



NATIONAL CONSORTIUM OF
TELEHEALTH
RESOURCE CENTERS

**Burnout & Telemental Health:
Re-Connecting to Ourselves
while Connecting to Others**

November 20, 2025



National Consortium of Telehealth Resource Centers

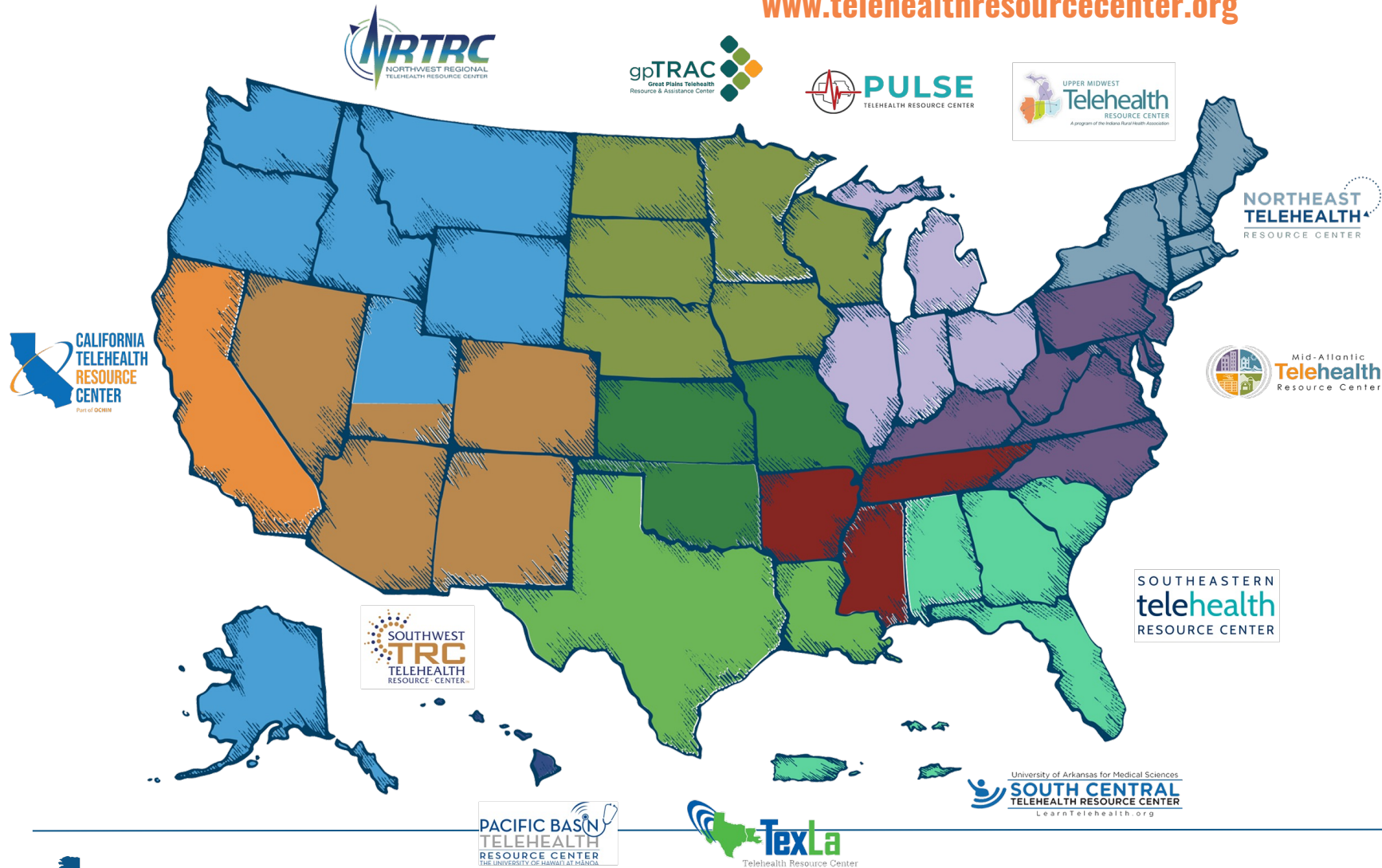
**National Rural
Health Day**
Celebrating the **Power of Rural!**®



THURSDAY, NOVEMBER 20, 2025

HRSA Funded Telehealth Resource Centers

www.telehealthresourcecenter.org



NTRC	gpTRAC	NETRC
CTRC	PTRC	UMTRC
SWTRC	SCTRC	MATRC
PBTRC	TexLa	SETRC
12 REGIONAL RESOURCE CENTERS		

 TTAC TelehealthTechnology.org	 CCHP
2 NATIONAL RESOURCE CENTERS	



Through funding from the National Association of Community Health Centers (NACHC), CCHP has relaunched the federally qualified health center (FQHC) Medicaid section for each state on its website. You can now see how each state approaches telehealth for FQHCs in their Medicaid program.

CCHP Look up policy by: Topic Federal State

Rhode Island

DISCLAIMER ⓘ

FQHCs

- ✗ Originating sites explicitly allowed for Live Video: No
- ✓ Distant sites explicitly allowed for Live Video: Yes
- ✗ Store and forward explicitly reimbursed: No
- ✓ Audio-only explicitly reimbursed: Yes
- ✗ Allowed to collect PPS rate for telehealth: No

Private Payer

Pending legislation

CCHP Look up policy by: Topic Federal State

Professional Requirements

Federally Qualified Health Center (FQHC)

Definition of Visit

Last updated 09/02/2025

When referenced within MDHHS Telemedicine Policy, face-to-face refers to either an in-person visit, or a visit performed via simultaneous audio/visual technology.

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p.2204, Jul.1, 2025](#), (Accessed Sept. 2025).

An allowable FQHC encounter means a face-to-face medical visit or an interaction using a qualifying telemedicine modality (audio/visual or audio-only) between a patient and the provider of health care services who

Compare policy by state

START COMPARING >

VISIT:

<https://www.cchpca.org/all-telehealth-policies>

Share your Telehealth Success Story!

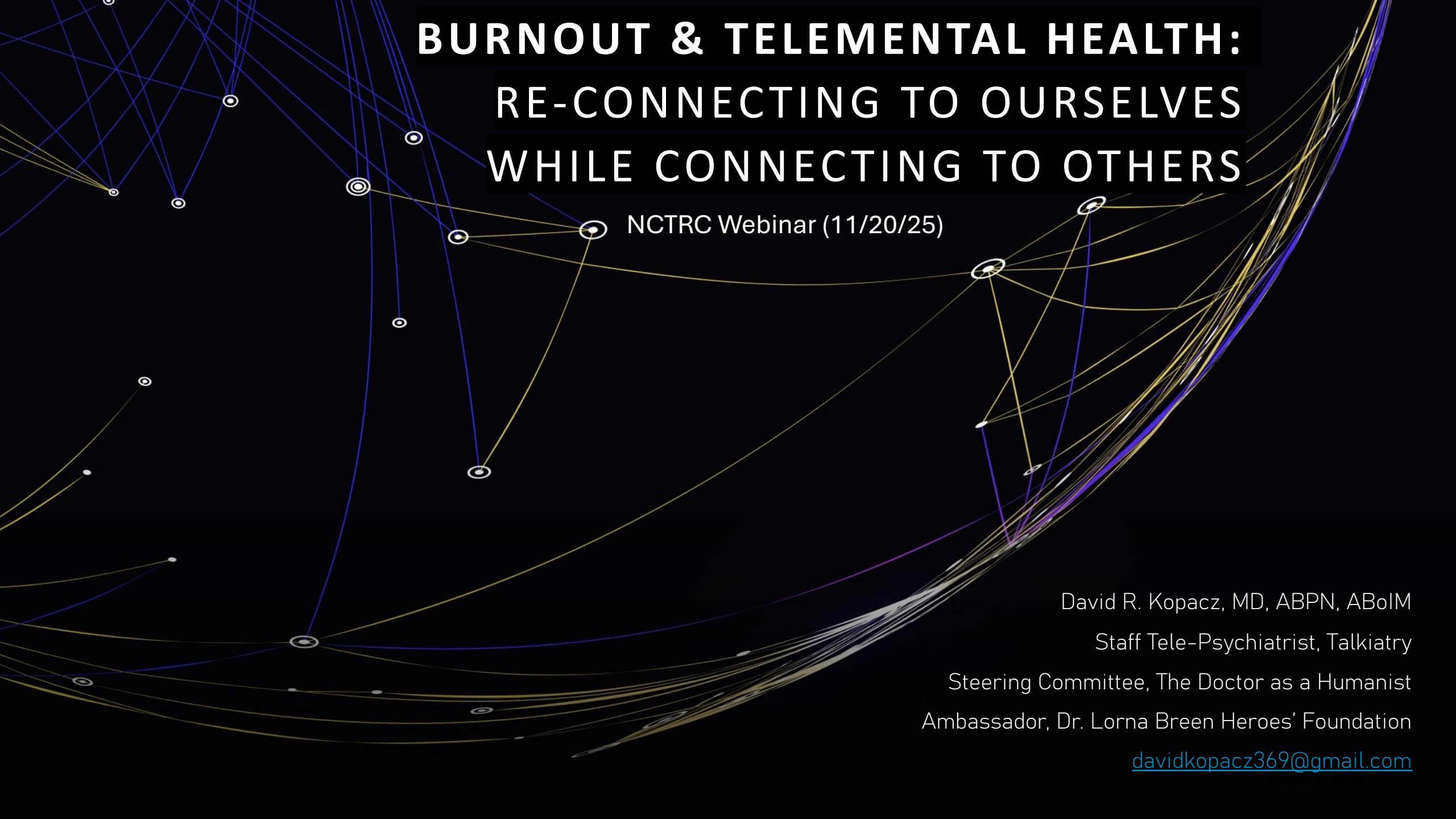
- The National Consortium of Telehealth Resource Centers (NCTRC), representing all 14 Telehealth Resource Centers (TRCs), is collecting success stories from both patients and providers who have benefited from telehealth **with support from a TRC**. Share how your TRC helped make telehealth work for you for a chance to be featured – along with your organization – in the NCTRC newsletter.
- Survey - <https://www.surveymonkey.com/r/TT2RXQZ>



Webinar Tips and Notes

- Your phone &/or computer microphone has been muted.
- If we do not reach your question, please contact your regional TRC. There may be delays in response time:
<https://telehealthresourcecenter.org/contact-us/>
- Please fill out the post-webinar survey.
- Closed Captioning is available.
- Please submit your questions using the Q&A function.
- The webinar is being **recorded**.
- Recordings will be posted to our YouTube Channel:
<https://www.youtube.com/c/nctrc>





BURNOUT & TELEMENTAL HEALTH: RE-CONNECTING TO OURSELVES WHILE CONNECTING TO OTHERS

NCTRC Webinar (11/20/25)

David R. Kopacz, MD, ABPN, ABoIM

Staff Tele-Psychiatrist, Talkiatry

Steering Committee, The Doctor as a Humanist

Ambassador, Dr. Lorna Breen Heroes' Foundation

davidkopacz369@gmail.com

Benefits & Costs of Telemental Health

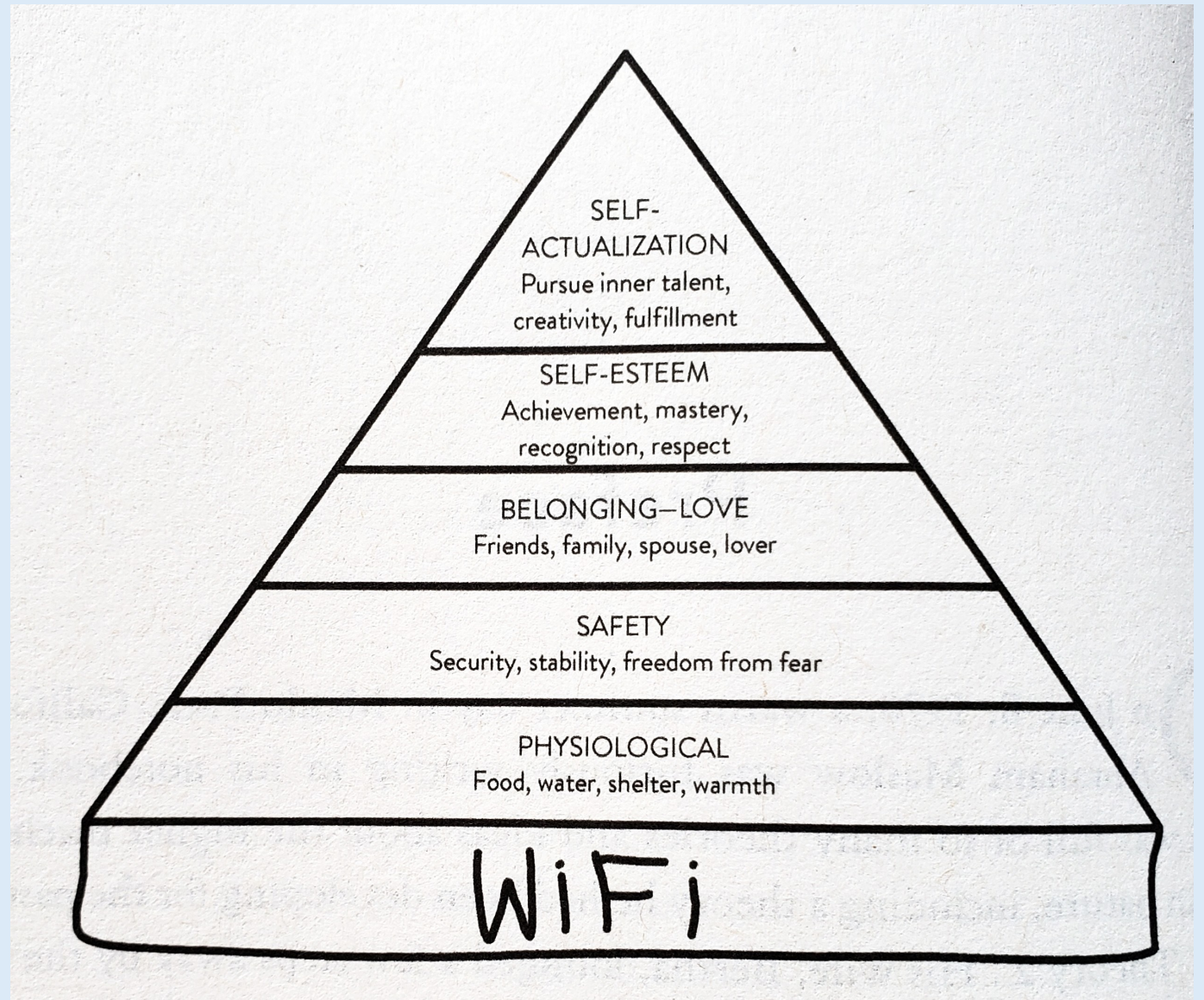
• **Benefits**

- Flexibility
- Decreased commute (patient/clinician)
- Increased accessibility
- Ability to personalize work-space
- Exercise breaks
- Nature breaks
- Breaks with family, pets

• **Costs**

- Isolation
- Emotional disconnection
- Technology as mediator
- Cognitive Overload/“Zoom fatigue”
- “Homing from work”
- Technical challenges: increased frustration can interfere with clinical time
- Increased sitting and inactivity

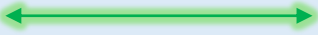
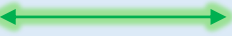
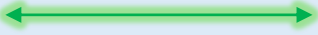
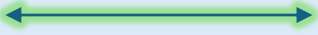
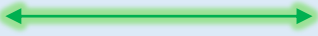
Maslow's Hierarchy – updated for Tele-health



Scott Barry Kaufman, *Transcend: The New Science of Self-Actualization*

Human Connection vs. Technological Connection

- **Human Connection**

- Body  Body
- Emotion  Emotion
- Mind  Mind
- Heart  Heart
- Spirit  Spirit

- **Technological Connection**

- Wired Connection
- Audio
- Video
- Chat
- Prioritizes mental connection

Are Burnout Rates Higher for TeleMental Health?

(some studies complicated by pandemic stress)

• Yes/Maybe

- Hilty DM, Groshong LW, Coleman M, Maheu MM, Armstrong CM, Smout SA, Crawford A, Drude KP, Krupinski EA. **Best Practices for Technology in Clinical Social Work and Mental Health Professions to Promote Well-being and Prevent Fatigue.** *Clin Soc Work J.* 2023 Jun 1;1-35. doi: 10.1007/s10615-023-00865-3. Epub ahead of print. PMID: 37360756; PMCID: PMC10233199.
- Costin A, Roman AF, Balica RS. **Remote work burnout, professional job stress, and employee emotional exhaustion during the COVID-19 pandemic.** *Front Psychol.* 2023 Jun 1;14:1193854. doi: 10.3389/fpsyg.2023.1193854. PMID: 37325768; PMCID: PMC10267312.

• No

- Steidtmann D, McBride S, Mishkind M, Shore J. **Examining Burnout and Perspective on Videoconferencing in the Mental Health Workforce.** *Telemed J E Health.* 2024 Jun;30(7):1892-1895. doi: 10.1089/tmj.2024.0071. Epub 2024 Apr 8. PMID: 38588556.

What is Burnout?

1. feelings of energy depletion or exhaustion
2. increased mental distance from one's job, or feelings of negativism or cynicism related to one's job (detachment)
3. reduced professional efficacy

“Burn-out an ‘occupational phenomenon’: International Classification of Diseases,” World Health Organization, May 28, 2019, <https://www.who.int/news/item/28-05-2019-burn-out-an-occupational-phenomenon-international-classification-of-diseases>

The Pandemic: A Crash Course in TeleHealth

4,347% increase in
TeleHealth
(March, 2020)

J. Lagasse. "Telehealth claim lines increased more than 4000% in the past year."

Healthcare Finance, June 3, 2020

<https://www.healthcarefinancenews.com/news/telehealth-claim-lines-increased-more-4000-past-year>

Stress in America 2023 APA Report

A nation recovering from collective trauma

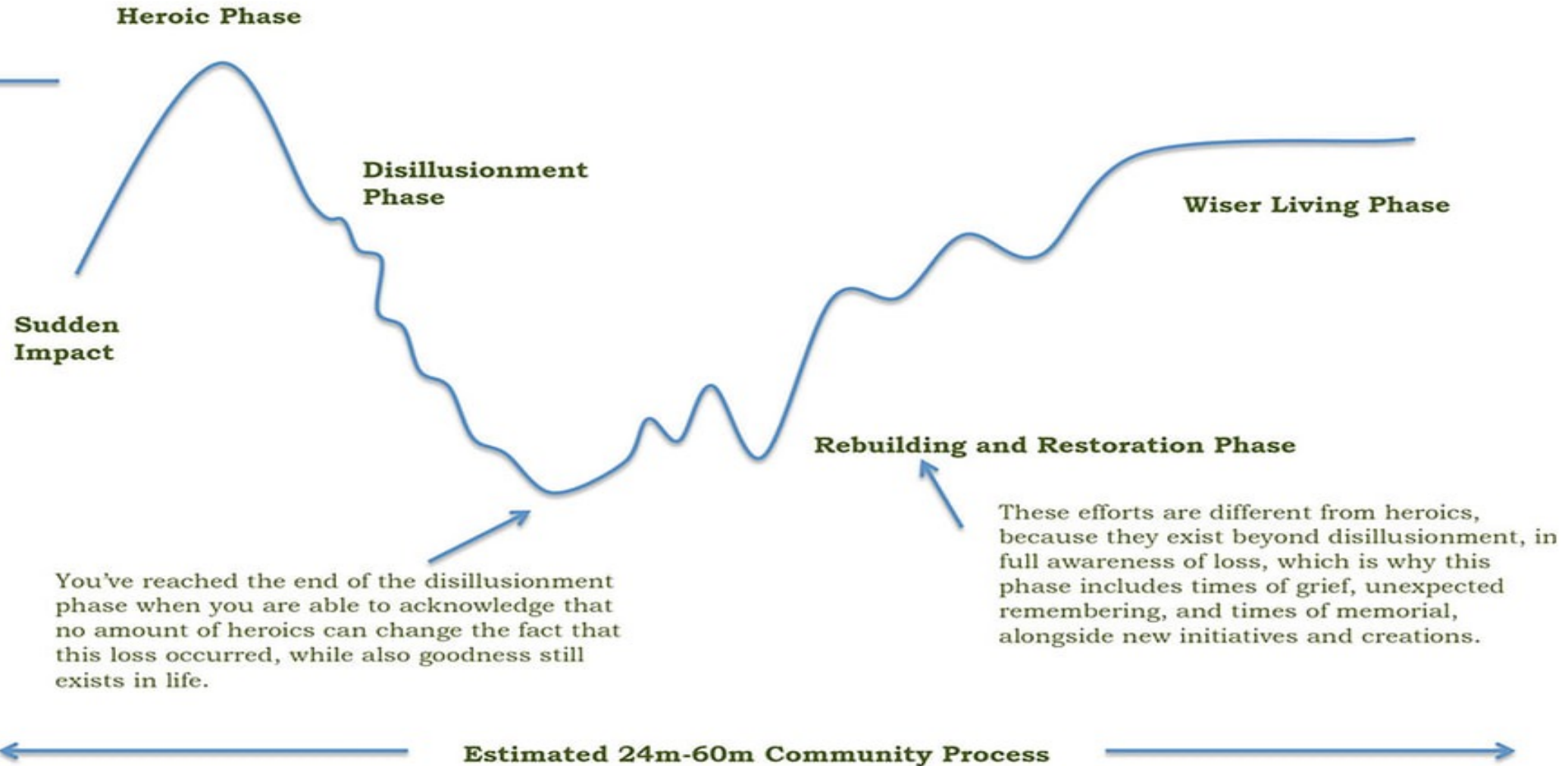
“A superficial characterization of day-to-day life being more normal is obscuring the posttraumatic effects that have altered our mental and physical health...there is mounting evidence that our society is experiencing the psychological impacts of a collective trauma.”

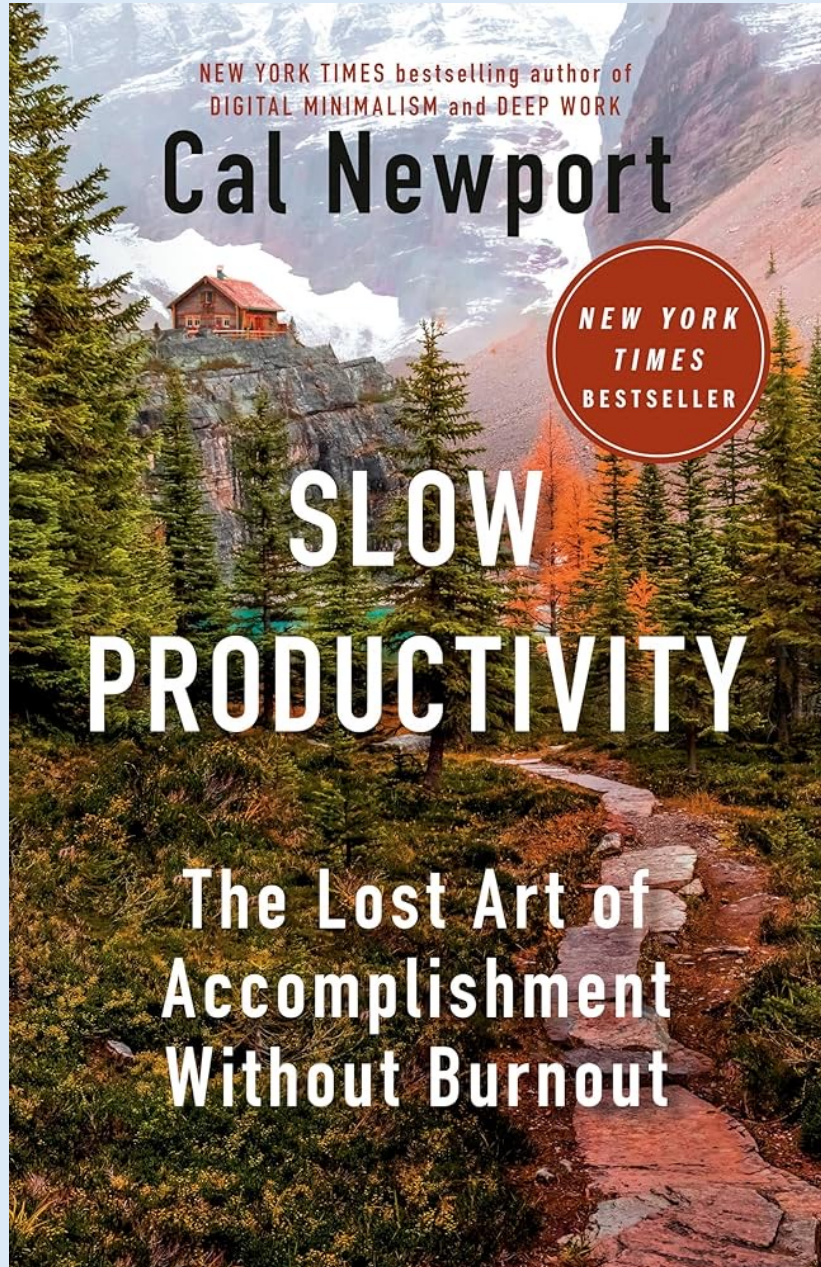


<https://www.apa.org/news/press/releases/stress/2023/collective-trauma-recovery>

Phases of Collective Trauma Response

<https://www.ictg.org/phases-of-disaster-response.html>





A philosophy for organizing knowledge work efforts in a sustainable and meaningful manner, based on the following three principles:

- 1) Do fewer things.*
- 2) Work at a natural pace.*
- 3) Obsess over quality.*

Pseudoproductivity

“The use of visible activity as the primary means of approximating actual productive effort”

Why do we need *a different kind* of productivity?

“The relentless overload that’s wearing us down is generated by a belief that ‘good’ work requires increasing busyness—faster responses to email and chats, more meetings, more tasks, more hours”

Newport, *Slow Productivity* (7)

Practical Applications of Slow Productivity

- Simplify your workday
- Try to focus on one task at a time – that is how the human brain works!
- Double your project timelines
- Forgive yourself for not making deadlines
- Limit: missions, projects, daily goals
- Pay attention to your surroundings
- Create rituals

To Build a Top Performing Team: Ask for 85% Effort



“maximum effort =
maximum results”
an outdated way of
thinking about peak
performance



Research shows that
doesn't actually work



**Here's what actually
works:**

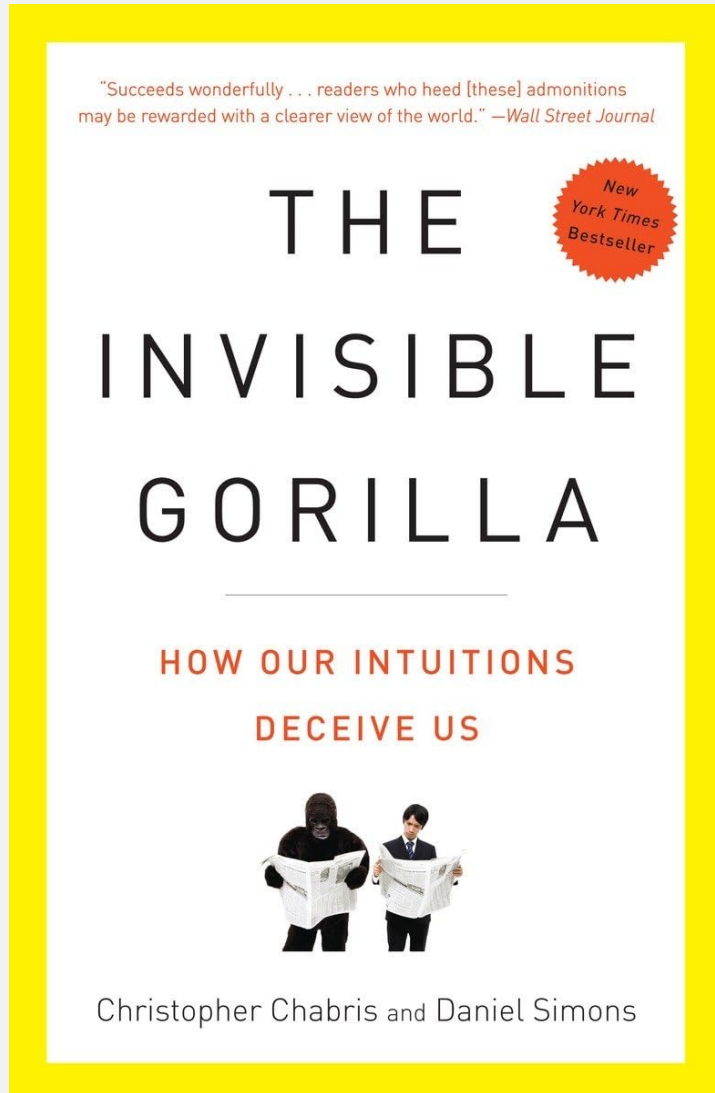
The 85% rule
counterintuitively
suggests to reach
maximum output, you
need to refrain from
giving maximum effort



Greg McKeown
**To Build a Top Performing
Team, Ask for 85% Effort**
Harvard Business Review
(6/8/23)
<https://hbr.org/2023/06/to-build-a-top-performing-team-ask-for-85-effort>

Selective Attention Test





About 50% of people do not see the gorilla!

Daniel Simons and Christopher Chabris, “Gorillas in Our Midst: Sustained Inattention Blindness for Dynamic Events,” *Perception* 28, no. 9 (1999): 1059–74, <https://doi.org/10.1068/p281059>.

http://www.theinvisiblegorilla.com/gorilla_experiment.html

83% of radiologists did not see a gorilla figure (48 x the size of a typical lung nodule)

Trafton Drew, Melissa Võ, and Jeremy Wolfe, “The Invisible Gorilla Strikes Again: Sustained Inattention Blindness in Expert Observers,” *Psychological Science* 24, no. 9 (2013): 1848–53, <https://doi.org/10.1177/0956797613479386>.

Christopher Chabris & Daniel Simons, *The Invisible Gorilla*. New York: Harmony Books, 2011.

http://www.theinvisiblegorilla.com/gorilla_experiment.html

The Myth of Multi-tasking

- “By attempting to do two things at once, people make approximately twice as many errors and take twice as much time overall”
 - D. Lennard & A. Mednick, *Humanizing the Remote Experience Through Leadership and Coaching*. New York: Routledge, 2023, (38).
- Individuals who are “high multi-taskers:”
 - Have slower reaction time
 - Are worse at filtering out irrelevant information
 - E. Ophir, C. Nass, AD Wagner. “Cognitive control in media multi-taskers.” *Proceedings of the National Academy of Sciences* 106, no. 37 (2009): 15583-15587.

TeleHealth Contributors to Cognitive Overload

- **Videoconferencing:**
 - decades of research: higher cognitive load vs. other forms of remote work, e.g. telephone
 - Tech difficulties on either patient/clinician side: drops in video feed, sound delays
 - Frequent distractions on computer, notifications, alerts, windows opening/closing
- **Self-monitoring:**
 - Sitting extra still to stay centered in frame
 - Looking at camera vs. looking at person on screen
- **Overcompensation:** increased emoting, talking 15% louder
- **Technology updates:** continuously learning new systems
- **Lack of interpersonal connection:**
 - Lack of direct eye contact (loss of increased oxytocin for social bonding)
 - Misunderstandings, disconnection, exclusion
 - Shift in reward/fatigue brain balance

Is Cognitive Overload *Brief Burnout*?

1. feelings of energy depletion or exhaustion
2. increased mental distance from one's job, or feelings of negativism or cynicism related to one's job (detachment)
3. reduced professional efficacy

“Burn-out an ‘occupational phenomenon’: International Classification of Diseases,” World Health Organization, May 28, 2019,
<https://www.who.int/news/item/28-05-2019-burn-out-an-occupational-phenomenon-international-classification-of-diseases>

"Wonderful . . . Physicians would do well to learn this
most important lesson about caring for patients."

—THE NEW YORK TIMES BOOK REVIEW

SLOW MEDICINE



*The Way
to
Healing*

VICTORIA SWEET, MD

“A key strategy of Slow Medicine:
Do the most important things first
and let the others go”

Victoria Sweet (p. 92)

What Fast Medicine Misses

“Everything looked so good in the computer, and yet what Father had gotten was not Medicine but Healthcare—**Medicine without a soul.**

What do I mean by ‘soul’?

I mean what Father did not get.

**Presence. Attention. Judgment. Kindness.
Above all, responsibility...**

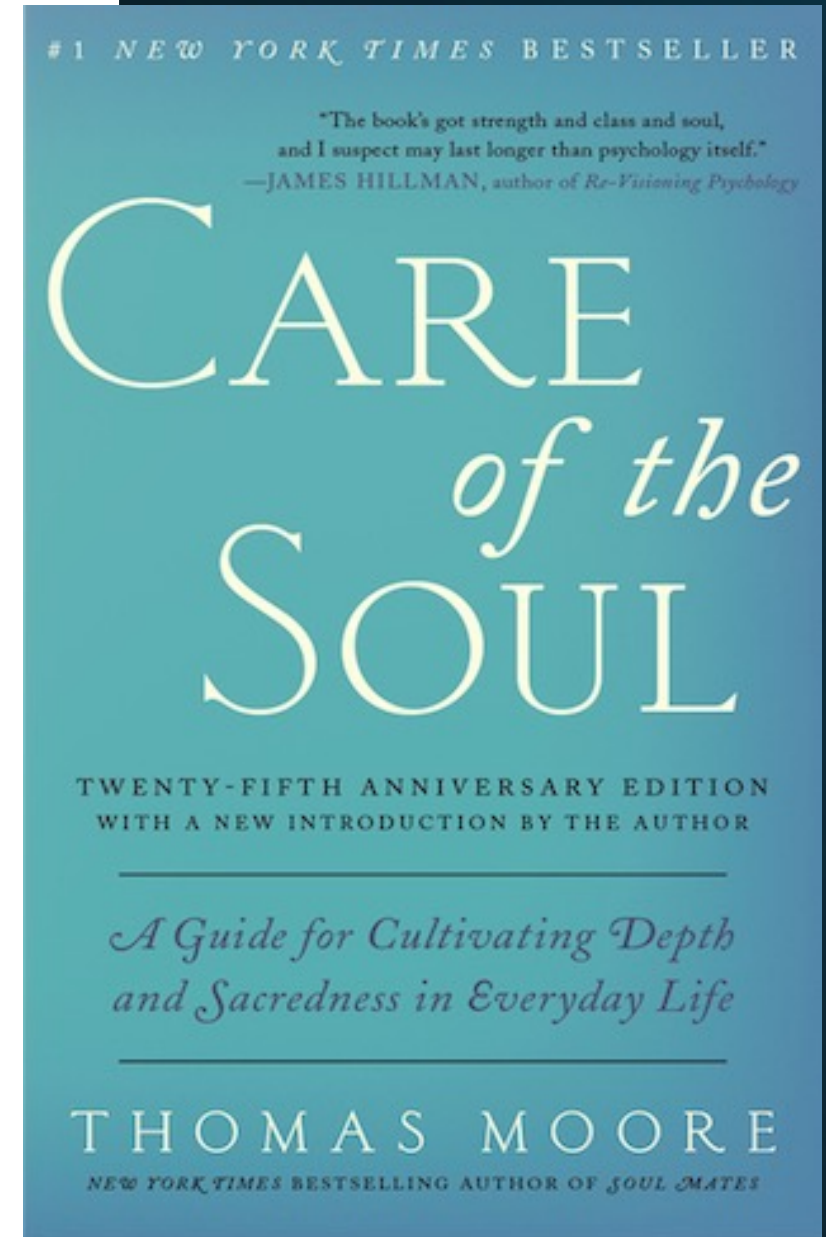
Healthcare...deconstructs story into thousands of tiny pieces—pages of boxes and check marks for which no one is responsible.” (Sweet, 8-9).

The Costs of Caring

- **Burnout**
- **Compassion fatigue**
- **Secondary traumatization**
- **Vicarious traumatization**
- **Posttraumatic Stress Disorder**
- **Demoralization**
- **Moral distress, Moral injury**
- **Soul loss**
- **Suicide**

Soul Loss

- emptiness
- meaninglessness
- vague depression
- disillusionment
- a loss of values
- yearning for personal fulfillment
- a hunger for spirituality



Thomas Moore, *The Care of the Soul: A Guide for Cultivating Depth and Sacredness in Everyday Life* (NY: Harper, 1992), xvi.

Burnout as Soul Loss?

Can we think of “soul” as our source of:

- Vitality
- Creativity
- Connection
- Passion
- Compassion
- Renewal

What would help you reconnect to soul and bring it back into your work and life?

Post-Burnout Growth

Each cost of suffering can be seen as having a thriving counterpart:

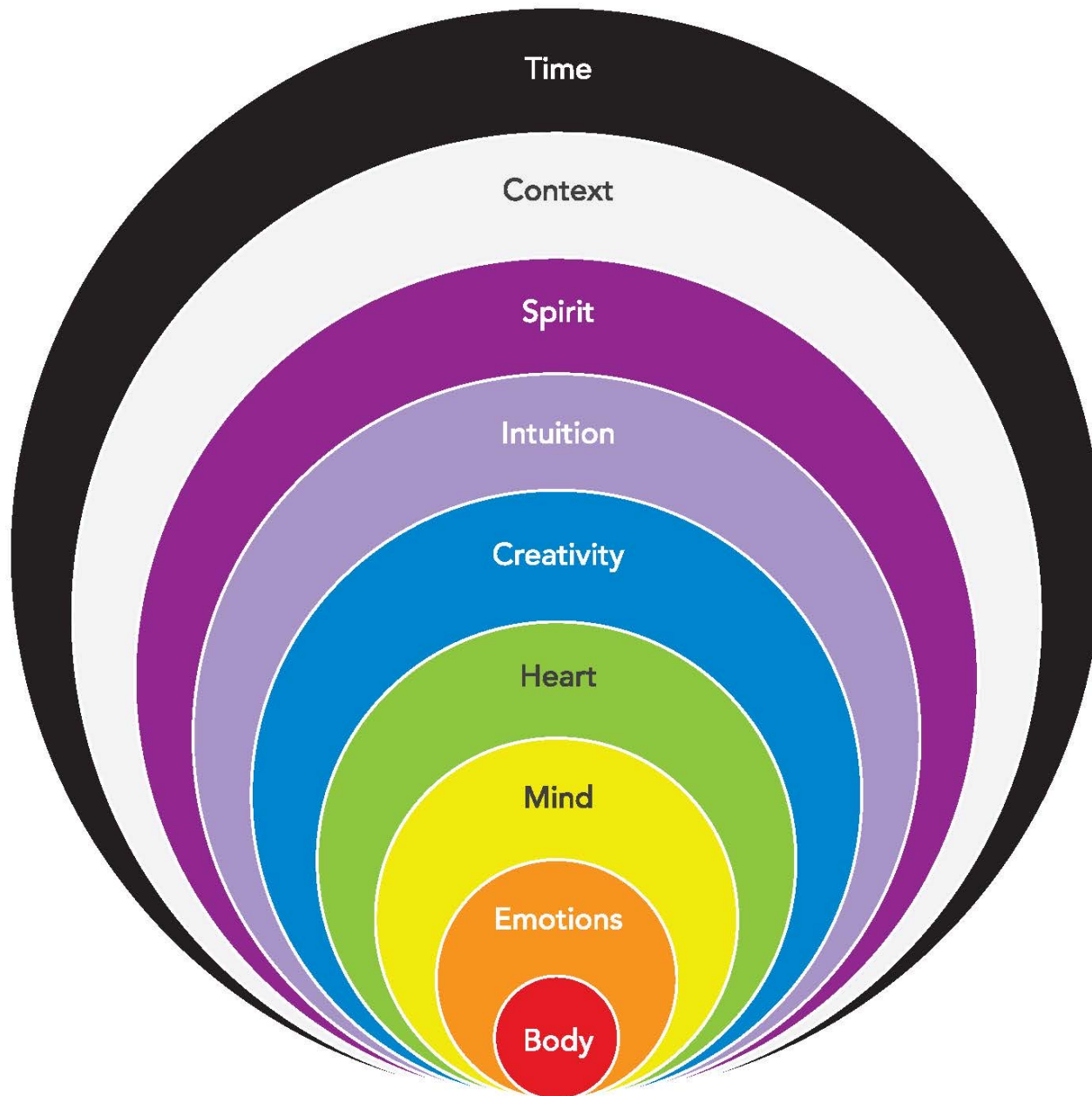
- from burnout to post-burnout growth
- from trauma to posttraumatic growth
- from dehumanization to re-humanization
- from demoralization to remoralization
- from soul loss to soul recovery
- from suicide to finding meaning & purpose

Kopacz & Houghton, “A New Paradigm for Growth,” *CLOSLER*, Johns Hopkins Medicine (10/18/22)

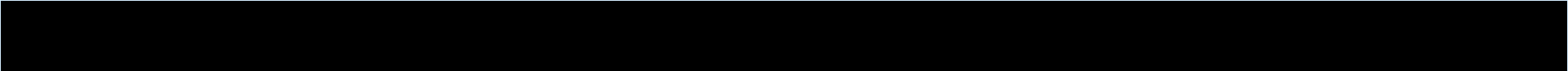
<https://closler.org/lifelong-learning-in-clinical-excellence/a-new-paradigm-for-growth>



What makes a *Whole* Human Being?



- Body
- Emotions
- Mind
- Heart
- Creative Expression
- Intuition
- Spirit & Soul
- Relationships
- Environment
- Phase of Life



<i>Dimensions:</i>	<i>What are you doing to care for ____?</i>	<i>What would you like to do to care for ____?</i>
BODY		
EMOTIONS		
MIND		
HEART		

CREATIVITY		
INTUITION		
SPIRIT & SOUL		
TIME Stage of life		
CONTEXT Relationships & Environment		

Re-humanizing Medicine

A Holistic Framework for
Transforming Your Self, Your Practice,
and the Culture of Medicine



David R. Kopacz

"A gift of hope, courage, and self-love
that both teaches and inspires us..."

JEAN WATSON, PhD, RN Founder, Watson Caring Science
Institute and author of *Caring Science as Sacred Science*

CARING *for* SELF & OTHERS

Transforming Burnout,
Compassion Fatigue,
and Soul Loss

DAVID KOPACZ, MD

Author of *Becoming Medicine* and *Re-humanizing Medicine*

PERSONAL HEALTH INVENTORY

Use this circle to help you think about your whole health.

- "Me" at the center of the circle: This represents what is important to you in your life, and may include your mission, aspirations, or purpose. Your care focuses on you as a unique person.
- Mindful awareness is about noticing what is happening when it happens.
- Your everyday actions make up the green circle. Your options and choices may be affected by many factors.
- The next ring is professional care (tests, medications, treatments, surgeries, and counseling). This section includes complementary approaches like acupuncture and yoga.
- The outer ring includes the people, places, and resources in your community. Your community has a powerful influence on your personal experience of health and well-being.



Rate where you feel you are on the scales below from 1–5, with 1 being not so good, and 5 being great.

Physical Well-Being ☐ 1 NOT SO GOOD ☐ 2 ☐ 3 ☐ 4 ☐ 5 GREAT

Mental/Emotional Well-Being ☐ 1 NOT SO GOOD ☐ 2 ☐ 3 ☐ 4 ☐ 5 GREAT

Life: How is it to live your day-to-day life? ☐ 1 NOT SO GOOD ☐ 2 ☐ 3 ☐ 4 ☐ 5 GREAT

What matters most to you in your life right now? Write a few words to capture your thoughts:

Personal Health Inventory

https://www.va.gov/WHOLEHEALTH/docs/PHI_Jan2022_Final_508.pdf



Live Whole Health App

<https://mobile.va.gov/app/live-whole-health>



Where You Are and Where You Would Like to Be

For each area below, consider "Where you are" and "Where you want to be." Write in a number between 1 (low) and 5 (high) that best represents where you are and where you want to be. You do not need to be a "5" in any of the areas now, nor even wish to be a "5" in the future.

Building Blocks of Health and Well-being	Where I am Now (1-5)	Where I Want to Be (1-5)
Moving the Body: Our physical, mental, and emotional health are impacted by the amount and kind of movement we do.		
Recharge: Our bodies and minds need rest in order to optimize our health. Recharging also involves activities that replenish your mental and physical energy.		
Food and Drink: What we eat, and drink can have a huge effect on how we experience life, both physically and mentally.		
Personal Development: Our health is impacted by how we spend our time. We feel best when we can do things that really matter to us or bring us joy.		
Family, Friends, and Co-Workers: Our relationships, including those with pets, have as significant an effect on our physical and emotional health as any other factor associated with well-being.		
Spirit and Soul: Connecting with something greater than ourselves may provide a sense of meaning and purpose, peace, or comfort. Spiritual connection can take many forms.		
Surroundings: Surroundings include where we live, work, learn, play, and worship—both indoors and out. Safe, stable, and comfortable surroundings have a positive effect on our health.		
Power of the Mind: Our thoughts are powerful and can affect our physical, mental, and emotional health. Changing our mindset can aid in healing and coping.		
Professional Care: Partnering with your health care team to address your health concerns, understand care options, and define actions you may take to promote your health and goals.		

Reflections

Now that you have thought about what matters to you in all of these areas, what would your life look like if you had the health you want? What kind of activities would you be doing? Or how might you feel different? What area might you focus on?

What might get in the way? How might you start?

VA Whole Health Web Site:

<https://www.va.gov/wholehealth/>



Our Next Webinar

The NCTRC Webinar Series

Occurs 3rd Thursday of every month.

Hosting TRC: Center for Connected Health Policy (CCHP)

Telehealth Topic: TBA

Date: January 15, 2026

Times: 11 AM – 12 PM (PT)



Please Complete Our Survey

Your opinion of this webinar is valuable to us.

Please participate in this brief perception survey (will also open after webinar):

<https://www.surveymonkey.com/r/XK7R72F>

