HEALING TOUCH PROGRAM

An Integrative Energy-based Approach to **Health and Wellness**

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"It would be great if our staff could begin each day like this on the unit!""I feel calm and present." "I am energized and ready." These are just a few of the comments shared at the beginning of a two-day Healing Touch Program (HTP) Level 1 class attended by health care providers in late September. We had just completed the introduction to the Grounding, Centering, and Attuning (GCA) portion of the class curriculum and were about to explore the mystery, wonder, and science behind the heart-centered and compassionate energy medicine therapy known as Healing Touch (HT).

The attendees were a diverse group of curious health care professionals seeking new ways to assist and to empower their clients towards improved healing and wellness through education and experience. Their health care administration had honored its "promise" to support staff education and wellness by financially compensating each

participant in attendance. What an intelligent approach by a major health care system towards further loyalty and professional enthusiasm by supporting and encouraging staff self-care!

Healing Touch Program is a graduated ANCC-recognized curriculum that was developed in the late 1980s by a nurse in Colorado named Janet Mentgen (Healing Touch Program, 2025). She studied and trained with nurse theorists, physicians, scientists, researchers, spiritual directors, and others to create a credentialed standardized energy medicine program that specifically worked with the energy centers along the spine (chakras) and the human biofield that surrounds the body. The goal/purpose was to help restore balance and harmony within the human energy system while assisting that individual in their healing efficacy. Now, almost 40 years later, HT is taught worldwide and is offered in numerous health care institutions, clinics, rehabilitation, and outpatient programs throughout the health care industry. And as noted above, it all begins with self-care.

The Power of Presence - GCA

As nurses and health care providers, we know that if we are not at our best, then those that we serve and care for may not be able to achieve their highest potential and healing (Pryor et al., 2025). How does this work? It is similar to the concept of two tuning forks that come into close proximity with one another. If one has a tone that is sounding, then the second will begin to vibrate at that same frequency. The same is true for energy fields. If we are feeling well and healthy, then our fields have a higher frequency, and cells function more efficiently. This, in turn, is beneficial to other people around, as their fields then begin to increase in frequency and shift in ways that are more beneficial to their healing needs. As HT practitioners, one of the first self-care methods we learn is how to become grounded (connected to the physical surface we are standing upon), centered (present to the current moment), and attuned (aware and conscious) to ourselves and to what is unfolding around us. Being GCA is incredibly beneficial in high-stress environments and emergent situations, which are quite common in health care.

Empowerment

The HTP Levels 1-5 feature a variety of techniques that build upon the previous level. Level 1 offers instruction on 12 techniques that incorporate self-care

practices as well as interventions for pain, anxiety, headaches, gastrointestinal issues, musculoskeletal and immunological challenges, depression, inflammation, and wound healing, and the list continues. An impressive and unique fact about HT is that these techniques can be offered to and shared with clients, patients, family members, caregivers, friends, and peers. The only requirement is willingness, presence, compassion for another, and a pair of hands. That's it!

Self-Care is Health Care

In the arena of mindfulness practices, HT emerges as a leader in self-care for those in health care. The bounty of techniques not only benefits emotional, mental, and spiritual needs but also physiological challenges that one may be experiencing. When HT is practiced (on oneself or with another) a physiological response occurs due to the activation of the parasympathetic nervous system, which then results in the "relaxation response" and a peaceful cascade of body-mind-spirit balances (Jain et al., 2012).

Research has further supported the value of HT in the health care environment when staff utilize the techniques not only with themselves but with peers and their patients/caregivers. Have you ever had a care-

giver who was not taking quality time for themselves out of guilt for their newly diagnosed loved one? What was their energy like when you interacted with them? How might that have impacted your patient? Other providers as they entered the room? Pause for a moment to consider your self-care practice. How might your energy impact the energy in a room or a meeting among peers/supervisors/your patients/your family? This is why self-care is health care. It can only improve the environment and benefit all who are present and involved.

Non-Revenue Producing? **Perhaps Not**

Today's health care and insurance industries consistently seek ways to cut costs and patient/client needs. However, the current client population appears to be swimming in a different direction: selfcare and ways to support their needs: financially and physically. One consideration is outpatient encounters as well as rehabilitation costs.

Consider this: A client who presents for an outpatient procedure and then is visited and educated by a HT Practitioner who shares additional ways for them to heal and to be responsible for their plan or care? Earlier discharge? That is potentially what HTP can offer.

Consider this: An inpatient who is preparing for a treatment – receives an HT session from a trained HT Practitioner, and notably their vital signs commence to be lower as well as their personal acknowledgment of anxiety and stress. The same occurs post-treatment. Less pain medication is required. Family members/ caregivers also learn the HT techniques. Follow-up appointments include HT review and session(s), and the person is discharged in an empowered and positive way. They leave and express via voice/social media/postings about the amazing treatment and therapy options they received at the health care facility, noting the HT techniques that they re-

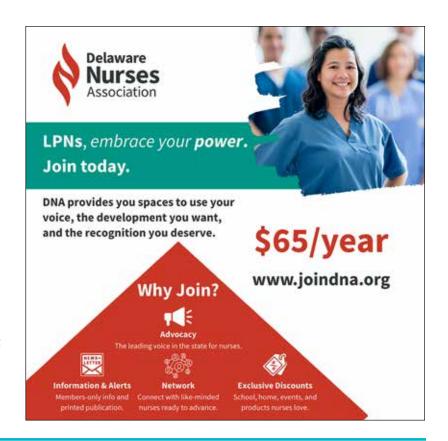


ceived, were taught and then were encouraged to practice upon discharge home. Increase in first-time/curious clients? Perhaps!

Wisdom Wraps

In closing, dear fellow health care provider, the Healing Touch Program and its curriculum changed my life. It helped me to become a better care provider as a nurse, to love myself for who I am, to be more present to my family, friends, peers, patients, and clients. Most importantly, it taught me ways to heal and to recognize the importance of that as I give back. That is true grace and heart-centered compassionate care, which is what we do as Healing Touch Practitioners and as health care professionals. For more information, please visit the HTP website at healingtouchprogram.com. May your journeys be sprinkled with self-care and may you know that you make a difference in the world every day.

References online: myamericannurse.com/?p=422304



COLUMN: FOCUS ON FIRST STATE NURSING INNOVATION

Innovating Academic-Practice Partnerships for Student & Novice Nurse Success

After the COVID-19 pandemic, health systems and academic institutions have faced exacerbated shortages of nursing personnel and faculty. The nationwide shortage of clinical educators and nursing faculty is 9%; but a survey completed by the Delaware Nurses Association found that the State of Delaware full-time faculty shortage is 12.3%. According to the Health Resources and Services Administration there will be a shortage of 78,610 full-time RNs in 2025. Approximately 23.8% of newly hired registered nurses (RNs) leave their positions within the first year. This scenario has necessitated institutional leaders to develop innovative, impactful, and sustainable solutions.

To enhance the integration of theoretical

knowledge and practical skills among nursing students, leaders at the University of Delaware and Bayhealth implemented a comprehensive academic and clinical practice partnership. By aligning clinical education experience with real-world practice through long-term engagement at a single facility, the focus is on the effectiveness of nurse preparation and retention. Concurrently, the development of clinical staff into teaching roles addresses the dual challenge of faculty shortage and professional growth, creating a sustainable model that strengthens both educational and clinical environments.

Leadership from the University of Delaware and Bayhealth developed a collaborative approach that addresses and works

toward a seamless transition from education to practice. The SSS was designed to build a strong connection between nursing curricula and nursing practice. Experienced nurses at Bayhealth receive week-long training focused on the role of clinical faculty and serve as the faculty for the scholar program. The clinical faculty remain as paid hospital employees yet teach as clinical faculty with release time from hospital. Junior nursing students are recruited, apply for, interview, and are selected by Bayhealth to join the clinical scholar program their senior year. Student scholars in their final year of the BSN program at the University of Delaware complete their senior year of clinical experiences at Bayhealth. Student scholars receive