

**From:** [Smith, Randy](#)  
**To:** [Zadnik, Karla](#); [Rose, Karen](#); [Bradford, Carol \(OSUMC\)](#); [Darragh, Amy](#)  
**Cc:** [Leite, Fabio](#); [Reed, Katie](#); [Smith, Randy](#); [Stromberger, Mary](#); [Wolf, Kay](#); [Hunt, Ryan](#)  
**Subject:** Administration of Clinical Doctoral Programs: College of Medicine and College of Nursing  
**Date:** Friday, June 14, 2024 4:42:24 PM  
**Attachments:** [image001.png](#)

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Karla, Carol, Karen and Amy,

The proposal from the Colleges of Medicine and Nursing to move the administration of four clinical doctoral programs – Doctorate in Physical Therapy and Doctorate of Occupational Therapy, in the School of Health and Rehabilitation Sciences, and the Doctorate of Nursing Practice and Doctorate of Nursing Education in Nursing – was approved by the Council on Academic Affairs (CAA) at its meeting on June 14, 2024. I presented it on your behalf.

No additional internal level of review is necessary. This action will be included in the Council's next Activities Report to the University Senate (July 2024).

I contacted the Ohio Department of Higher Education (ODHE) to indicate that we were making this internal change.

It is recommended that implementation begins in Autumn 2025.

I will convene a meeting of the two colleges soon to review some implementation topics.

Note that this change means that any academic program change proposals will come directly to me and then to CAA. Any new professional doctorate program will still need approval by the Council on Academic Affairs, and then ODHE approval through the Chancellor's Council on Graduate Studies.

Let me know if you have any questions.

Randy



**W. Randy Smith, Ph.D.**

Vice Provost for Academic Programs

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May 21, 2024

Randy Smith, PhD  
Fabio Leite, PhD  
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15 E. 15<sup>th</sup> Avenue  
Columbus, OH 43201

Dear Drs. Smith and Leite:

I respectfully request that the clinical doctoral programs in the College of Nursing (Doctorate of Nursing Practice, Doctorate of Nursing Education) and the School of Health and Rehabilitation Sciences (Doctorate in Physical Therapy, Doctorate in Occupational Therapy) transition from The Ohio State University Graduate School and be administered by their respective College in alignment with their peer programs in the Health Sciences, and these students be categorized as professional students, not graduate students, like their peers in the Health Sciences (e.g. Optometry, Pharmacy, Medicine) effective Autumn Semester 2024. Please see attached the rationale for the request.

Mary Stromberger, Dean of the Graduate School and Vice Provost of Graduate Education is aware of this request.

Sincerely,

Karla Zadnik, OD PhD  
Interim Executive Vice President and Provost

CC Mary Stromberger  
Amy Darragh  
Carol Bradford  
Karen Rose



## THE OHIO STATE UNIVERSITY

March 29, 2024

Karla Zadnik, OD, PhD, Glenn A. Fry Professor in Optometry and Physiological Optics  
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RE: Proposal that Clinical Doctoral Programs in Nursing, Physical Therapy, and Occupational Therapy exit the Graduate School in alignment with the other professional healthcare doctoral program

Dear Dr. Zadnik,

Please accept our proposal that the clinical doctoral programs in Nursing, Physical Therapy, and Occupational Therapy move out of the Ohio State University Graduate School to be administered by their respective Colleges in alignment with their peer programs in the Health Sciences.

### ***Overview***

The Ohio State University has seven Colleges of Health Sciences (Medicine, Optometry, Pharmacy, Dentistry, Veterinary Medicine, Public Health, and Nursing) that independently confer professional doctoral degrees for high demand healthcare professions, e.g., Physician, Pharmacist, Optometrist, Dentist, Advanced Practice Nursing, and Veterinarian (there is one additional program that confers a professional doctoral degree, the College of Law.) All have robust, rigorous, and innovative academic programs that are consistent with the high standards of their national accrediting bodies and prepare students for national credentialing examinations and licensure. Their students are engaged in fulltime curricula that include didactic and clinical training to ensure that their graduates provide the highest quality of care to patients, communities and populations. These programs are administered by their Colleges, with faculty who hold the professional credentials charged with ensuring that the accreditation and quality standards are met. Their students (and the law students) are so-called "professional" students (distinct from undergraduate and graduate students) with membership in the student Interprofessional Council, and they operate independently of the Graduate School.

The university offers additional professional doctoral degrees for high demand healthcare professions. The Occupational Therapy Doctorate (OTD) and Doctorate of Physical Therapy (DPT) programs are located in the College of Medicine's School of Health and Rehabilitation Sciences. The Doctor of Nursing Practice (DNP) and Doctor of Nursing Education (DNE) programs are located in the College of Nursing. Like their counterparts mentioned above, the OTD, DPT, DNP, and DNE programs engage students in full-time, rigorous curricula, including didactic and clinical training, that adhere to national accreditation requirements and prepare students for national and state certification exams and licensure, as overseen by faculty in these programs who hold the professional credentials. However, in contrast to their peers, the OTD, DPT, DNP, and DNE programs are located in the Graduate School. This location adds an extra layer of administration to the programs, requires the students to adhere to processes designed for traditional graduate students, not professional students, and leads to undue burden and confusion for these students. This also creates a challenge for their participation in University

shared governance because they are not part of the group that most closely represents their needs (IPC); rather, they are represented by the Council of Graduate Students (CGS), where they feel out of place.

***Why did this happen?***

As we understand it, in the early 2000s, the College of Pharmacy instituted the PharmD program, consistent with expectations of their national accrediting body, and the program was approved at Ohio State with the College of Pharmacy providing all administrative oversight, with structure similar to the MD, OD, DDS, and DVM degrees. When the next professional healthcare program moved to the doctoral level (the DPT), in alignment with their national accreditation requirements, Ohio State placed it and all subsequent health profession doctoral programs in the Graduate School. It is our understanding that this was to ensure the rigor of the doctoral degree, to provide oversight assuring educational excellence, and was based on discussions between Ohio State and the Ohio Department of Higher Education (ODHE).

Now, more than 20 years later, we assert that this has no effect on the level of excellence or impact of the programs. All healthcare programs leading to registration or licensure have rigorous national external accreditation requirements. The thoroughness and rigor of these national standards far exceeds the internal curriculum review process at Ohio State. Accreditation must be renewed periodically, which involves a rigorous written analysis of the program submitted to the accreditor, followed by a site visit. Programs that do not meet quality standards are required to show improvement, or they lose accreditation. There is no need for additional oversight from the Graduate School.

***What is the challenge for students?***

Locating some, but not all, of the healthcare professional doctorate-level programs in the Graduate School has created challenges for these students. We have expanded on some of these student challenges below:

1. The university's shared values include **Excellence and Impact**, and for the Academic Plan, Goal 2 is to **Accelerate Student Success**, and Goal 6 is to **Achieve Operational Excellence**. Unfortunately, the placement of the OTD, DPT, DNP, DNE programs in the Graduate School hinders their ability to achieve these values and goals.
2. **The Graduate School's doctorate-level requirements create an extra burden for these professional students.** Students in the OTD, DPT, DNP, and DNE programs must adhere to Graduate School requirements paralleling a PhD degree: a professional doctoral examination (in the PhD, this would be the Candidacy Exam), a final document (in the PhD this would be the dissertation), an exit requirement (in the PhD, this would be the oral defense). The cadence and purpose of these milestones do not align with the professional curricula and, in some cases, are additional requirements to the already stringent national accreditation standards. Further, there are restrictions on the structure of graduate student exam committees and complicated processes for obtaining approval for external faculty to participate on professional exams and defenses. For some clinical doctorate programs, having qualified practice partners to serve on professional exams and defenses is an expectation of accreditation bodies. The extra burden placed on OTD, DPT, DNP, and DNE students to meet these Graduate School requirements in addition to the milestones required by accreditation standards means that these students face more requirements than their peers in other professional, doctorate-level programs.
3. **Graduate School requirements do not serve the purpose of professional student preparation.** The professional doctoral examination, the final document, and the exit requirement are not appropriate for professional students. The graduate school requirements for professional students were designed to mimic the candidacy/qualifying exam, dissertation/thesis, and defense for traditional Masters and PhD programs, whose endpoint is an academic accomplishment. The endpoint for a professional student is professional competence. For the health professions, the requirements of the programs are to ensure that students enter the healthcare professions able to deliver high-quality, evidence-based, and safe patient care. These expectations are ensured by rigorous accreditation requirements, licensure requirements, standards for clinical progression, and national or state certification exams. The requirements of a

professional doctoral exam, an exit requirement, and a final document do not guarantee that graduates will be able to safely deliver high quality care to patient populations. Programs have had to invent unnecessary activities to satisfy these Graduate School requirements because the OTD, DPT, DNP, and DNE are housed in the wrong entity at Ohio State.

**4. The rules and policies in the Graduate School Handbook are not designed or needed for professional students.** Most of the rules in the Graduate School Handbook pertain to graduate associates (GA) in MS and PhD programs and are irrelevant to professional doctoral students, who cannot function as GAs and do not receive GA support. Their degree programs are educationally intensive, full-time programs that do not allow time for GA service. They have full-time clinical education experiences requiring at least 40 hours per week of supervised patient care, often off-site with students spread across the nation, sometimes located internationally. The handbook sections that address the professional doctoral examination, final document, exit requirement, and other rules for professional doctoral students are confusing for our learners because they do not align with the program goals and curricula. The Graduate School Handbook becomes a second set of rules for these learners that do not apply well to their programs. Each of these programs already has well-defined policies in a program-specific handbook required by accreditors. These accrediting standards require programs to have well-defined, written student policies about student rights, standards for progression, academic discipline, etc., that are specific to the program. Especially important in these programs are standards for readiness to enter and progress in the clinical setting, the culmination of professional education in a healthcare-based discipline. The Graduate School requirements create a detour from the direct path to progression into the profession and do not address clinical education progress.

**5. The cadence of professional healthcare programs does not align with the Graduate School cadence or the “gradforms” system.** Students in the professional programs complete the final document and exit requirement on a timeline that is academically convenient for the didactic phase of their training when they are on campus, but these students often continue with additional clinical training one to two semesters afterwards. Therefore, students apply for graduation before completing their clinical practica training. In cases where a student has passed the final document and exit requirement but has to delay graduation for additional clinical training, the current system requires the student to cancel the application for graduation, which simultaneously cancels the final document and exit requirement. This forces a new application to graduate with a fictitious future date and time set to represent a final document and exit requirement that have already been completed. This is a confusing and stressful situation for our students.

**6. Our students are not able to participate in student governance through the IPC with their peers and feel out of place in CGS.** Through interprofessional learning experiences, students in professional programs administered by the Graduate School see peers in other health care professions represented through the IPC. The IPC includes their peers from Medicine, Optometry, Dentistry, Pharmacy, Veterinary Medicine and Law, who share similar educational experiences. Of great importance is that IPC represents the voice of professional students at the university level, e.g., through the Council of Student Affairs and the University Senate. Of additional importance is that IPC organizes activities to bring professional students together. Given the value we place on facilitating relationships between our health professions students as they move through their academic training, it makes little sense to our students that they are unable to do this through the Ohio State student organization that represents the health professions. Year after year, students in our programs ask faculty why they are not included in the IPC, and are told that, because they are in programs housed in the Graduate School, they are represented by the CGS, instead. The CGS is a vibrant and active student organization that advocates successfully for graduate students on campus. Unfortunately, the issues they often address are not relevant to our students. For example, graduate student stipends for the GA positions are a frequent topic for CGS – as stated above, GA positions are impossible for our students. As a result, our students do not feel represented in CGS, tend not to participate, and lose their voice in shared governance. Given the repeated inquiries we get from every new cohort about the IPC, we believe our learners would engage enthusiastically in that body if they could.


**7. The admissions process aligns with a professional program designation.** The application process for these programs does not follow the traditional graduate school model. The professional programs have their own unique application process that requires things such as observation or shadowing in the clinical environment and reference letters that could include rankings on scales designed to assess suitability for the clinical profession. The typical rating of a PhD student as deserving of a MS, PhD, GTA, or GRA position is irrelevant, and that form is not part of our applications. While we do value undergraduate engagement and interest in research, we look for much more than that; interpersonal skills and maturity are much more important. The programs manage all their own processes for admissions. For example, the DPT and OTD use a CAS system (national application system) through which all applicants apply. Their applications are verified by HRS, application reviews are conducted by program faculty, interviewees are selected and invited to interviews by program admissions committees, and waitlists are created and managed by the programs. The only aspect managed by the university is the official offer and acceptance process through graduate and professional admissions. Therefore, there would be no additional work for the programs to be outside the graduate school for admissions. The admissions process and application criteria are completely different already.

*What is the solution?*

**We propose that these programs move from the Graduate School and be administered by their Colleges in alignment with the other professional healthcare doctoral programs.** Students in these programs should be considered professional students and Ohio State should categorize them in the way they categorize their peers who are doctoral students in optometry, dentistry, medicine, pharmacy, and veterinary medicine.

Respectfully submitted,

DocuSigned by:



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