

Meeting of the Boards of Medicine and Nursing
Workgroup on Prescribing Psychotropic Medications to Children and Adolescents
Minutes

Wednesday, August 20, 2025
Perimeter Center, 9960 Mayland Drive, Suite 201, Board Room 1, Henrico, VA 23233

Call to Order and Roll Call

Dr. William Harp called the meeting to order at 10:00 a.m.

Attendees:

- Neil Sonenklar, MD - Associate Professor of Psychiatry, VCU School of Medicine
- Tess Searls - Psychiatric APRN
- Laney Kortas - Parent

DHP Staff Present:

- William Harp, MD - Executive Director, Board of Medicine
 - Claire Morris, RN, LNHA - Executive Director, Board of Nursing
 - Kathleen LaMotte - Board Administrator, Board of Medicine
 - Jennifer Deschenes, JD - Deputy Executive Director for Discipline, Board of Medicine
 - Erin Barrett, JD - Director for DHP Legislative and Regulatory Affairs
 - Michael Sobowale, LLM - Deputy Executive Director for Licensure, Board of Medicine
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Emergency Egress Procedures

Dr. Harp reviewed the emergency egress procedures for the Perimeter Center.

Introduction of Workgroup Members

Dr. Harp welcomed and thanked members for their participation. Each member introduced themselves and their roles.

Adoption of Agenda

A motion to adopt the agenda was made by Dr. Sonenklar, seconded by Ms. Searls, and passed unanimously by voice vote.

Public Comment on Agenda Items

No public comments were received.

New Business

Charge of the Workgroup – Dr. William Harp

- The workgroup was convened in response to the General Assembly’s (GA) budget language directing the Department of Health Professions (DHP) to study best practices for prescribing, monitoring, communication by and availability of the provider in the treatment of children and adolescents on behavioral health medications.
- Erin Barrett clarified that while DHP is funded by licensing fees and not directly impacted by the state budget, the language mandates a report to the GA.
- Concerns were raised about the feasibility of requiring 24/7 provider availability, especially for small or rural practices.

Discussion of AACAP Article

- Dr. Sonenklar shared the AACAP article *“Practice Parameter on the Use of Psychotropic Medication in Children and Adolescents.”*
- The group discussed the relevance of the article’s 13 principles, particularly Principle 6, which addresses medication monitoring and follow-up.
- Members agreed that many of the principles are already reflected in existing Board of Medicine regulations.

Concerns and Observations

- Members questioned whether this study would lead to enforceable standards on after-hours availability, and it was noted that GA studies may often lead to legislative proposals.
- Concerns raised included that increased regulation could discourage providers of all specialties from prescribing psychotropic medications to minors.

- The parent representative shared that her experience with provider communication has been positive, with timely responses via email.

Regulatory Context

- The group acknowledged the Board's current regulations require that treatment plans be communicated to patients/authorized representatives and provide for reasonable practitioner availability.
 - Consumer complaints about provider unavailability are rare and often deemed non-emergent.
 - Members discussed the distinction between untimely medication refill requests and serious medication side effects.
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Recommendations

- The workgroup recommends no new regulations at this time.
 - A reminder of existing best practices should be included in the Board Briefs Newsletter.
 - The report to the GA will affirm that:
 - Current regulations address the concerns in Budget Item 285.
 - The small number of complaints does not support regulatory change.
 - Best practices should apply to all medications, not just psychotropics.
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Next Steps

- Staff will draft the report to the GA, due by **December 1, 2025**.
 - The report will include:
 - Summary of discussions.
 - Reference to existing regulations.
 - Recommendation to disseminate best practices via communication, not regulation.
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Adjournment

The meeting adjourned at 11:40 a.m.

DRAFT