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NURSING SHIFT:

*An Innovative Academic Model to Address
the Workforce Crisis*

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BELMONT NURSING SHIFT: AN INNOVATIVE ACADEMIC MODEL TO ADDRESS THE WORKFORCE CRISIS

Belmont Nursing recognizes that the primary factors contributing to nurses leaving the workforce begin early in their career journey. **Yet, interventions to impact change are currently focused downstream – after a nurse enters practice. Our Belmont Center for Nursing Innovation is taking a bold stance to lead a SHIFT in approach and address these challenges upstream.** SHIFT is a sustainable and replicable model that will transform nursing education and positively impact workforce sustainability.

The Belmont Nursing SHIFT Model integrates five key components: Scholarship for Service, Holistic Resourcing, Innovative Curriculum, a Flourishing Framework, and a Groundbreaking Transition-to-Practice Academic Residency, which is incorporated into the curriculum during the final year of the nursing program, before graduation. By disrupting the conventional approach, we aim to partner across multiple industries to graduate nurses who are equipped and prepared to enter and sustain in the nursing profession.





\$8 billion

The financial cost of nurse turnover and retention is substantial, costing the U.S. healthcare system approximately \$8 billion annually.¹

THE PROBLEM: BARRIERS TO NURSING

The nursing profession is facing a critical shortage that threatens patient care, system sustainability, and the overall health of communities. The Bureau of Labor Statistics (2024) projects more than 193,000 RN job openings annually through 2032, primarily driven by retirements and workforce exits. Without intervention, the U.S. faces a shortage of nearly 1.2 million nurses by 2035.²

The financial cost of nurse turnover and retention is substantial, costing the U.S. healthcare system approximately \$8 billion annually. Individual hospital costs range from \$3.6 million to \$6.5 million, depending on size and specialty services.³

Across the United States, healthcare systems are grappling with financial constraints, escalating demand for nurses, high attrition rates, and workforce burnout. The crisis begins upstream in nursing education and compounds downstream in clinical practice, creating a vicious cycle that leaves hospitals under-resourced and communities underserved. Barriers to solving the crisis are complex and multifaceted, and include:

BARRIERS TO NURSING PROGRAM ENTRY

The pathway into nursing is constrained by barriers that limit the number of nurses entering the profession, exacerbating the workforce shortage before it begins.

- Limited Program Capacity
 - 66,000 qualified applicants turned away annually due to limited program capacity, stemming from shortages of clinical placements, nursing faculty, and inconsistent institutional support.
 - 2,000 vacant nursing faculty positions nationwide.⁴
- Tuition Expenses
 - Rising tuition and living expenses create barriers for students and may prevent prospective BSN students from applying to programs.
 - The average BSN student graduates with \$23,700 in debt.⁵

BARRIERS DURING ACADEMIC PROGRAMS

Nursing students face challenges that compromise retention rates and readiness for practice, limiting the number of new graduates entering the profession.

- High academic rigor with insufficient financial support and resiliency training
 - Nationally, between 20-30% of nursing students do not complete their program due to financial, academic, or personal stressors.⁶
- Dated nursing curriculum models graduate students who are underprepared to practice and lead change, while perpetuating gaps in patient care quality and workforce sustainability.
- Health systems cite leadership, teamwork, and informatics skills as the most urgent gaps in new graduate preparation (AACN & AONL Joint Report, 2023), yet less than 50% of programs integrate innovation, leadership, and systems thinking across the curriculum.⁷
- Despite the need, the core structure of BSN education has remained essentially unchanged for 60–70 years, consisting of:
 - Didactic classroom teaching
 - Clinical rotations in hospital units
 - A focus on bedside acute care, with less emphasis on systems-level leadership, innovation, community health, and therapeutic communication.⁸



BARRIERS TO RETENTION IN PRACTICE

A variety of factors contribute to nurses leaving the profession due to burnout, which directly contributes to attrition and further exacerbates the workforce challenge.

- 1 in 5 nurses leaves their first position within the first year.⁹
- 91.92% of newly licensed RNs reported experiencing burnout at any time in the first two years of practice.¹⁰
- 60% of experienced nurses report burnout, with 40% intending to leave within 5 years.¹¹
- A 2023 AMN Healthcare survey found that 30% of nurses under 35 plan to leave the profession entirely within the next year, a generational shift that threatens long-term workforce stability.¹²

BARRIERS BY THE NUMBERS

1

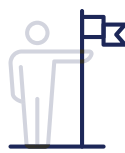
REJECTION



66,000 qualified applicants turned away annually due to limited program capacity

2

DROP OUT



20-30% of nursing students do not complete their program due to financial, academic or personal stressors.

3

BURN OUT



1 in 5 nurses leaves their first position within the first year

THE SOLUTION: BELMONT NURSING **SHIFT** MODEL

Interventions currently focus on nurses once they enter the profession; however, the clinical setting is already overburdened. **The Belmont Nursing SHIFT Model offers an upstream-to-downstream strategy to address these workforce challenges – addressing the issues before they begin.** The Belmont Nursing SHIFT Model emphasizes the integration of five key components to achieve successful and sustainable outcomes.

SCHOLARSHIPS FOR SERVICE

Cohort-based scholarships for entry to practice programs are tied to a service commitment to organizations and can take a variety of forms, including one (or more) of the following:

- Requirement to mentor future new cohorts of scholars and engagement in student organizations such as the Student Nursing Association, the Dean's Advisory Board, or the Sigma Nursing Honor Society.
- Commitment to attending cohort-based programming and academic support sessions to facilitate retention and graduation rates.
- Agreement to work with a specific organization, in rural or traditionally underserved populations, in exchange for loan repayment.
- Commitment to a clinical organization as a nursing leader in exchange for scholarship or advanced degree loan repayment.
- Commitment to an academic institution as a nursing faculty in exchange for a scholarship or advanced degree loan repayment.

Loan repayment and scholarship programs for graduate nursing programs are necessary to ensure the sustainability of the Belmont Nursing SHIFT Model.





HOLISTIC RESOURCING

A combined commitment from Belmont University, as well as philanthropic, industry, and practice partner funding, must support program growth through holistic resource allocation.

- Facilities, including lab, classroom, and student spaces to support program growth.
- Academic support services to ensure student retention and graduation.
- Mentoring programs for current students, as well as recent alums, ensure professional sustainability.
- Housing, food, and program fee support is necessary to ensure students can focus on learning without excessive outside work commitments.
- Ongoing professional development for faculty, students, and nursing leaders supports professional and program sustainability.

INNOVATIVE CURRICULUM

A reimagined curriculum embeds systems-level thinking, an innovation mindset, and a reimagined clinical placement pathway.

- Curriculum allows flexibility in learning, opening opportunities for learning in traditional and specialized settings—including geriatrics, home health, mental health, hospital-at-home, and rural health.
- New courses include: Introduction to Nursing Innovation, Flourishing in the Nursing Profession, and Therapeutic and Interprofessional Communication.



FLOURISHING FRAMEWORK

The intentional integration of the Harvard Flourishing Framework and mindfulness practices into the curriculum ensures a consistent and holistic approach to forming future nurses.

- A course on Flourishing in the Nursing Profession is required for all students, as developing coping, resiliency, and leadership skills is essential for long-term career sustainability.
- Evidence shows a 25–40% reduction in reported burnout among nurses when well-being is integrated into education and practice.¹³

TRANSITION-TO- PRACTICE ACADEMIC RESIDENCY

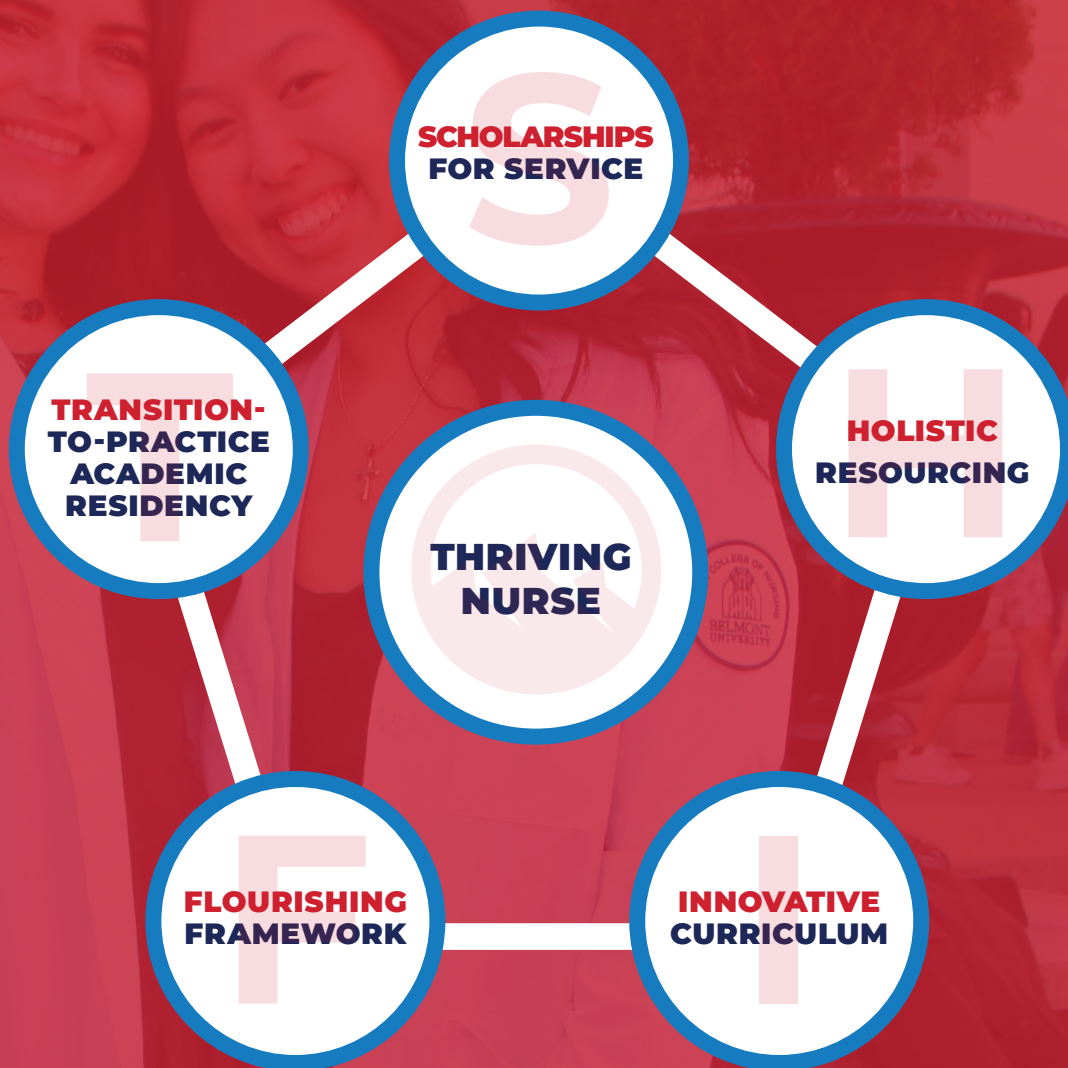
A signature Transition-to-Practice Academic Residency in the final year of the curriculum allows for clinical placement that mirrors existing early career residency programs in clinical settings.

- The residency will ease transition as new graduate nurses enter the workforce academically and clinically prepared, familiar with the organizational setting and the expectations of the nursing role, ready to contribute to the organization immediately.
- In addition to reducing system onboarding costs and burden on staff and resources, research identifies that residency programs reduce new graduate turnover up to 46% and improve patient safety outcomes.¹⁴



BELMONT SHIFT MODEL

Upstream-to-downstream strategy for nurse workforce resilience



S – SCHOLARSHIPS FOR SERVICE

Reducing financial barriers, commitment to service

H – HOLISTIC RESOURCING

Wrap-around support, resources, faculty, facilities

I – INNOVATIVE CURRICULUM

Reimagined learning, leadership, systems thinking

F – FLOURISHING FRAMEWORK

Resilience, well-being, career sustainability

T – TRANSITION-TO-PRACTICE ACADEMIC RESIDENCY

Prepared for workforce, reduced attrition, stronger outcomes



THE IMPACT: THE BELMONT NURSING SHIFT MODEL OUTCOMES

The Belmont Nursing SHIFT Model creates measurable impact by shifting part of the operational burden from practice partners to academic institutions, fostering stronger system resilience.

Together with our partners, we will:

- **INCREASE** the number of qualified, clinically and emotionally prepared nurses entering the workforce
- **REDUCE** early-career attrition and burnout, increasing the number of nurses who remain in the profession
- **REDUCE** healthcare system costs through a variety of avenues (limiting use of agency nurses, reduction in nurse turnover, decreased medical errors)
- **IMPROVE** patient outcomes and care satisfaction
- **ENSURE** a robust professional future supported by professional nurse faculty, leaders, and innovators



THE INVITATION: PARTICIPATE IN LAUNCHING BELMONT NURSING SHIFT

Belmont Nursing invites you to partner with us in launching the SHIFT Model, an upstream-to-downstream solution to address the nursing workforce crisis. With a planned launch in Fall 2026, Belmont Nursing is committed to removing financial and systemic barriers for nursing students, faculty, and leaders. The Belmont Center for Nursing Innovation will support the implementation, evaluation, and dissemination of SHIFT outcomes. We aim to scale the impact of the SHIFT model by sharing planning and implementation strategies with institutions and organizations nationwide, thereby strengthening healthcare systems and communities for generations to come.

Join us as we innovate the current approach to nursing education and improve healthcare for all.



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