



ADHD Medication Protocols in the College Setting: A Standardized Student Provider Agreement

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ABSTRACT

Purpose. Stimulant medication use and abuse is growing throughout the country, especially on college campuses. Diversion, through selling or giving of stimulant medication among college students is a common practice. Over half of college students currently taking a stimulant for Attention Deficit Hyperactive Disorder (ADHD) report diverting medication to a peer at least once. Reasons for misuse of stimulants include increased academic performance, increased attention, weight loss, and increased motivation. A standardized student provider agreement was needed for the student population at a small private college health center given a lack of clear expectations for the use of stimulants for ADHD treatment therapy. The nurse practitioners (NPs) of this college health center identified the need for a new agreement, and also identified the need for an educational session for providers to discuss current diversion statistics and best practice for reducing diversion of stimulant medications.

Methods. A closed question pre-test survey was administered to health center NPs to assess knowledge and comfort level in addressing stimulant medication diversion. The current best practice components of existing student provider agreements were reviewed, followed by a post-test survey. Based on discussion during the educational intervention, NP preferences were incorporated into a drafted student-provider agreement followed by iterative refinement of the agreement by the NPs.

Results. The educational session was held with 100% attendance from NPs. All pretest and posttests were completed, with results demonstrating increased comfort and knowledge regarding best practice. Over the course of one semester, a student-provider stimulant therapy agreement was successfully developed.

Conclusion. The education session resulted in improved participation in best practice guideline changes. The student provider agreement was approved by health center NPs and will be implemented in the fall 2018 academic year.

Keywords: Attention Deficit Hyperactive Disorder (ADHD), Nurse Practitioners, Student Provider Agreement, Stimulant Medication, Diversion

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INTRODUCTION

Problem

- Diversion of stimulant medication among college-age adolescents
- Nurse Practitioners (NPs) at student health center of northeastern liberal arts college find current protocol for stimulant use lacking

State of the Science – What is Known

- Rates of diversion & misuse of stimulant therapy on college campuses
- Stimulant medications used to treat ADHD - controlled substances & carry abuse potential
 - 10 million adolescents and adults with ADHD:
 - U.S. college students using stimulant therapy
 - 58.9% with stimulant prescription have diverted
 - 25.6% report using stimulants at least once without prescription
 - Over 50% of these students 1st used stimulants without prescription at college
- Negative effects of stimulant medication -dependency, increased anxiety, cardiovascular events, and sudden death
- Reasons for use: perceived improvement to academic performance, improved attention & motivation, weight loss.

State of the Science – What is Unknown

- Efficacy of standardized protocols in decreasing stimulant diversion & other misuse on college campus
- Outcomes of standardized protocol for stimulant use at local college campus

METHODS

- Developed & taught continuing education program for NPs at Student Health Center
- Content: Current best practice guidelines for stimulant use and ADHD pharmacological & non-pharmacological therapeutic options
- Pretest & posttest for NPs to determine knowledge & comfort related to ADHD management
- Created revised Student Provider Agreement & student education resources reflecting current best evidence guidelines
 - Team-based iterative process of developing & revising ADHD Student Provider Agreement – Process lead by DNP student

RESULTS

- Optional continuing education (CE) session for NPs at annual Student Health provider meeting — August 22, 2017
 - 100% participation of NPs in continuing education sessions - 4 NPs inclusive of Director of Student Health
 - 19% increased belief that diversion is problem
 - 38% with increased confidence in value of Student Provider Agreement
- Revised Student Provider Agreement
- Creation of ADHD packet:
 - Letter to Student (Figure 1)
 - Student Provider Agreement (Figure 2)
 - Additional Documents
 - Stimulant & Other Drugs Info Sheets
 - Transfer of Care Form – Transfer of stimulant prescribing from PCP to Student Health during Academic Year
- Student Provider Agreement implementation – Fall 2018

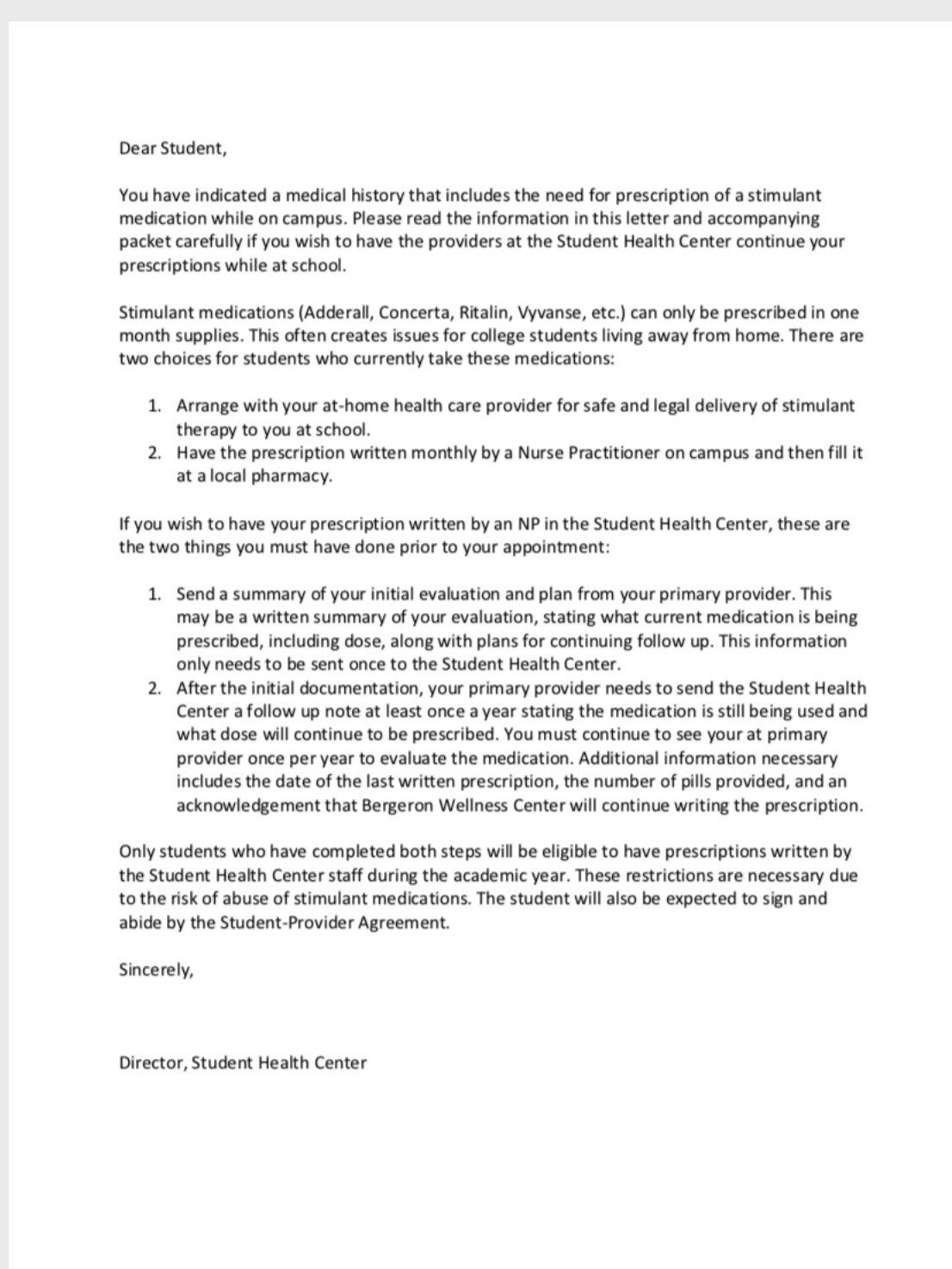


Figure 1. Letter to Student

DISCUSSION

- Barriers:
 - Timing — delayed implementation of the project for a year
 - No high level evidence found regarding components of a ADHD Student Provider Agreement
- Facilitating Factors:
 - Supportive administrative staff
 - Strong academic support
 - Engaged & enthusiastic NPs
 - High motivation of Student Health Center NPs and administrator to implement revised Student Provider Agreement
- Implications for Practice
 - Evidence-based framework to guide practice change in stimulant therapy
 - Continuous quality improvement – refinement of Student Provider Agreement based on post implementation outcomes
- Future study
 - Efficacy of ADHD Student Provider Agreements on stimulant use and misuse in college settings

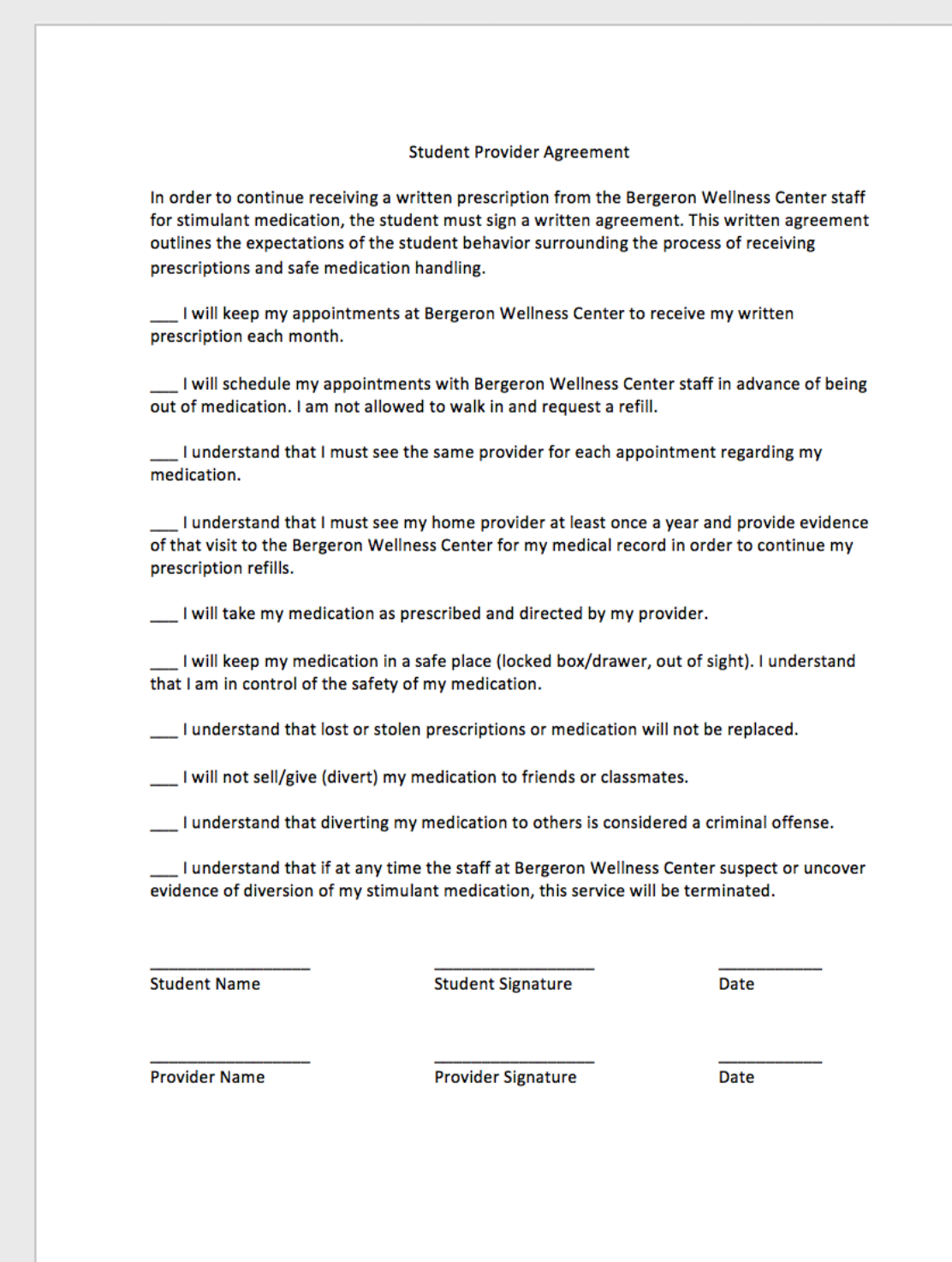


Figure 2. Student Provider Agreement.

CONCLUSIONS

- **Usefulness**
 - ADHD Student Provider Agreement deemed useful by Student Health providers
 - Student education materials deemed useful by Student Health providers
- **Sustainability**
 - Highly sustainable
 - Student Provider Agreement fulfilled a need identified by NPs
 - NPs highly motivated to implement ADHD Student Provider Agreement in fall 2018
- **Potential for spread to other contexts**
 - High potential
 - Future open access for public

Ethical Considerations

- Project deemed “Not Research” by UVM IRB
 - Considered evidence-based quality improvement
- NP survey results kept confidential and not shared with NPs’ supervisor
- DNP student did not critique or share information about NPs’ performance in working on project
- NPs incorporated as key participants in evidence-based practice change

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