

Behavioral Health Guidelines for Medical Isolation



The following are some of the behavioral health considerations to take into account when a person is in medical isolation.

	Inform	Support	Triage	Treat
Patients	Provide information, in native languages, about common responses to isolation. Use professional interpreters if needed. Use multiple modes to communicate information about stress and isolation.	Provide a supportive environment and relationships with patients - encourage exercise, visits, favorite foods, and home reminders as appropriate. Provide basic supportive counseling and respond promptly to call lights. Provide access to communication means.	Assess for mental status upon initiation and periodically throughout isolation.	Refer to psychiatrist or licensed mental health practitioner for further assessment or treatment. Employ suicide precautions as applicable. Know common reactions to isolation and potential for depression and anxiety symptoms.
Staff	Provide information and frequent updates about risks of working with patients. Praise and thank workers. Control rumors by dispensing regular, accurate information to all staff.	Provide break area away from isolation unit. Consider mandatory breaks. Hold regular staff meetings that include mental health support.	Supervisors regularly assess stress level, coping, and fitness for duty of workers.	Provide referral information for in-house or community resources (e.g. Employee Assistance Program).
Patient Families	Obtain release of information from patient so family can be informed of patient progress. Provide accurate information about isolation precautions, common responses, illness, and risks to patient and others. Consider informing family prior to releasing information to media. Keep family informed while at or away from your facility.	Inquire about spiritual needs. Encourage family members to take frequent breaks from hospital setting, get adequate sleep and nutrition. Encourage family members to accept help from others. Create space for family members to gather away from media.	Monitor stress and expressions of distress of family.	Provide referral information (for community or hospital resources that the family may access as needed).
Community	Provide frequent updates to the media and your community in multiple languages. Release information about how people can be most helpful to those affected by isolation precautions. Release technical information to community health professionals and hotlines.	Consider arranging for a location outside of hospital (or your facility) for community members to gather if needed or desired.	Consider providing interventions or referral training to community members in a position to detect stress or distress in others (e.g. teachers, clinic nurses, faith leaders).	Provide a listing of potential referral sources to media for dissemination to the public along with information about when to seek help.