

MEDICAL CANNABIS (ACCESS) BILL

EXPLANATORY NOTES

What these notes do

These Explanatory Notes relate to the Medical Cannabis (Access) Bill as introduced in the House of Commons on 16 June 2021 (Bill 20).

- These Explanatory Notes have been prepared by the Member in Charge of the Bill, Jeff Smith MP, in order to assist the reader of the Bill and to help inform debate on it. They do not form part of the Bill and have not been endorsed by Parliament.
- These Explanatory Notes explain what each part of the Bill will mean in practice, provide background information on the development of policy and provide additional information on how the Bill will affect existing legislation in this area.
- These Explanatory Notes might best be read alongside the Bill. They are not, and are not intended to be, a comprehensive description of the Bill.

Table of Contents

Overview of the Bill	3
Policy and legal background	3
Commentary on provisions of Bill	3
Clause 1	3
Clause 2	4
Clause 3	4
Territorial extent and application	4
Commencement	4
Financial implications of the Bill	4

Overview of the Bill

- 1 The Bill aims to increase patient access to cannabis for medicinal use through two main measures.
- 2 First, the Bill requires the General Medical Council (GMC) to operate a register of General Practitioners (GPs) who may prescribe cannabis-based products in England. It also amends existing drugs regulations to permit such GPs to do so as currently only consultants may prescribe such medicines. It also requires the GMC to set the criteria, including training and professional development requirements, for a GP to be eligible for the register. Participation in the register would be on a voluntary and opt-in basis.
- 3 Second, the Bill establishes a Commission to propose a framework for the assessment of cannabis-based medicines and their suitability for NHS prescription in England, to sit alongside existing Medicines and Healthcare products Regulatory Agency (MHRA) processes for conventional pharmaceutical drugs. The Commission is also tasked with recommending any other measures to overcome barriers to access to cannabis-based medicines on the NHS.

Policy and legal background¹

- 4 Under the Misuse of Drugs Act 1971, cannabis is a controlled drug. The Act makes it illegal for people to possess, supply, produce, or import/export controlled drugs.
- 5 The Misuse of Drugs Regulations 2001 allow for the legitimate use of controlled drugs – substances are divided into five “schedules” which determine how they may be used. In July 2018, the then Home Secretary announced that, following advice from the Chief Medical Officer and the Advisory Council on the Misuse of Drugs, cannabis-derived medicinal products would be rescheduled.
- 6 In November 2018, the law was changed to allow the prescribing of cannabis-based medicines in certain circumstances. Revised regulations included a definition of cannabis-based medicines and set out that only doctors on the GMC specialist register – consultants - could prescribe them.
- 7 The National Clinical Institute for Health and Care Excellence (NICE) has issued guidance on prescribing cannabis-based medicines for people with intractable nausea and vomiting, chronic pain, spasticity and severe treatment-resistant epilepsy.
- 8 Concerns have been expressed that clinicians are reluctant to prescribe cannabis-based products and that there is insufficient randomised control trial evidence to enable further such products to be licenced for medical use. An NHS England review of [Barriers to accessing cannabis-based products for medicinal use on NHS prescription](#) was published in August 2019.

Commentary on provisions of Bill

Clause 1

- 9 Clause 1 amends the Medical Act 1983 to add a new section 34CA requiring the GMC to keep a
-

¹ For further background, see House of Commons Library, [Medical use of cannabis](#), by Sarah Barber and Elizabeth Rough, 2 November 2021.

register of GPs who may prescribe cannabis-based products. Such GPs must already be on the GMC register of GPs kept under section 34C of the 1983 Act.

- 10 Under subsection (2) of new section 34CA, the GMC would publish a scheme determining the criteria to be considered in determining whether a GP could be included in the register for prescribing cannabis, including training and professional development requirements.
- 11 Subsection (3) of new section 34CA provides that being on that register is voluntary and opt-in for GPs.

Clause 2

- 12 Clause 2 amends Regulation 16A of the Misuse of Drugs Regulations 2001, which was added in November 2018 to provide for cannabis-based products to be prescribed in certain circumstances. The existing regulations only provide for consultants (doctors on the GMC “specialist register”) to prescribe such products. Clause 2 would also allow GPs on the register created by Clause 1 to do so in England.

Clause 3

- 13 Clause 3 establishes a Commission on Cannabis-based Medicines with two purposes:
 - a. to propose a framework for the assessment of cannabis-based medicines and their suitability for prescription, and
 - b. to make recommendations for overcoming barriers to access to medical cannabis.
- 14 In proposing the assessment framework, the Commission is required to consider the role of evidence other than from conventional controlled trials, including from observational studies and other countries in which cannabis-based medicines are more widely available. The Commission must consider how the licensing criteria for cannabis-based medicines, including whole plant products, should interact with those used for conventional medicines.
- 15 Clause 3 also makes stipulations about the makeup of the Commission, which must be led by an independent person appointed by the Secretary of State, and the people and organisations they must consult.
- 16 The person leading the Commission must be appointed within 30 days of the Bill passing. The Commission has six months from the day of that appointment to report to the Secretary of State. In turn the Secretary of State is required to lay that report before Parliament as soon as possible.

Territorial extent and application

- 17 Health is a devolved matter. This Bill extends to the legal area of England and Wales, but its provisions only apply in England. Legislative consent from the devolved assemblies is therefore not required for this Bill.

Commencement

- 18 Under Clause 4(2), the Bill will come into force on the day it is passed.

Financial implications of the Bill

- 19 The Bill does not make any requirements for increased public expenditure or taxation. It therefore does not require a Money Resolution or Ways and Means Resolution.

These Explanatory Notes relate to the Medical Cannabis (Access) Bill as introduced in the House of Commons on 16 June 2021 (Bill 20)

MEDICAL CANNABIS (ACCESS) BILL

EXPLANATORY NOTES

These Explanatory Notes relate to the Medical Cannabis (Access) Bill as introduced in the House of Commons on 16 June 2021 (Bill 20).

Ordered by the House of Commons to be printed, 21 July 2021

© Parliamentary copyright 2021

This publication may be reproduced under the terms of the Open Parliament Licence which is published at www.parliament.uk/site-information/copyright

PUBLISHED BY AUTHORITY OF THE HOUSE OF COMMONS