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HEALING HANDS

Creating Communities of Care by Centering Mental Health and Well-Being at an Organizational Level

NATIONAL HEALTH CARE for the HOMELESS COUNCIL

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CONTENTS

I. Introduction

The previous issue of *Healing Hands* ("Innovative Approaches for Mental Health Care and Homelessness")[1] highlighted programs that have developed innovative, creative, and holistic approaches to supporting the mental and behavioral health of clients in the context of homelessness. We looked at some of the key barriers to behavioral health care, then learned about three organizations' innovative approaches to supporting the mental health care of their clients—including shelter-based psychiatric care, street therapy, and "foot psychiatry."

One clear lesson from these innovative approaches is that mental health care provision is strengthened by ecosystemic thinking. A person experiencing a mental health crisis or long-term challenge does not exist in a vacuum. They are embedded in a web of conditions and relationships, including the conditions and relationships that exist with individual care providers and organizations that seek to serve them—and the well-being of the care providers themselves is also part of this complicated web. Organizations that are deliberate about also supporting the well-being of the care providers are better equipped to support the needs of clients.

> **In this issue of *Healing Hands*, we'll expand upon this ecosystemic approach to mental health care, taking a look at how organizations can create cultures of care that also mindfully support the mental health and well-being of care providers themselves, including clinicians, staff members, volunteers, and other participants in these communities of care.**

We'll begin with a look at some of the challenges facing health care providers, with special attention to stress, burnout, and compassion fatigue. We will consider some individual and organizational-level prevention strategies and interventions for burnout that exist in the interplay between self-care and community care.

We'll include the role of mindfulness and culture change, and note some other key approaches that organizations can consider in order to support and prioritize the multi-faceted and interconnected mental health, well-being, and resiliency of all members of the care community.

II. Stress and Burnout Among Health Care Providers

Anyone who works in the field of health care knows that this work can be challenging and stressful, at all career stages. Nursing students, for instance, are known to experience extraordinarily high rates of stress,[2] and nurses in hospitals report high levels of exhaustion from problematic working conditions, insufficient resources, and lack of team support.[3] Likewise, the physician education process is notoriously draining, and health care professionals interact with patients experiencing crisis as they make high-stakes decisions in life-or-death situations. Support staff, volunteers, and other community members in health care settings also encounter stress via individual and group interactions.

These challenges for health care professionals can be amplified for care providers working with the homeless population. During and as a result of homelessness, individuals often have high rates of chronic disease, untreated mental illness and/or substance use disorder, unique access challenges, and complex histories of violence. By extension, the care providers who work with this population may also experience distress from witnessing their experiences. Work with the homeless population also presents additional logistical challenges, from the difficulty of engaging clients for follow-up to the frustration of feeling helpless when faced by clients' multiple, complex, and interacting challenges.

Because of these difficulties, stress and burnout are widespread amongst health care professionals, particularly in recent years[4]—and with an extremely high cost.[5] **Matthew Bennett** is a long-time collaborator with the National Health Care for the Homeless Council (NHCHC), the co-founder of Optimal HRV, and author of several books on behavioral change psychology and organizational leadership. In his work, he assesses the seriousness of burnout in the healthcare field as a mental health crisis and offers ways that individuals and organizations can both prevent and treat burnout.[6]

> **"Burnout left unattended can become an active mental health crisis, including with risk of severe mental health challenges and suicide."**
>
> *— Matthew Bennett, Co-founder, Optimal HRV*

The 5 Stages of Burnout

Mr. Bennett breaks down the stages of burnout like this:

1. **Healthy, Motivated, and Engaged.**
   A person in this stage is maintaining balance in their life, feeling good, and has the energy to engage fully with co-workers and clients and do work effectively.

2. **Wired and Tired.**
   A person in this stage is starting to feel like they are fraying around the edges a bit—perhaps they are more tired and lethargic than usual, or perhaps they feel on-edge and snappish with co-workers and clients.

3. **Guilt and Exhaustion.**
   A person in this stage may feel tired all the time and sapped of energy, and may feel a sense of guilt because, consciously or unconsciously, they are beginning to realize that their exhaustion is impeding their ability to show up to work in the way they want to.

4. **Shame, Cynicism, and Callousness.**
   In this stage, guilt transforms into shame; after struggling for months, the person may be experiencing callousness and loss of compassion not as a reaction to difficult situations, but as a personality trait.

5. **Crisis.**
   Burnout left unattended can become an active mental health crisis, including with risk of severe mental health challenges and suicide.

Mr. Bennett emphasizes that organizations need to take the stages of burnout very seriously and begin supporting employee well-being well before compassion fatigue, moral injury, and burnout lead to physical, mental and social crisis: "You can't help anyone else effectively when you are in this stage, or even really show up to work anymore." For people in any stage other than the healthy, functioning Stage 1, Mr. Bennett notes the importance of developing a recovery plan—and emphasizes that different stages of burnout call for a different sort of recovery plan.

For a person in Stage 2, a long weekend might be enough time to recover. Perhaps a long hike or bike ride will be enough to ease you back to Stage 1, or maybe a staycation or time with friends and family will do the trick. State 2 is an invitation to early identification and treatment—so if you notice you are showing up at work at around 80%, says Mr. Bennett, "have a plan to get back to health. If we identify it and treat it early enough, we can bounce back relatively quickly."

For the later three stages, though, a long weekend away is not likely to be enough. "For a person with late-stage burnout," says Mr. Bennett, "it can take 6 to 12 months to really feel good again… Your nervous system has probably changed, and it takes some work to restore it." This sort of recovery plan requires collaboration between the employee and their managers, with attention paid to how accrued PTO can be used, how scheduling can support recovery, and how organizational resources can support the employee's well-being as they heal.

Mr. Bennett and April Lewis worked with NHCHC to create a supportive resource called *Resiliency Toolkit: A Comprehensive Guide for Health Centers and their Staff*.[7] This resource includes detailed suggestions for individuals, organizations, and systems to foster adaptability and prevent and treat burnout, while emphasizing that true burnout prevention and treatment requires both individuals and organizations to be actively engaged in the process—which involves much more than an occasional little treat that may sometimes pass in broader culture as "self-care."

As the *Resiliency Toolkit* puts it:

> "Self-care presents leaders with a dilemma – striking a balance between personal or organizational responsibility when it comes to … burnout. On the one hand, performance and productivity research demonstrates the connection between self-care practices, cognitive performance, and the ability to help patients reach their goals. On the other hand, stress at work leads to burnout that needs to be addressed, and preferably prevented."

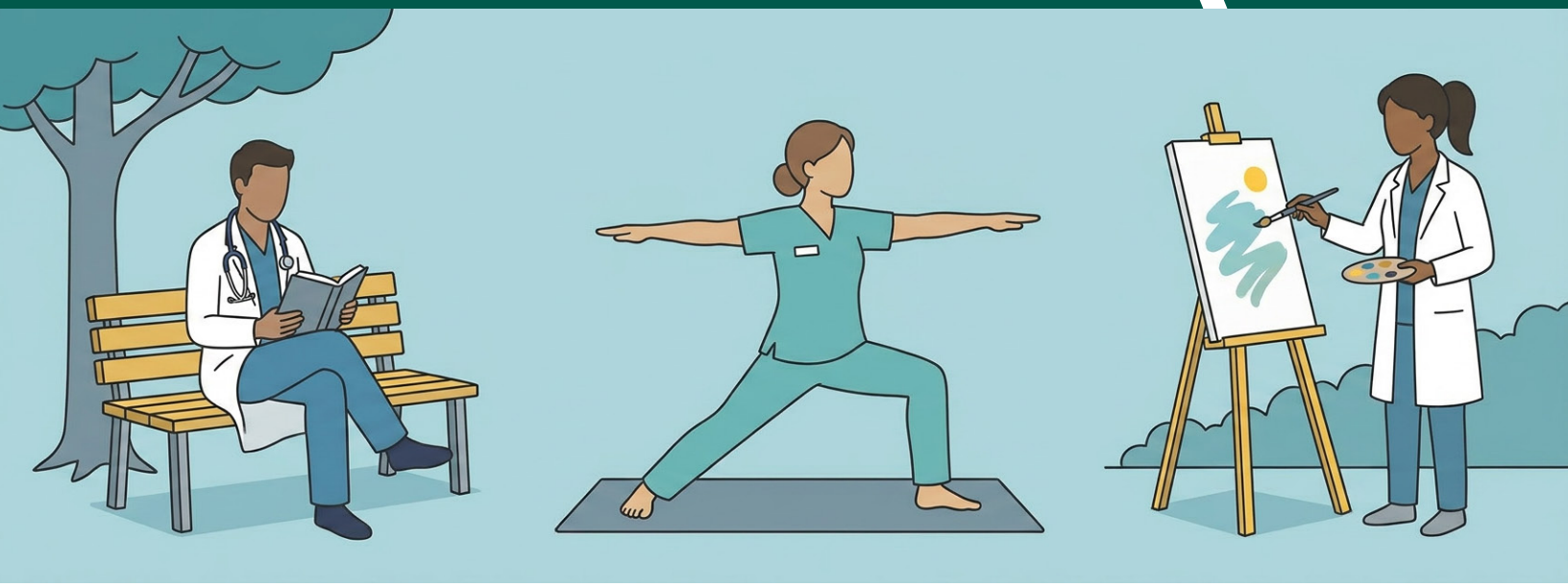
The following sections will offer some practical suggestions for these two levels of response to the different stages of burnout, both of which play an important role: First, the individual efforts to engage in self-care and wellness plans, and second, the organization's role and responsibility in supporting staff and developing cultural and organizational norms that support wellness and resiliency.

Developing an Early Warning System

Because the consequences of ignoring burnout are so steep, it's important to get an early warning system in place—both for individuals and organizations.

As an individual, this means developing your self-awareness and giving yourself the space to exercise your body awareness. What are your personal early warning signs? How does your body tell you when you're holding onto too much stress? This is different for everyone, but it could look like:

- Frequent headaches
- Tightness and tension in the body
- Difficulty sleeping
- Ruminating and overthinking
- Increased use of drugs and alcohol to mitigate stress
- Loss of energy
- Feeling less patient with clients, family members, or friends
- Being more socially isolated
- Feelings of depression, anxiety, and overwhelm



III. Individual Efforts: Self-Care as Burnout Prevention

April Krall is the Director of Nursing at Colorado Coalition for the Homeless in Denver, Colorado. She experienced severe burnout herself after an intensely stressful period working in an ICU, and learned the importance of listening to early warnings from the body, including the early sign sometimes referred to as compassion fatigue:

> Compassion fatigue is really tricky because some people will tell you that distancing yourself is how you maintain resiliency, or that you can't be genuinely empathetic at all times and continue in health care because it is exhausting to take on everyone's pain and trauma. There is a long history of nurses with dark humor; when you dehumanize the situation it allows you to cope with it in a more sustainable way. Or at least that was the mentality when I started this work 20 years ago. But we have figured out that there is a better middle ground—that you can treat someone as a human and not take on the emotional drainage that comes with being their only support…My thoughts on it are that while you absolutely must maintain your empathy and compassion for others, where you start to draw the line is recognizing what is in your control and what isn't, and not carrying the emotional burden of things that are not within your control.

Balancing empathy for others with self-care is a continuous and necessary dance for people in helping professions—because, as everyone in these fields knows, you cannot pour from an empty cup.[8] One way to support this balance is for individuals to develop routines and practices that support their personal well-being—practices that are commonly known as self-care. However, the term "self-care" may sometimes feel drained of meaning in the public sphere, particularly for a person who is experiencing symptoms of burnout and needs much more than a bubble bath to support their recovery.

"Passion projects are burnout bumpers."

— April Krall, Director of Nursing, Colorado Coalition for the Homeless

"Balancing empathy for others with self-care is a continuous and necessary dance for people in helping professions."

Ms. Krall explains that she thinks of more traditional forms of self-care as "burnout prevention." She offers the following suggestions of strategies that individuals can use to help them pay attention to early warning signs that stress needs attention and management:

Put PTO in Two Buckets

According to Ms. Krall,

> Burnout correlates with when I have a super-high PTO bank. There's a sense that a lot of people get—especially people in leadership—that you aren't allowed to take a break. You feel so valuable that if you left, everything would fall apart. But this isn't true of anyone. Literally anyone. Anyone can take time off and the work will be fine in your absence. It may be painful for people to hear because people enjoy being invaluable. But when you give yourself the freedom to say, 'I am allowed to leave and not check email and not check Teams and actually go away'—that is how you get a real break and come back actually refreshed.

Ms. Krall recommends thinking of PTO in two buckets. The first bucket contains a planned annual vacation (such as a family vacation) that is organized 6 months in advance. The other bucket contains what she calls "treatment PTO," which is banked time that can be used when an immediate need comes up; as she explains, "maybe I'm feeling a little crispy this week and notice that I'm not showing up in meetings and for my patients as I should…so I'll decide that next Thursday and Friday I'm going to take some last-minute PTO because I feel something coming." In other words, the first bucket of PTO contains the normal annual bank and the second bucket of PTO contains emergency burnout-prevention time.

Have a Work Bestie

Ms. Krall emphasizes the importance of having "somebody at work who you are close enough with that they will be honest with you when you are not showing up right." This is the person who will check on you, message you, or stop by your office if they sense you need to talk something through. This is also the person who knows you well enough to help you identify when you are showing Wired and Tired signs, or if they are concerned about your well-being or your ability to show up in the way they know you want to.

Build a Passion Project

"Passion projects are burnout bumpers," explains Ms. Krall: "Work always has priorities given to you by people above and below you. Those priorities may not always provide you with passion and satisfaction in your job. While you have to do those things, you need to allow yourself time to also do a passion project that gets you moving and gets you excited." In pursuing a passion project, she notes that it is important to communicate openly with leadership about how this project will help the organization and clients while also being part of your personal resiliency plan.

"At the beginning of the day," says Ms. Krall, "you chose the work you do for a reason. Your goal is to do that work. You want to do the work that you signed up to do. Resiliency and burnout education is actually very self-serving: How do I continue to do the work I want to do?"

Mr. Bennett has some additional suggestions for an individual who is trying to improve their overall wellness and resiliency. He recommends taking an honest look at daily healthy habits and developing routines and practices that emphasize the different aspects of physical, mental, and social well-being. These basic routines can be a juggling act for people with rigorous schedules and busy lives, but Mr. Bennett emphasizes that all of these practices have huge impacts on not only physical health, but cognitive balance, emotional well-being, and professional performance.

Taking inventory of **physical health practices** can begin with four foundational pillars of physical wellness:

- Sleep quantity, quality, and regularity
- Supportive nutrition and regular fueling of the body
- Movement and exercise
- Healthy breathing that supports nervous system regulation

An inventory of **mental health practices** can involve a close look at:

- Managing personal distress and harmful experiences
- Therapy and other mental health supports
- Taking adequate time off from work
- Mindfulness practices (more on this below)

And an inventory of **social health practices** invites an examination of:

- Quality of personal relationships
- Participation in civic life and sense of community belonging
- Supportiveness of professional relationships
- Sense of purpose and meaning in work

There may be action items in any or all of these areas of health that an individual can undertake to improve their general wellness and strengthen their resiliency. Learning to attend to one's own needs while strengthening relationships and building a nurturing life for oneself is key to coping with stress and preventing burnout.

IV. Organization-Level Interventions: Creating a Bubble of Wellness

However, Mr. Bennett also notes that while taking ownership over one's own health and wellness is an important part of the resiliency equation, individual-level interventions are not enough to keep an entire organization afloat. "Burnout rates in society and especially in healthcare and social services are horrific," says Mr. Bennett, "and that is the appropriate adjective from a research perspective… So how do we create a bubble of wellness around our team, organization, or program, in order to balk the trend of horrific levels of burnout in the industries in which we work?"

The notion of self-care, he says, "sometimes puts a disproportionate amount of responsibility for burnout on the individual. Even if a person is taking good care of themselves, working with a burnt-out team will result in their burnout, too." In professional settings, people are often mirroring their co-workers' emotions while also dealing with the emotional landscape of the clientele. "Our patients and clients will not get great services if the team is burned out," says Mr. Bennett, "period."

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Effective organizations have supervision and mentorship structures that are dedicated not only to workforce development, but also to supporting individual team members in their personal goals and resiliency plans. "I'm a big advocate for supportive supervision in health care environments," says Mr. Bennett, "especially since the best way most people regulate their stress response is getting support from other people." Supportive supervision can help team members detect early warning signs and develop prevention plans—including by encouraging them to take PTO when needed to decompress, rest, and recover.

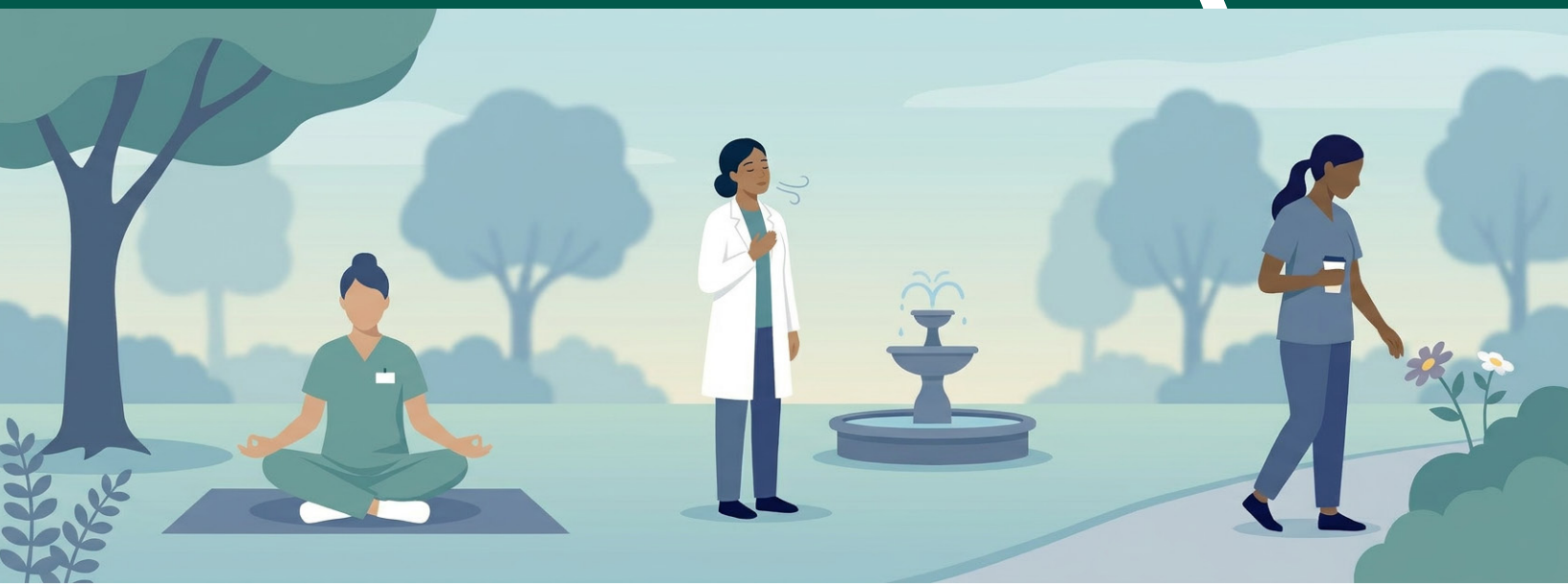
Supportive supervision can also be a way to make sure employees know the resources that are available to them, including benefits, counseling,

and additional programming. Some organizations may offer trainings and professional development sessions that support whole-person wellness; others may be able to provide quiet spaces where people can engage in restorative activities.

Some employers may be able to offer therapy benefits and referrals, which Mr. Bennett identifies as an important "tool in our tool belt." "You can do a lot of great work in even just six hours of therapy, especially if you begin before you've hit the crisis stage. If you've been Wired and Tired for a while, having someone to process your stress with is so helpful. You can vent, get feedback, and establish a wellness plan with the help of a professional."

Organizations need to focus on a) developing these sorts of offerings, and b) making sure that employees know the supportive options that are available to them, as well as how to avail themselves of the options. Organizations can also find opportunities to celebrate, at a group level, the sense of personal mission and purpose that brings people to this work.

The *Resiliency Toolkit* offers many more suggestions for organizational and systems-level transformations to support resiliency, concluding that "while self-care remains important, it is imperative that organizations create supportive environments…to help their staff be able to care for themselves in the best way possible."[9]



V. Spotlight on Mindfulness

One example of an individual practice that can also be supported and promoted at an organizational level is mindfulness practice. Mindfulness—which may be defined as "awareness that arises through paying attention, on purpose, in the present moment, non-judgmentally"[10]—is an example of an evidence-based intervention that has been implemented in many different settings within the health care system to enhance the well-being of patients and care providers alike. In fact, the modern secular mindfulness movement, which grew in the West out of ancient origins in Eastern philosophy and religion (particularly Buddhism and Hinduism), has its roots in the United States' health care system. Mindfulness-Based Stress Reduction (MBSR), developed by Jon Kabat-Zinn in the late 1970s at the University of Massachusetts Medical School, was designed to bring ancient wisdom to bear on stress, pain, and illness. MBSR has been widely adopted in clinical settings and has shown significant benefits for mental and physical health.[11]

Shannon Sexton is a nurse who has worked as an RN in clinics and an LPN in a hospital, around the state of Oregon. When she began working as an RN, she experienced high stress levels and found herself receiving high blood pressure readings. She decided to attend a weekend mindfulness retreat, which launched her mindfulness journey; after meditating for 3 months, her blood pressure came down and she was able to go off medication. After several years of dedicated mindfulness practice, she completed a master's degree in Mindfulness Studies, where she learned how to integrate her mindfulness practice and her work as a nurse. For her thesis, she created a facilitator's guide for a program that integrated mindfulness, movement, and music for older populations.[12]

While working on her master's degree, she also became trained as a mindfulness facilitator through an employer's leadership program; there, she and her cohorts were able to practice mindfulness, forest bathing,

> **"Employers that integrate mindfulness programs should be cautious that they are not asking employees to meditate themselves out of conditions that the employer is actually responsible for improving."**

sound baths, and other wellness-related modalities. After completing the academy, she began offering online meditations and wellness webinars for co-workers. Integrating these sorts of offerings into work spaces—with staff allowed to choose between the sorts of offerings that they prefer[13]—is one way to support employees in the development of their personal mindfulness practice, with promise, too, for the broader organizational culture.

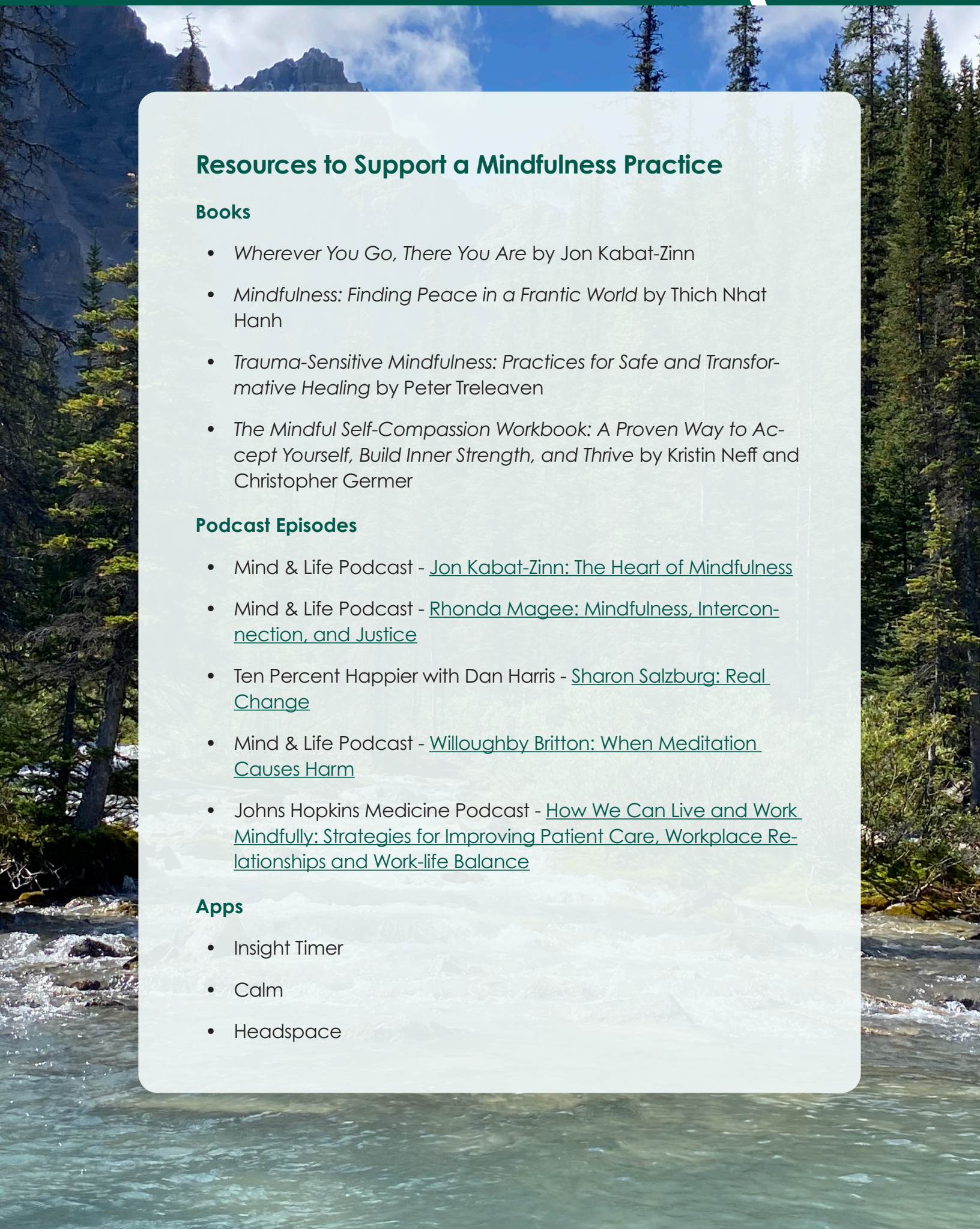
Though mindfulness practice (and other related practices, like forest bathing, that increase a sense of present-moment awareness[14]) have well-documented health benefits, Ms. Sexton emphasizes that for health care workers, mindfulness is not a quick fix for all problems. It can, though, help health care professionals tune in to their own experiences, develop self-awareness, build compassion, and cultivate equanimity:

> It's a practice that has to be maintained… It's a matter of disconnecting, sitting down, and focusing on yourself. This will help health care workers because they will be more aware of the feelings they're having, whether they are frustrated, hurt, or angry. When you're so busy and stressed, you don't sit down and assess the feelings.
>
> Mindfulness is a chance to say, *'this is what I'm feeling, I'm not actually mad, I'm hurt. And what do I need to do for myself to take care of this emotion? Do I need to take a break, say something to that person, say no to a shift?'* Mindfulness can really help with getting in tune with what you're feeling and how you're reacting.

A health care worker with a mindfulness practice may also find ways—as Ms. Sexton did—to offer that practice to the rest of the community, including co-workers and patients. She notes that "one of the main challenges for health care workers and patients is finding the time. You can offer these services but the nurses can't show up at noon because they have to take their break… The challenge with a high stress job is you are expected to be giving your time all the time." This is where employers can step in to offer time and space for employees to practice mindfulness on their own or as a group; research has found that offering space for mind-body connection has benefits for both health care staff and their clients.[15]

Ms. Sexton strongly encourages individuals and organizations to understand that a mindfulness practice does not affect everyone equally, and may be contraindicated for some people with histories of violence:[16] "What if someone doesn't want to get in touch with their body?" asks Ms. Sexton. "Not everything works for everybody. Not everyone wants to close their eyes—not everyone will feel safe with their eyes closed. A meditation session is about supporting people's sense of safety. It may not work for some people if you go into it quickly or with the idea that one size fits all."

The modern mindfulness movement has been critiqued, particularly in its workplace implementation, for shifting the onus for equanimity fully onto the individual while ignoring structural factors that compromise well-being.[17] Employers that integrate mindfulness programs should be cautious that they are not asking employees to meditate themselves out of conditions that the employer is actually responsible for improving. However, when balanced with organizational-level commitment to employee well-being, mindfulness practices can be an important tool in the toolkit to promote resiliency, equanimity, and compassion.



Resources to Support a Mindfulness Practice

Books

- *Wherever You Go, There You Are* by Jon Kabat-Zinn
- *Mindfulness: Finding Peace in a Frantic World* by Thich Nhat Hanh
- *Trauma-Sensitive Mindfulness: Practices for Safe and Transformative Healing* by Peter Treleaven
- *The Mindful Self-Compassion Workbook: A Proven Way to Accept Yourself, Build Inner Strength, and Thrive* by Kristin Neff and Christopher Germer

Podcast Episodes

- Mind & Life Podcast - Jon Kabat-Zinn: The Heart of Mindfulness
- Mind & Life Podcast - Rhonda Magee: Mindfulness, Interconnection, and Justice
- Ten Percent Happier with Dan Harris - Sharon Salzburg: Real Change
- Mind & Life Podcast - Willoughby Britton: When Meditation Causes Harm
- Johns Hopkins Medicine Podcast - How We Can Live and Work Mindfully: Strategies for Improving Patient Care, Workplace Relationships and Work-life Balance

Apps

- Insight Timer
- Calm
- Headspace

VI. Shifting Cultures Toward Balance and Psychological Safety

Individual efforts and organizational interventions, when combined, have the potential to generate culture shifts, creating organizational cultures that value wellness, adaptability, and psychological safety. **Dr. Elizabeth Stranges** is a primary care doctor in the General Internal Medicine department at Hennepin County Health Care in Minneapolis, Minnesota. One of her key interests is the integration of primary care and behavioral health care in creating systems of care that do not treat patients' physical and mental health as separable.

She is also interested in understanding how dominant cultures within organizations do or do not support the well-being of staff. In Dr. Stranges' experience as a doctor, she has noticed a culture of emotional avoidance: "When you're in training, you just have to keep going. You learn to turn off your emotions. So culturally there can be widespread avoidance of emotional content." However, she notes, this culture of avoidance is not conducive to the mental health and well-being of clinicians, staff, or the community as a whole—and it is possible to create a different sort of culture instead.

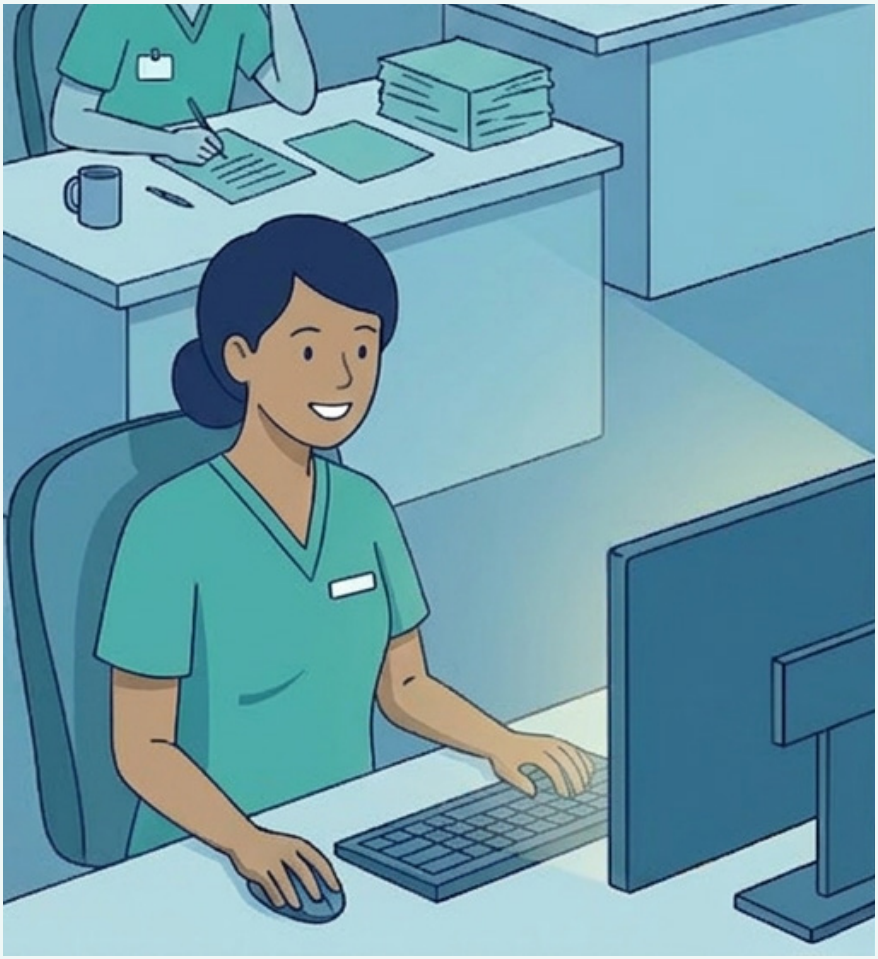
"Having worked in a few different organizations," Dr. Stranges explains, "there has to be strong supportive leadership creating a culture of well-being. They really set the tone. And sometimes that tone can put everyone on the defensive or put everyone into a fear-based mode." She notes that leaders, and other people with the power to shape an organizational culture, should always be asking themselves the question: *How can we take care of people who are vulnerable or in crisis when we don't feel a sense of psychological safety ourselves? And how can we generate psychological safety at all levels in the organization?*

Dr. Stranges believes that one of the most important actions that leaders

> **"How can we take care of people who are vulnerable or in crisis when we don't feel a sense of psychological safety ourselves?"**
>
> *— Dr. Elizabeth Stranges, Primary Care, Hennepin County Health Care*

and culture-makers can take to develop an organizational culture that prioritizes psychological safety, resiliency, and well-being is to deliberately make space for people to acknowledge the stressors and difficulties that exist in health care work: "You have to make space and time, and make it a norm that people can process difficult experiences." Creating space to process is particularly important after a harmful event or loss to the community, but it is best if the norms created in processing that difficult event can also expand to build a culture of communication that persists in the day-to-day routine. Creating formal spaces to debrief is also part of creating new norms around self-expression and psychological safety, and a culture where people are not afraid to express their opinions; "creating space for small acts of self-expression creates a norm of greater psychological safety," explains Dr. Stranges.

Open, expressive, communicative spaces give people the chance to check in and let everyone know they are okay, or not okay; they also invite people to work together on self-care and community care, and they give people permission to take a break when they need it. They invite people to process grief together. These sorts of spaces are about "making space for many voices to be heard," says Dr. Stranges: "Certain voices take up a lot of space. Learning to listen, learning to make sure that everybody has the opportunity to speak—that's a big deal."



Online Resource Library

Whether you're looking for evidence-based research, a recorded webinar to share with your team, or a past issue of Healing Hands that speaks to a challenge you're facing today, NHCHC's Resource Library is your go-to hub. Browse by category, sort by topic, or search by keyword at: https://nhchc.org/resource-library.

Dr. Stranges understands that institutional culture change can be a long and challenging process, particularly when norms around communication and avoidance are deeply entrenched. She emphasizes that "it can take a lot of going against the grain…and taking risks…. You really have to know yourself and be comfortable with yourself, and deeply grounded in your self-knowledge of who you are and how you want to show up in the world."

VII. Conclusion

This issue of *Healing Hands* has looked at ways in which individual care providers and organizations can engage self-care and community care in the development of cultures of care. Though stress is an inevitable part of working in health care, early warning systems (and the body awareness cultivated through mindfulness and similar practices) can help care providers prevent burnout for themselves and their colleagues. Individuals, teams, organizations, and larger systems all have a role to play in mitigating stress, creating supportive offerings, building humane systems, encouraging communication and psychological safety, and creating cultures where wellness is valued and resiliency is bolstered.

In any ecosystem, different components are woven together and have profound impacts on one another—and the ecosystem of a health care system is no different. Individual choices affect the collective, and group decisions impact each individual. A coalition of individuals committed to one another's well-being can create cultural shifts that change the landscape for everyone—including, importantly, the patients whom care providers are dedicating their lives to serving.

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