treatment. Only a specialist prescriber, following a full assessment, can decide whether treatment is suitable for you.

What specialist assessment actually involves

A specialist assessment is an individual clinical conversation, not a test with a pass mark. A clinician may discuss your medical history, your current medicines, any treatments you have already tried, what you hope to achieve, possible risks, alternatives, and how any treatment would be monitored.

If you are worried about feeling 'high', impaired, anxious or unlike yourself, say that plainly. You are not being difficult, and you do not need to hide the concern. The clinician can explain the risks and side effects that matter in your situation, how any treatment would be introduced and monitored, and what to do if you are worried. You can ask for time to think, and you do not have to agree to treatment you do not understand or want.

Records and processes vary between clinics, and some situations may need extra steps.

There are several possible outcomes from an assessment. These include a prescription, a request for more information, discussion of another option, a decision to pause, or a decision not to prescribe. Any of these is a legitimate outcome. Uncertainty at this stage is normal, not a sign you have done something wrong.

This Guide does not set a fixed rule about how much treatment you need to have already tried before assessment is offered. Requirements can vary between clinics, and a clinic will explain what they need to know. If you are unsure whether assessment is right for you, that uncertainty is itself a reasonable starting point for a conversation.

SECTION 4

Getting ready to talk to a clinician

This part is about you, not about the system. Take whatever time you need with it.

Before you talk to anyone, whether that's a specialist clinician or Healing in Motion, it can help to be clear about what matters most to you. Some people find it useful to think about:

- What is hardest for you at the moment?
- What would meaningful improvement allow you to do, manage or enjoy?
- What matters most to you to protect? For example, alertness, work, caring responsibilities, sleep, or independence.
- What worries you about this route, or about treatment itself?
- What would make you decide not to continue?

There are no right answers. Use your own words. This is about your priorities, not about matching yourself to a particular product or type of treatment.

Building your own questions

Consultation is a conversation, not a test. Thinking through a few questions in advance can help you get the most from it. You might start with:

- “I want help with...”
- “I need to understand...”
- “I am worried about...”
- “How will we know if this is working?”
- “What might I notice, and what should I do if I feel unlike myself or less able to do something safely?”

Questions other people have found useful include ones about whether treatment might be suitable for you, the possible risks, how it might interact with other medicines you take, anything relevant to impairment (including driving, which is covered in section 6), how you would be monitored, what it may cost, and what happens if treatment does not help.

Space to write your questions

Use the space below, or your own notes, to write down two or three questions that are genuinely yours to ask.

1. _____
2. _____
3. _____

You do not have to answer any question you are not comfortable answering, either here or with a clinic. Only share what you choose to share, and what a clinic lawfully needs to know.

This page is yours to keep. Healing in Motion does not need to see what you write here unless you choose to share it.

SECTION 5

Practicalities: records, appointments and costs

Paperwork and admin can be one of the more tiring parts of any medical process, especially when you're not feeling your best. Here's what tends to come up, and why.

Clinics may ask for information such as relevant GP or specialist records, a list of your current medicines, and details of previous treatment. This helps the clinician understand your history and make an informed assessment. Not every clinic will ask for exactly the same things.

If you are finding it hard to get hold of your records, or they are taking a while to come through, tell the clinic. This is a common part of the process, not something you have done wrong. Clinics are generally used to it, and can often explain what to expect, whether that means waiting a little longer, requesting records in a different way, or continuing with other parts of the process in the meantime. Healing in Motion can help you request records, or keep track of what has been asked for and what is still outstanding.

Consultation arrangements, prescribing, dispensing, pharmacy and follow-up can all vary between clinics. There is no single fixed process, so it is worth asking your chosen clinic to explain their own steps.

In general terms, if a clinician decides to prescribe, the steps that tend to follow are: a clinical decision, sometimes with a further review; a prescription being issued; arranging payment, usually through the clinic's own pharmacy; the pharmacy dispensing your medicine; you receiving it; and then ongoing follow-up, monitoring and repeat prescriptions where needed.

Most specialist medical cannabis care in the UK is provided privately. Private care can involve separate costs for the initial consultation, for the medicine itself, and for follow-up appointments. Costs vary and can change, so this Guide does not quote prices. Ask the clinic for a full, current explanation of costs before you commit to anything.

You are allowed to ask for costs in writing. Useful questions include what is included in the initial fee, what may be charged separately, which costs are one-off or ongoing, when payment is due, and what happens financially if the plan changes or you decide not to continue. The clinic should explain its own current charges. Healing in Motion can help you organise the questions, but cannot confirm a clinic's prices for it.

Some clinics may offer a refund or another fee arrangement if treatment is not approved. Policies vary, so check the clinic's current written terms before paying.

Choosing a clinic

If you are choosing between clinics, here are some neutral, non-clinical things people often find it useful to check. This is not a ranking or a recommendation, and any decision about which clinic to use is yours.

- Regulatory status, for example whether the clinic is registered with the relevant healthcare regulator for the services it provides.
- Who runs the clinic, and how easy it is to find clear information about the organisation itself.
- How the clinic manages clinical governance, such as prescriber oversight and safety processes.
- What the clinic's complaints process is, and how you would use it if something went wrong.
- How the clinic's pharmacy and dispensing arrangements work.
- What the costs are, and when you would need to pay them.
- How accessible the clinic is, and how easy it is to communicate with them.
- What follow-up and monitoring arrangements the clinic offers.

Healing in Motion can help you think through these questions. We do not recommend or rank particular clinics, and we remain outside the clinical decision itself.

SECTION 6**If you are prescribed: everyday life**

This is often where things get complicated, not because you have done anything wrong, but because your prescription now sits alongside several other systems: your employer, your landlord, the road, sometimes the police, each with their own rules that don't always talk to each other. Untangling how these fit together, calmly and in plain language, is exactly what Healing in Motion is here for.

If you are prescribed medical cannabis, follow your prescriber's and pharmacist's instructions. Your clinic is the right place for questions about your treatment, side effects, or your medicine generally.

Being prescribed a medicine does not mean you have done anything wrong. It does mean you need clear information about how to use and store it, and about any rules that affect your own circumstances. If something feels worrying or unfamiliar, you are allowed to ask for it to be explained again in plain language.

A prescription is about your treatment. It does not automatically settle every question that might come up in the rest of your life. Areas such as driving, employment, housing, travel and contact with the police can involve separate rules, and each may look at your individual circumstances.

Driving

Driving while impaired is against the law. A prescription does not by itself authorise driving while impaired. The exact legal position, including any medical defence that may apply, should come from a properly checked, current legal source, not from this page. A positive test result and impairment are not automatically the same thing in law, but the precise wording that applies to your situation needs to come from a qualified source. Ask Healing in Motion to point you to current, verified guidance.

Employment, housing, travel and policing

Employers, housing providers, travel authorities and the police may each apply their own rules, and may look at your particular circumstances. A prescription is relevant, but it does not remove the need for these organisations to consider the situation in front of them. Where you need clear guidance for one of these areas, ask Healing in Motion to point you to a current, properly checked source, or seek advice from someone with the right expertise for that area.

Storing and carrying your medication

It is worth storing your medication safely and out of reach of anyone it is not prescribed for, and keeping it in its original, labelled packaging. This can also make it easier to show what it is and that it is yours, for example if you are asked about it at work, while travelling, or by the police. Your pharmacist or prescriber can advise on safe storage for your particular medicine. Where you need more detail, for example about travelling with your medication, ask Healing in Motion to point you to current, properly checked guidance. This section is deliberately brief. It exists so you know which wider-life questions might come up, and where to go for a proper answer, not to answer them here.

SECTION 7

What Healing in Motion can and cannot do

What we can do

- Explain the route into specialist assessment.
- Help you organise the information a clinic may need.
- Support you in preparing for a consultation.
- Give you neutral, non-clinical information to help you think about your choice of clinic, for example service factors rather than clinical ones.
- Help with practical, administrative tasks and paperwork, where you ask us to.
- Help you keep track of where you are and what comes next.

What we cannot do

- We cannot diagnose you.
- We cannot decide whether you are eligible for treatment.
- We cannot recommend a particular treatment, product, dose or clinic on clinical grounds.
- We cannot interpret your symptoms clinically.
- We cannot prescribe.
- We are not a substitute for a qualified clinician, or for any other qualified professional you need.

We won't pretend to have authority we don't have, and we won't leave you to work out the parts we can help with on your own either.

If you ever want us to communicate with a named organisation on your behalf, such as an employer or housing provider, we can only do that with your written authority. This is optional, and only needed if you ask us to act for you in that way. We will explain how that works if and when it becomes relevant.

SECTION 8

What happens next

After reading this Guide, some of the choices open to you are to:

- continue independently, using what you have read;
- ask Healing in Motion for Your Next Steps, a resource that takes you further into practical preparation;
- arrange another conversation with Healing in Motion;
- pause, and come back to this when you are ready;
- decide not to continue; or
- ask for this Guide in another format.

None of these choices is wrong, and none of them commits you to anything further. Whatever you choose now, you are allowed to change your mind later.

In broad terms, the route ahead can include preparing for a consultation, choosing a clinic, gathering any records a clinic asks for, attending specialist assessment, and, if you are prescribed, ongoing care and follow-up. Each stage has its own, more detailed guidance, which Healing in Motion can point you to when it becomes relevant.

If this Guide is being used as part of an active case with Healing in Motion, we will confirm in writing what happens next, who is responsible, and when.

SECTION 9

If you need help right now

If things feel urgent right now, you do not need to read anything else in this Guide first. Go straight to whichever of these fits your situation.

Healing in Motion is not an emergency service and not a clinical service. If you or someone else needs urgent help, please use one of the routes below.

- If there is immediate danger, or a medical emergency: call 999, or go to your nearest A&E.
- If you need urgent medical help that is not an emergency: contact NHS 111, or your appropriate local NHS service.
- If you have questions about your treatment, side effects, or something about your medicine that concerns you: contact your prescribing team, your pharmacist, your GP, or another appropriate clinician.
- If you are struggling to keep yourself, or somebody else, safe: use emergency services, or an urgent mental health support line.

If you are not sure which of these applies, it is always reasonable to start with NHS 111 or your GP, and let them direct you.

Reaching out for help, at any point, is not a failure. It's the right thing to do.

Tell us if this Guide could be better

Thank you for reading this Guide. We built it to help, not to get in the way, so if any part of it didn't, we want to know. Your feedback will not affect the support you receive or any clinic decision. You can answer only the questions you want to answer.

You can give this feedback anonymously if you prefer. Feedback helps us improve this Guide for other people.

Question	Response	Optional follow-up
Was anything unclear?	No / A little / Yes	What was unclear?
Was anything important missing?	No / Not sure / Yes	What did you expect to find?
Did anything feel overwhelming or unnecessary?	No / A little / Yes	Which part?
After reading it, do you understand what happens next?	Yes / Partly / No	In your own words, what do you think your next step could be?
Was the format usable for you?	Yes / Partly / No	What format or adjustment would help?
Anything else we should improve?	(your own words)	Please do not include clinical details.



General information

This Guide provides general information only. It is not medical, legal or financial advice and does not guarantee eligibility, a prescription, a treatment outcome or legal protection in any particular situation. For advice about your circumstances, speak to a specialist clinician or, where appropriate, another suitably qualified professional.

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