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Considerations for a COVID-Safe Office for Psychotherapy

Re-open and Maintain Your In-Person Office Responsibly

Oregon Psychological Association

2021 Annual Conference

May 1, 11am to 12 noon

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Mentor Research Institute
non-profit 501c3
Portland Oregon
Providing Consumer Protection and Professional Training Since 1995
www.MentorResearch.org
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Ethical Considerations For A COVID-Safe Office
COVID-19 Re-Open & Maintain Your Practice Training
COVID-19 Safe Air Quality For Psychotherapy Practice – Training
COVID Safe Home Considerations
The Role Of Patient Reported Outcome Measures In Mental Health
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This training is aligned with 13 authoritative resources…

1. American Psychiatric Association Practice Guidance for COVID-19 (January 2021)
2. American Professional Agency - The Nuts and Bolts of Reopening your Practice after COVID-19 (May 2020)
3. InterOrganizational Practice Committee (IOPC): Guidance Recommendation for Models of Care During the Novel Coronavirus Pandemic (September 30, 2020).
4. Coronavirus (COVID-19) Response Resources form ASHRAE and others
5. APA COVID-19 Information and Resources
6. COVID-19 (2019 novel coronavirus) Resource Center for Physicians
7. Department of Labor – OSHA Guidance on Preparing Workplaces for COVID-19 (May 2020)
8. OSHA - Healthcare Workers and Employers
9. OSHA – COVID-19 Hazard Recognition
10. American Psychiatric Association Practice Guidance for COVID-19 (January 2021)
11. .COVID-19 and Oregon OSHA
12. Steps Healthcare Facilities Can Take to Stay Prepared for COVID-19
13. Factors to Consider in Reopening In-person Psychological Services During the COVID-19 Crisis (May 7, 2020)

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Mentor Research Resources

1. Ethical Considerations For A COVID-Safe Office (March 23, 2021)
2. COVID-19 Re-Open & Maintain Your Practice - Training (July 2020)
3. COVID-19 Safe Air Quality For Psychotherapy Practice – Training (Release date: April, 2021)
4. COVID Safe Home Considerations (November 15, 2020)

6

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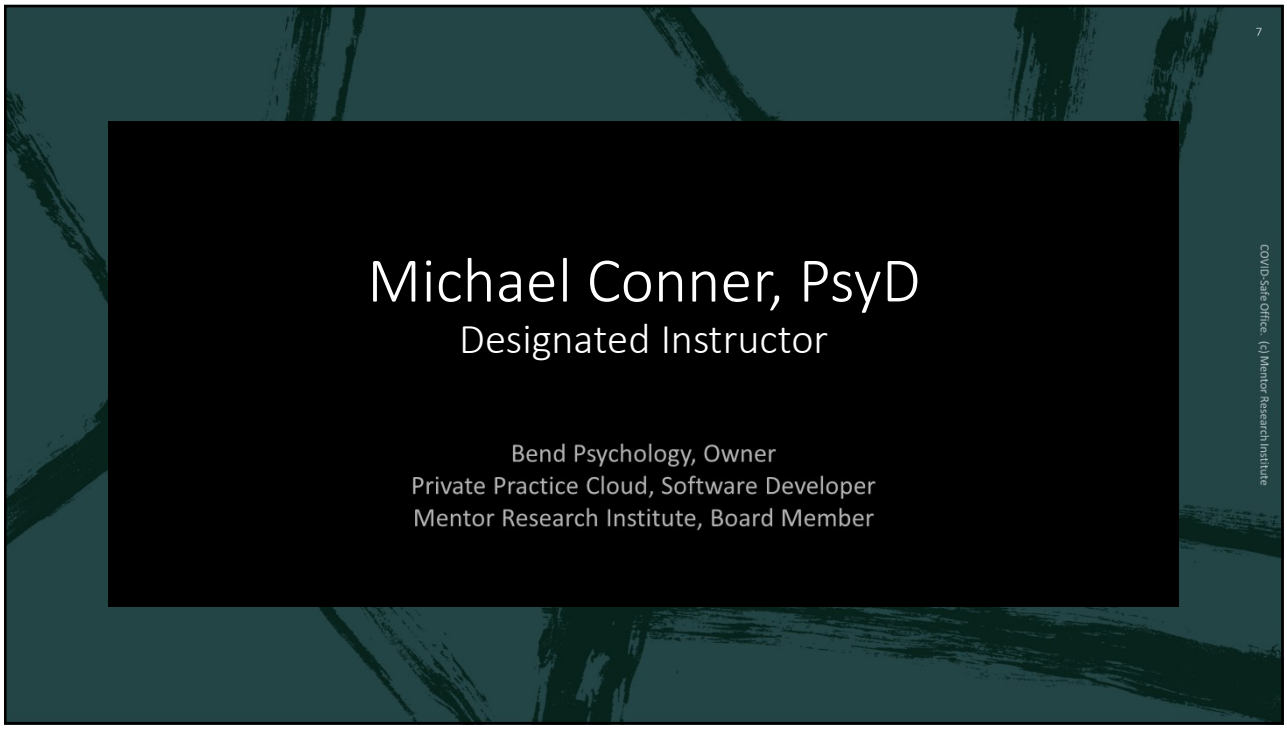
7
Michael Conner, PsyD
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Bend Psychology, Owner
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Mentor Research Institute, Board Member
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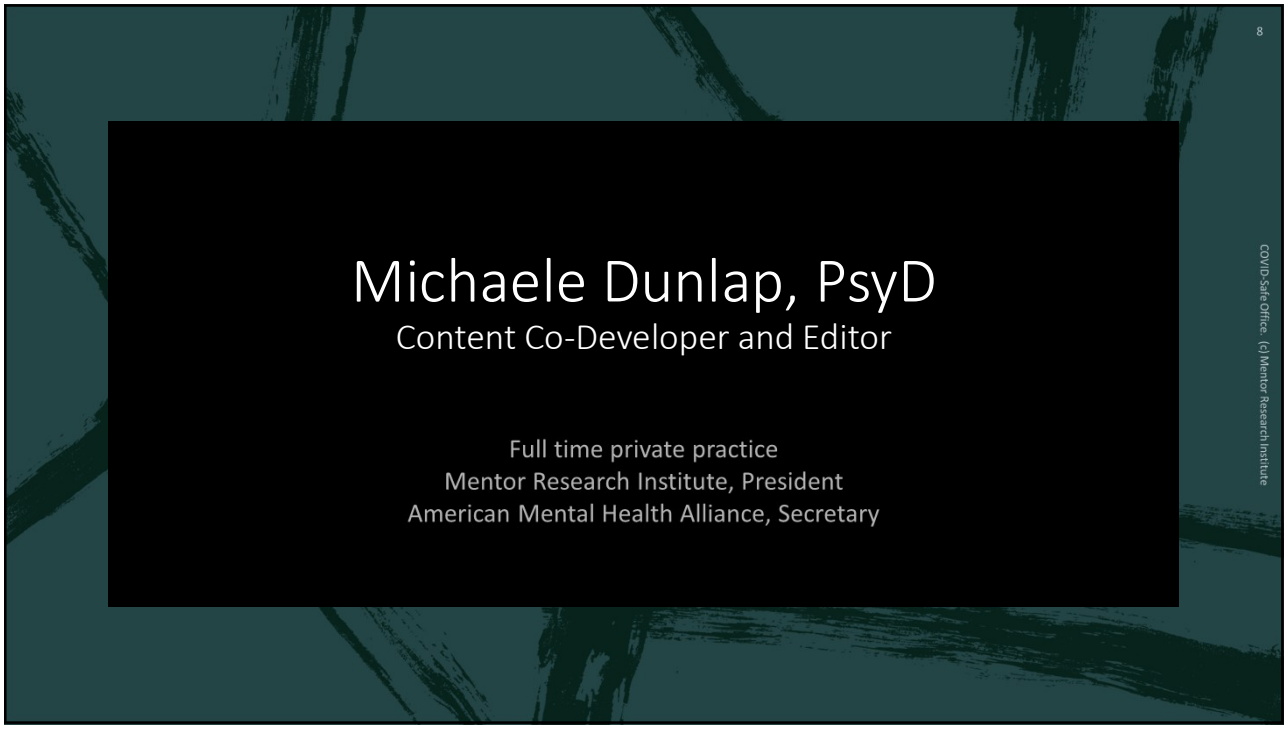
8
Michaele Dunlap, PsyD
Content Co-Developer and Editor
Full time private practice
Mentor Research Institute, President
American Mental Health Alliance, Secretary
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8

Research, writing & development of the technology for MRI COVID safety trainings has consumed 475 hours (and counting).

9

9

How long will SARS-CoV-2 be a problem?

Depending on science and geopolitical factors -> 3 to 20+ years

The Pandemic may become Endemic

10

10

https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le2342C.pdf

PUBLIC HEALTH DIVISION
Kate Brown, Governor

Oregon Health Authority

800 NE Oregon
Portland OR 97232
COVID.19@dhsoha.state.or.us
healthoregon.org/coronavirus

Effective Date: January 29, 2021

Sector Guidance — General Guidance for Employers and Organizations

Authority: Executive Order No. 20-66, ORS 433.441, ORS 433.443, ORS 431A.010

Applicability: All employers subject to Executive Order 20-66.

Enforcement: To the extent this guidance requires compliance with certain provisions, it is enforceable as specified in Executive Order No. 20-66, paragraph 10.

Definitions: For purposes of this guidance, the following definition applies:

- "Net Area" means the actual occupied area not including unoccupied accessory areas such as corridors, stairways, ramps, toilet rooms, mechanical rooms and closets. The net area is intended to include only the area of the room used for a specific purpose and does not include the areas mentioned above and therefore is not included in the net area.
- "Outdoor" means any open-air space including any space which may have a temporary or fixed cover (e.g. awning or roof) and at least fifty percent of the square footage of its sides open for airflow such that open sides are not adjacent to each other.

Sector Guidance — General Guidance for Employers and Organizations

January 29, 2021

The Public Health Division manages public health. They expect healthcare professionals will practice competently.

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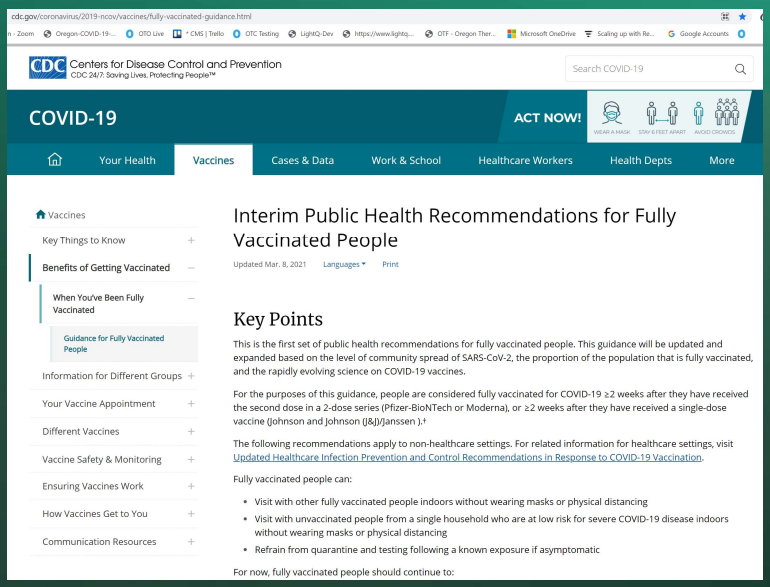
https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated-guidance.html



Recommendations for Fully Vaccinated People

March 8, 2021

Immunogenicity of a Single Dose of SARS-CoV-2 Messenger RNA Vaccine in Solid Organ Transplant Recipients

JAMA, March 8, 2021
https://jamanetwork.com/journals/jama/fullarticle/2777685

MRI recommends that for immunosuppressed patient psychotherapists consider additionally making the office vacant for 1 hour before appointments.

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Managing Herd Mentality
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Are you already seeing or planning to see patients in-person?
A warning.
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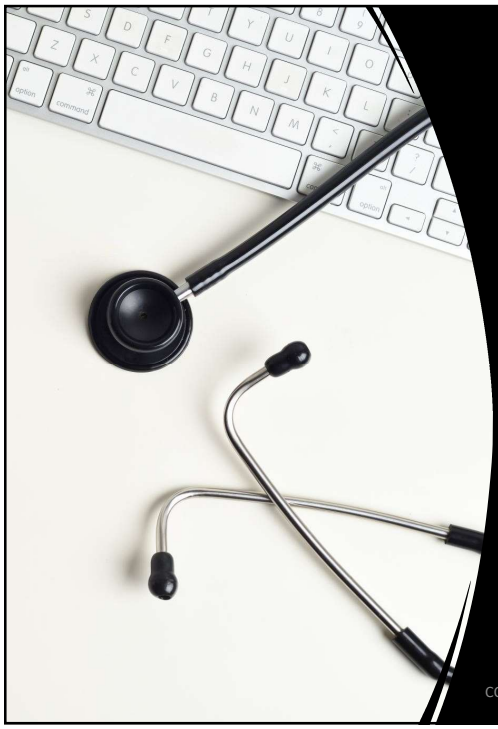

In New York…
"Some psychotherapists who want to discuss seeing patients in-person have encountered what may be a growing anti-science group think."

The result is a growing "Don't ask. Don't tell".

15

Failed Committee Reasoning

The odds are not significantly different

Examples of Healthcare Work Tasks Associated with Exposure Risk Levels

Lower (caution)	~~Medium~~ High	VERY High	~~Very~~ High
• Performing administrative duties in non-public areas of healthcare facilities, away from other staff members. • Note: For activities in the lower (caution) risk category, OSHA's *Interim Guidance for Workers and Employers of Workers at Lower Risk of Exposure* may be most appropriate.	• Providing care to the general public who are not known or suspected COVID-19 patients. • Working at busy staff work areas within a healthcare facility.	• Entering a known or suspected COVID-19 patient's room. • Providing care for a known or suspected COVID-19 patient not involving aerosol-generating procedures.	• Performing aerosol-generating procedures (e.g., intubation, cough induction procedures, bronchoscopies, some dental procedures and exams, or invasive specimen collection) on known or suspected COVID-19 patients. • Collecting or handling specimens from known or suspected COVID-19 patients.

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The following are assertions for consideration based on evidence and science.

There is no conclusion.

Physics > atmospheric science > epidemiology > biostatistics > engineering > ethics > psychotherapy

The Argumentative Theory: Predictions and Empirical Evidence, Hugo Mercier
Trends in Cognitive Science, 2016.
https://drive.google.com/file/d/12prGJndZqwZ1uBJ864fS86sfQOdrd0Kb/view

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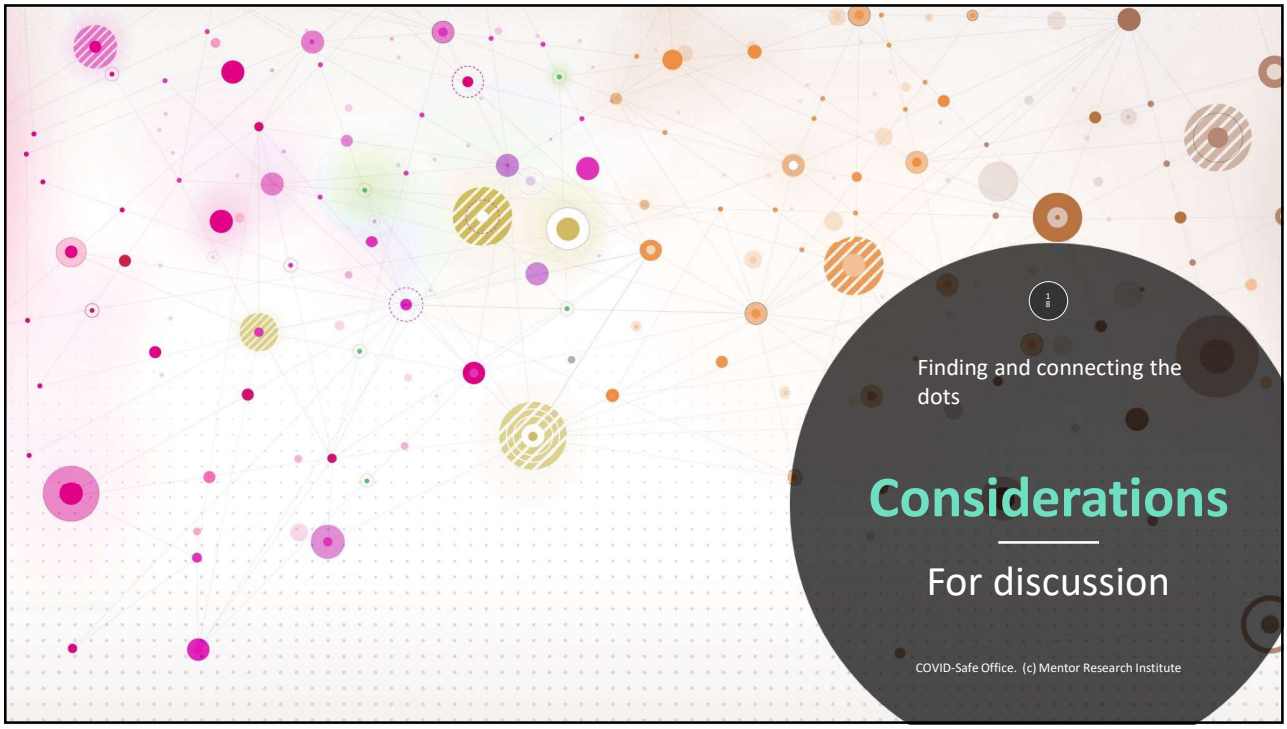

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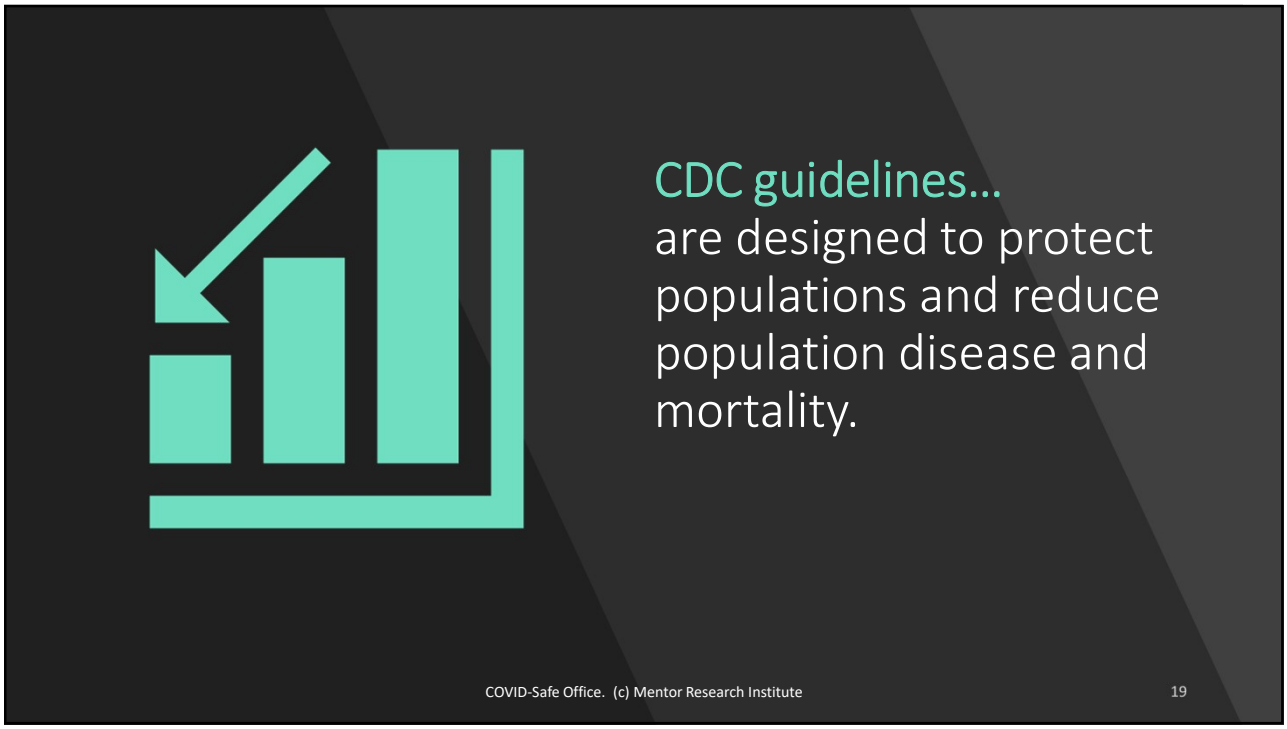
CDC guidelines…
are designed to protect populations and reduce population disease and mortality.
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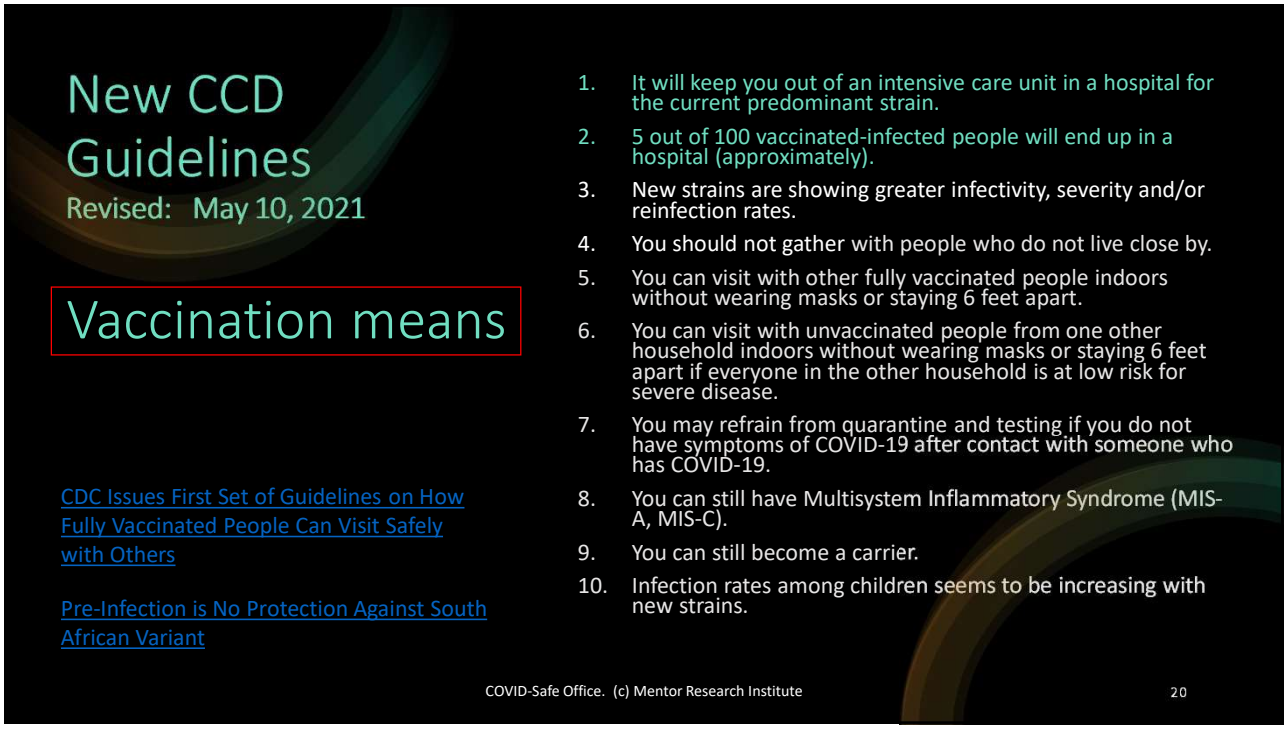
19


New CCD Guidelines
Revised: May 10, 2021
Vaccination means
1. It will keep you out of an intensive care unit in a hospital for the current predominant strain.
2. 5 out of 100 vaccinated-infected people will end up in a hospital (approximately).
3. New strains are showing greater infectivity, severity and/or reinfection rates.
4. You should not gather with people who do not live close by.
5. You can visit with other fully vaccinated people indoors without wearing masks or staying 6 feet apart.
6. You can visit with unvaccinated people from one other household indoors without wearing masks or staying 6 feet apart if everyone in the other household is at low risk for severe disease.
7. You may refrain from quarantine and testing if you do not have symptoms of COVID-19 after contact with someone who has COVID-19.
8. You can still have Multisystem Inflammatory Syndrome (MIS-A, MIS-C).
9. You can still become a carrier.
10. Infection rates among children seems to be increasing with new strains.
CDC Issues First Set of Guidelines on How Fully Vaccinated People Can Visit Safely with Others
Pre-Infection is No Protection Against South African Variant
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What is a COVID-Safe Psychotherapy Office?

- A licensed psychotherapist, employees, an office, and building that has been methodically evaluated in the light of relevant guidelines, physical characteristics, and mechanical requirements.
- The practice parameters include policies and procedures based on knowledge obtained through qualified education, training and/or consultation.

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The fact that a psychotherapist is vaccinated means they will not be likely to end up in a hospital.

However, the next patient can become infected by the previous patient if you do not maintain a COVID-Safe office.

22

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COVID-19 Vaccines vs Variants—Determining How Much Immunity Is Enough

JAMA, March 2021

B.1.351, B.1.1.7 & SARS-CoV-2

- "…nearly all vaccines used in humans prevent asymptomatic infection and spread."
- "In general, vaccines that are effective in reducing infections do have major impacts on reducing transmission,"
- "…In March, Pfizer and BioNTech announced that non–peer-reviewed data from Israel showed their vaccine was 94% effective against asymptomatic SARS-CoV-2 infection."
- Modifying vaccines to target variants isn't difficult. For example, with Pfizer-BioNTech's and Moderna's mRNA vaccines, "it's very convenient, because, basically, all you do is change a computer program and the synthetic for the synthesizing portion of this and you can change the vaccine,"

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The first thing you need is…

a method to ethically screen out patients who represent an unacceptable risk.

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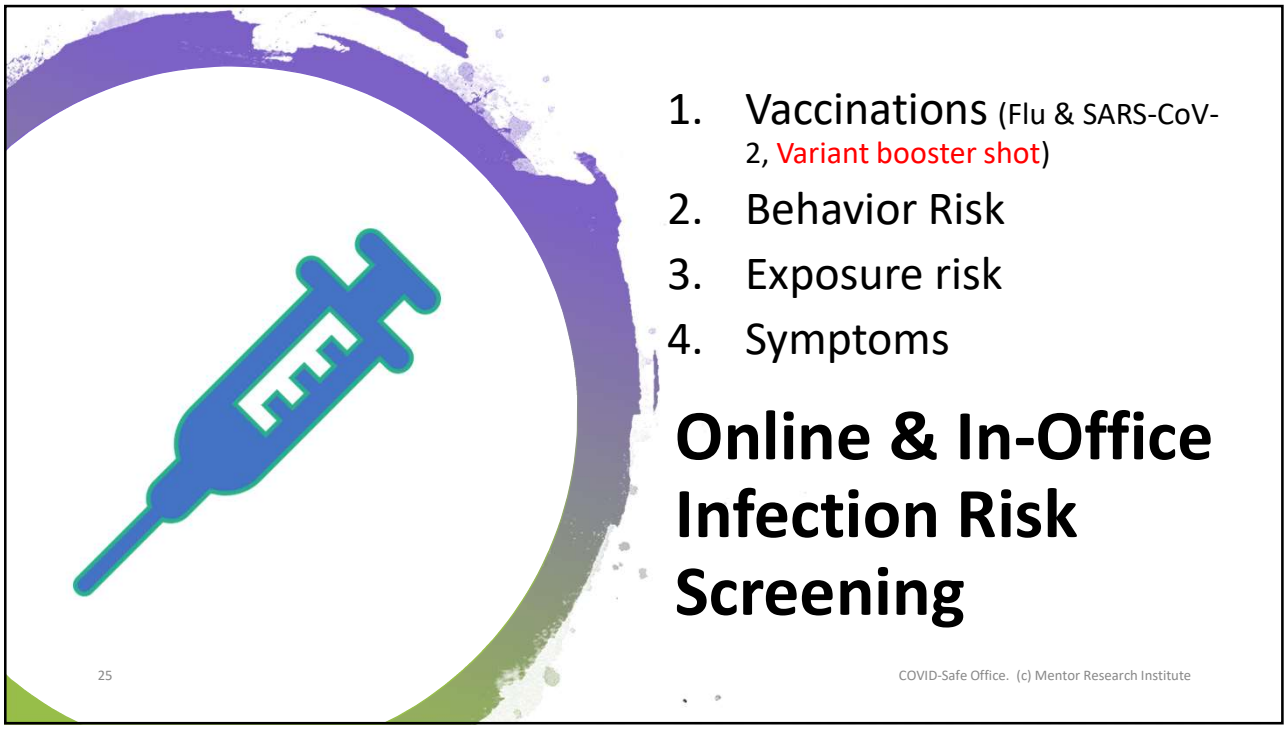
24


1. Vaccinations (Flu & SARS-CoV-2, Variant booster shot)
2. Behavior Risk
3. Exposure risk
4. Symptoms
Online & In-Office Infection Risk Screening
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COVID-Safe Office. (c) Mentor Research Institute

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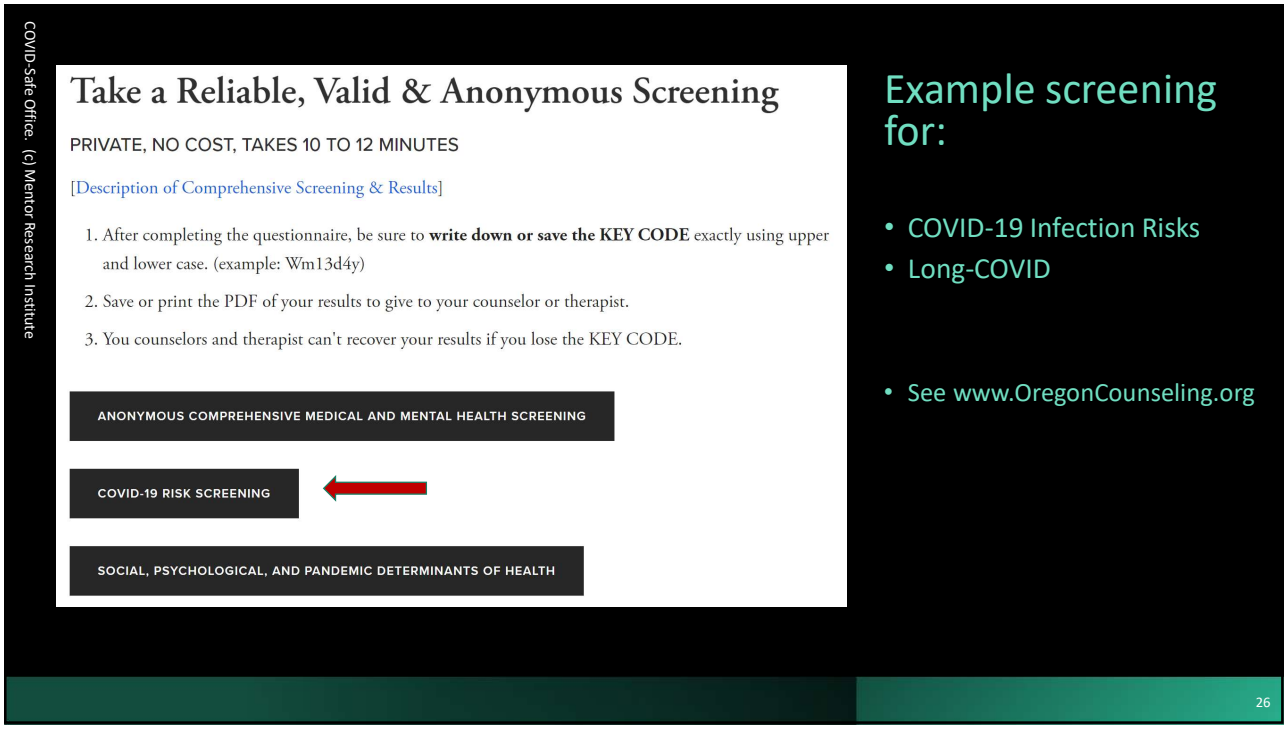
COVID-Safe Office. (c) Mentor Research Institute
Take a Reliable, Valid & Anonymous Screening
PRIVATE, NO COST, TAKES 10 TO 12 MINUTES
[Description of Comprehensive Screening & Results]
1. After completing the questionnaire, be sure to write down or save the KEY CODE exactly using upper and lower case. (example: Wm13d4y)
2. Save or print the PDF of your results to give to your counselor or therapist.
3. You counselors and therapist can't recover your results if you lose the KEY CODE.
ANONYMOUS COMPREHENSIVE MEDICAL AND MENTAL HEALTH SCREENING
COVID-19 RISK SCREENING
SOCIAL, PSYCHOLOGICAL, AND PANDEMIC DETERMINANTS OF HEALTH
Example screening for:
• COVID-19 Infection Risks
• Long-COVID
• See www.OregonCounseling.org
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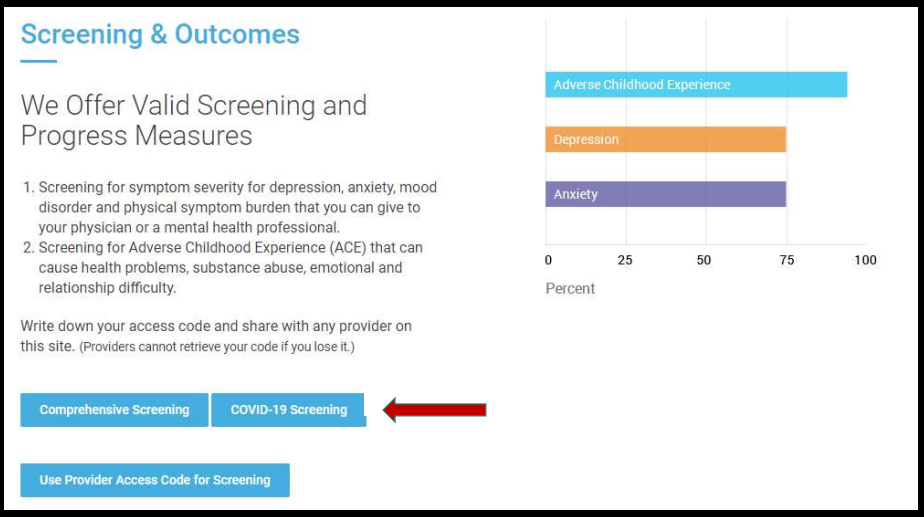

Another example screening:

OregonTherapyOptions.com

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Anonymous Links on Servers that Offer a BAA

https://client.lightq.net/anonymousquestionnaire.html?AccessCode=mhWA5In&QuestionnaireName=COVID-19%20Comprehensive%20Infection%20Risk%20Screening%20v1.33

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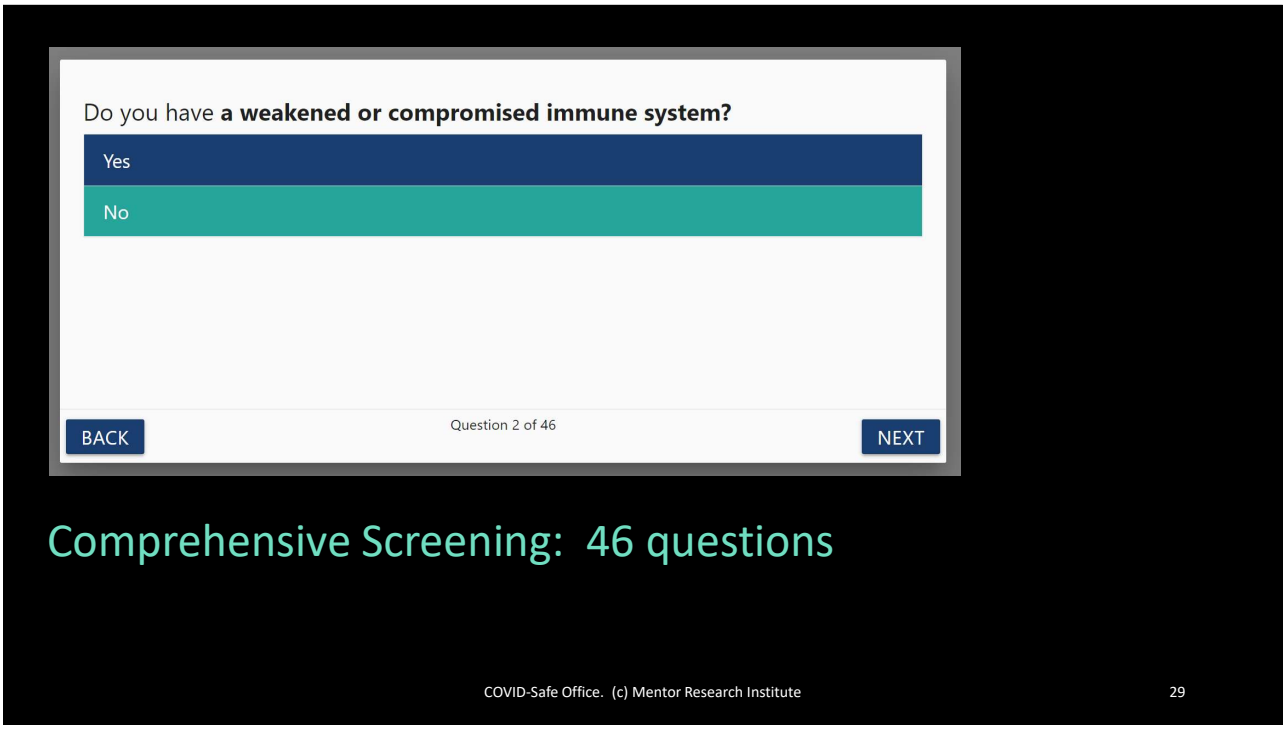
Do you have **a weakened or compromised immune system?**
Yes
No
BACK
Question 2 of 46
NEXT
Comprehensive Screening: 46 questions
COVID-Safe Office. (c) Mentor Research Institute
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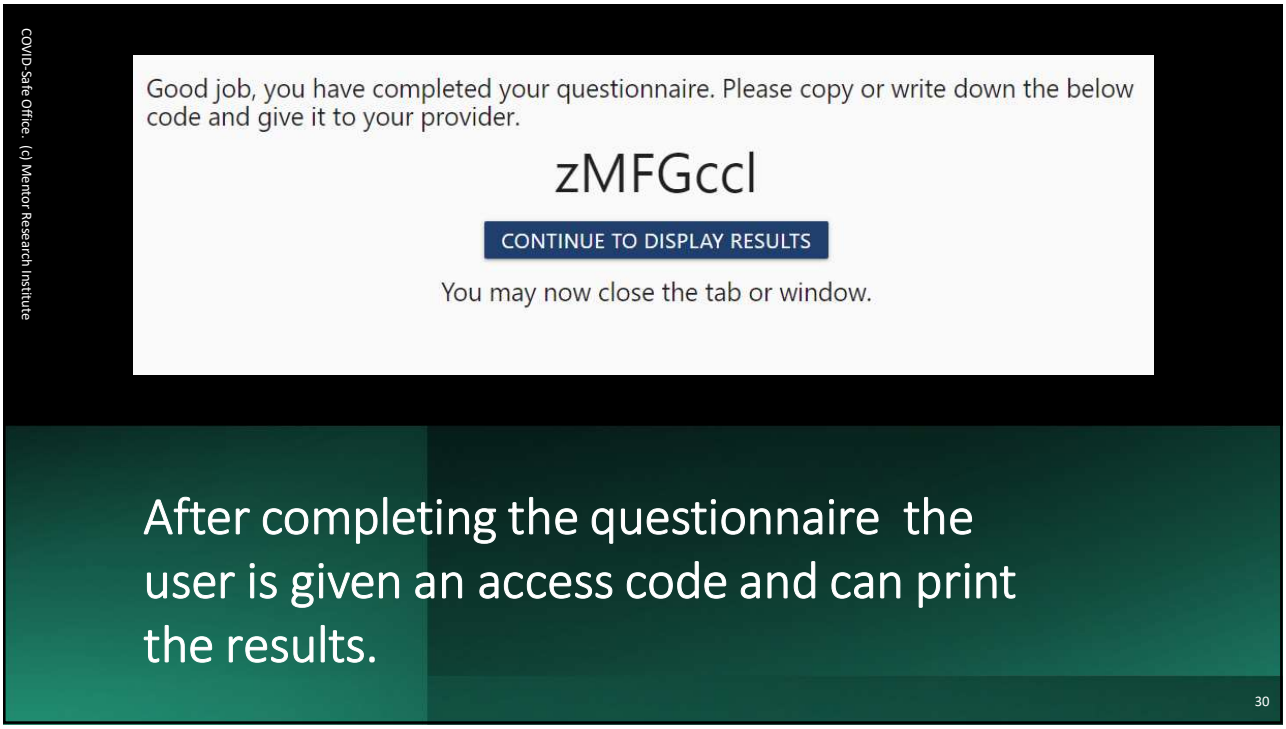
COVID-Safe Office. (c) Mentor Research Institute
Good job, you have completed your questionnaire. Please copy or write down the below code and give it to your provider.
zMFGccl
CONTINUE TO DISPLAY RESULTS
You may now close the tab or window.
After completing the questionnaire the user is given an access code and can print the results.
30

30

Confidential Report

Anonymous Questionnaire Summary

Access Code	zMFGccl
COVID-19 Health Risks score:	1
Covid-19 Symptoms v1.6 score:	25
COVID-19 Exposure v1.8 score:	19
COVID-19 Activity v1.4 score:	6
COVID-19 and Flu Vaccinations score:	1

COVID-19 Health Risks

Adults of any age with the following conditions are at increased risk of severe illness from the virus that causes COVID-19. Patients with weakened immune system, and any underlying health problems, are more likely when infected and to have a severe illness.

0	No	Do you have	a history of asthma, lung disease or breathing problems?
0	No	Do you have	a weakened or compromised immune system?
1	Yes	Are you	mildly, moderately or severely overweight?
0	No	Do you have	a history of kidney or liver problems?
0	No	Are you	a current or former cigarette, cigar or other tobacco smoker?
0	No	Are you	diabetic or pre-diabetic?
0	No	Do you have	cancer or been treated for cancer?
0	No	Do you have	a history of heart conditions and other cardiovascular (heart blood circulation) or cerebrovascular (brain circulation) problems?
0	No	Do you have	multiple health problems?

Example Report

Screenings should have a high rate of <u>false</u> positives.

31

Body Temperature

- > 99.1F
- Outside temperature effects
- Hat effects

32

Screening can be used as evidence for your ethical decision whether or not to see a patient in-person.

You are not prejudicial if you rely on valid content to estimate the risk that a patient may be infectious.

33

33

Is it ethical to make a patient sign a waiver of liability at the beginning of each appointment?

Is it ethical to require a patient to sign a waiver when the intent is to pressure patients to choose telehealth?

34

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The second task is to address…

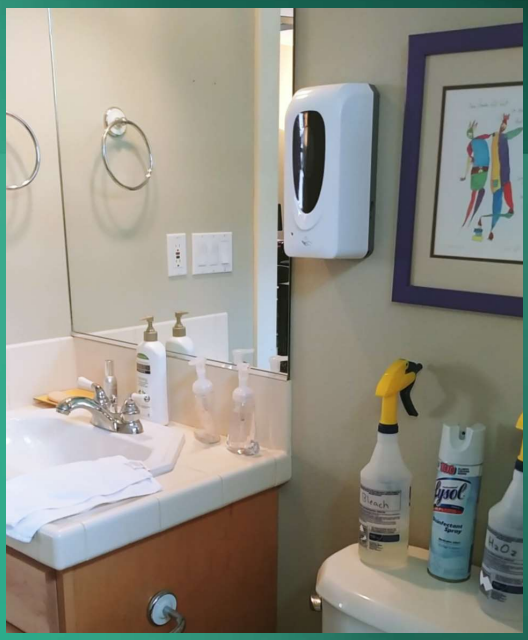
Fomite Sanitization

35

At least every 24 hours if used less that 12 hours per day.

https://osha.oregon.gov/OSHARules/div1/437-001-0744.pdf

- Soap
- Cloth hand towel
- Alcohol
- Bleach
- Hydrogen peroxide



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SOAP
37
• exposes fomites
• removes mediums
• kills SARS-CoV-2
Target:
• Hands
• Removing grime from surfaces
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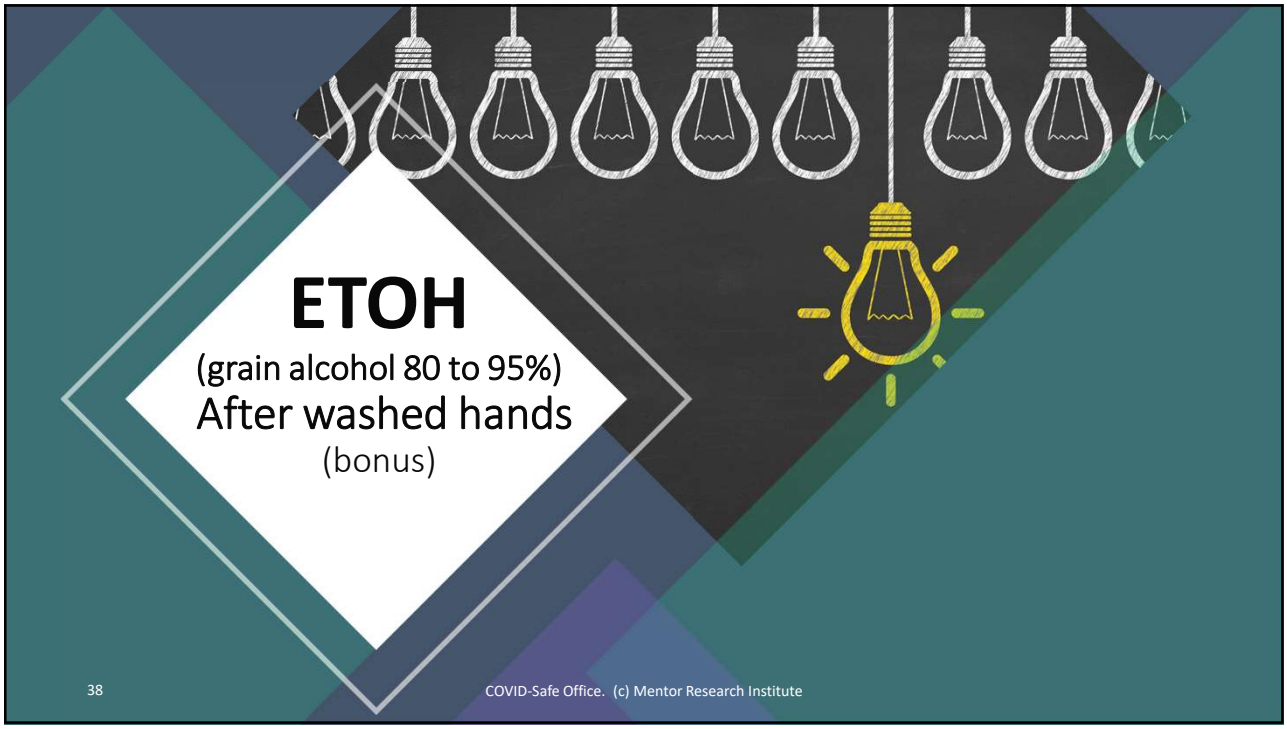
ETOH
(grain alcohol 80 to 95%)
After washed hands
(bonus)
38
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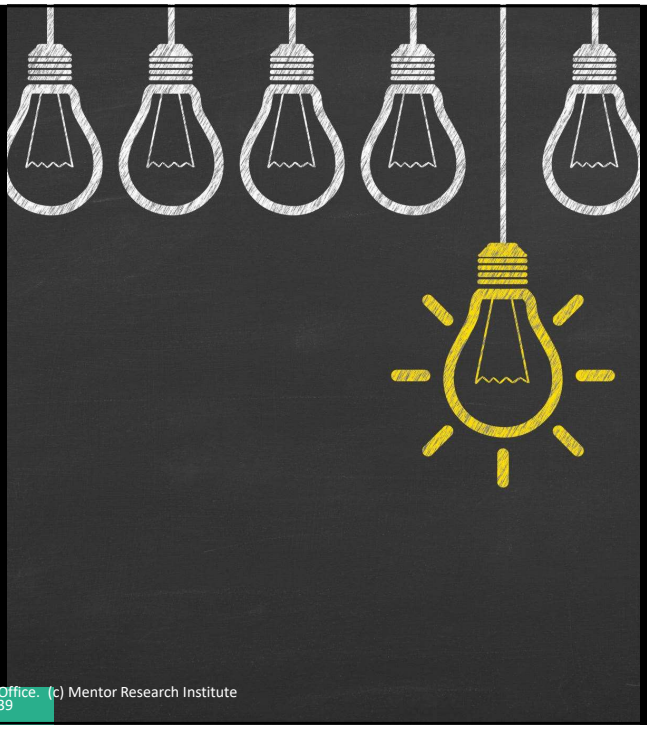
H2O2 & Chlorine



- Target: Surfaces
- Safety: H2O2 can be food safe.

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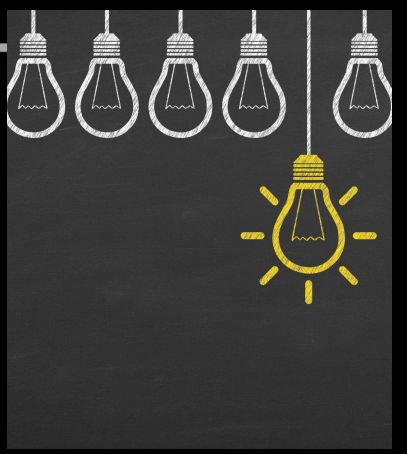
Atomized Disinfectant

Food safe H2O2 (6%)



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Engineering Controls

https://osha.oregon.gov/OSHARules/div1/437-001-0744.pdf

How have engineering controls such as ventilation (whether portable air filtration units equipped with HEPA filters, airborne infection isolation rooms, local exhaust ventilation, or whole-building HVAC systems) and physical barriers been used to minimize peoples exposure to COVID-19?

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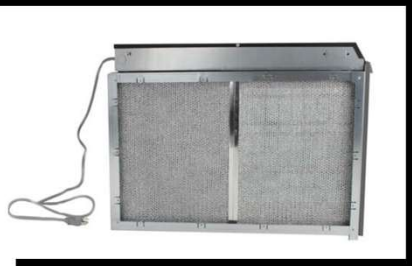
HVAC

Heating Ventilation Air Conditioning



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CADR
Clean Air Delivery Rate
100ft3 to 250ft3
0.003 to 0.1 µ
43

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RAC
Room Air Clearance
The required number of air exchanges between patient visits
Physician exam room RAC >= 6
Airborn infectious disease RAC >=13
44

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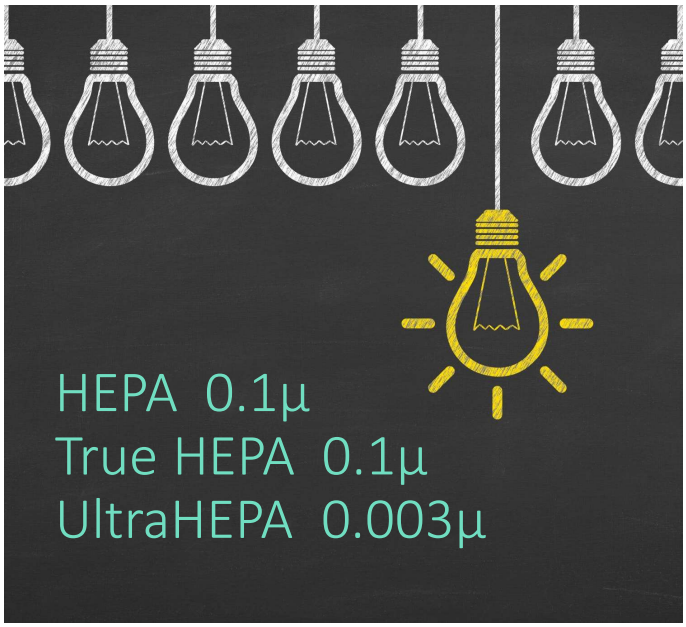
HEPA

- High-Efficiency Particulate Air
- High-Efficiency Particulate Arrestor



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MERV Rating	Minimum % of particles removed by air filter		
	E1 particles (0.3 - 1.0 microns)	E2 particles (1.0 - 3.0 microns)	E3 particles (3.0 - 10.0 microns)
MERV-1	-	-	<20%
MERV-2	-	-	<20%
MERV-3	-	-	<20%
MERV-4	-	-	<20%
MERV-5	-	-	>20%
MERV-6	-	-	>35%
MERV-7	-	-	>50%
MERV-8	-	>20%	>70%
MERV-9	-	>35%	>75%
MERV-10	-	>50%	>80%
MERV-11	>20%	>65%	>85%
MERV-12	>35%	>80%	>90%
MERV-13	>50%	>85%	>90%
MERV-14	>75%	>90%	>95%
MERV-15	>85%	>90%	>95%
MERV-16	>95%	>95%	>95%

MERV

(Minimum Efficiency Reporting Value)

The MERV rating system is intended to be used to classify a filter's ability to remove particulates from the air.

Is MERV 13 adequate?

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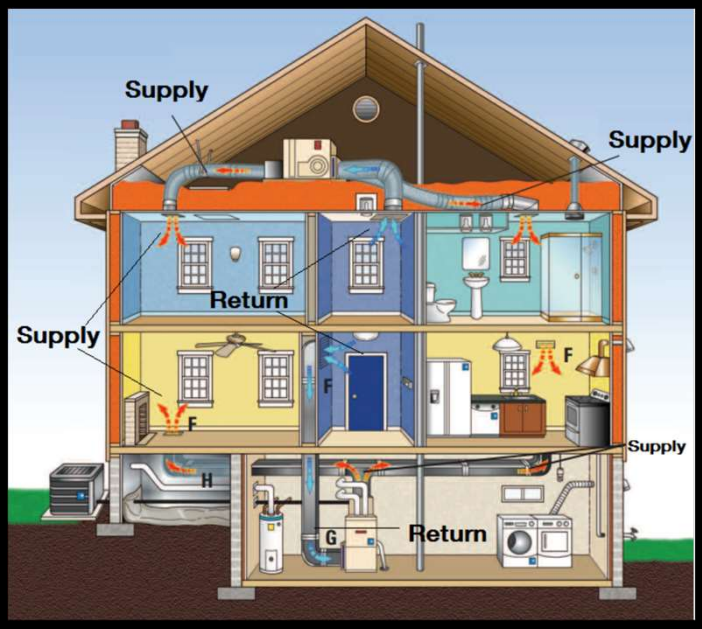
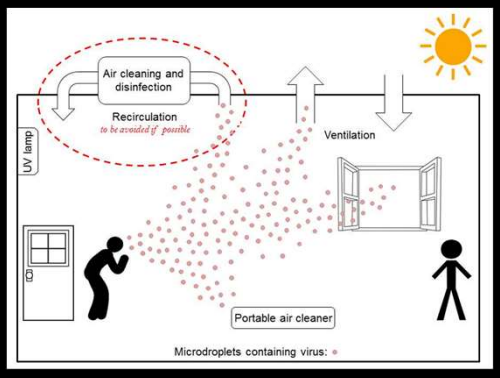


Caution

- Shared air among offices.
- Requires a sealed building.
- MERV 7 is not great but may be "good enough"



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Window Fans for Ventilation

1. Air supply
2. Air exhaust
3. Air exchange

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Air Exchange
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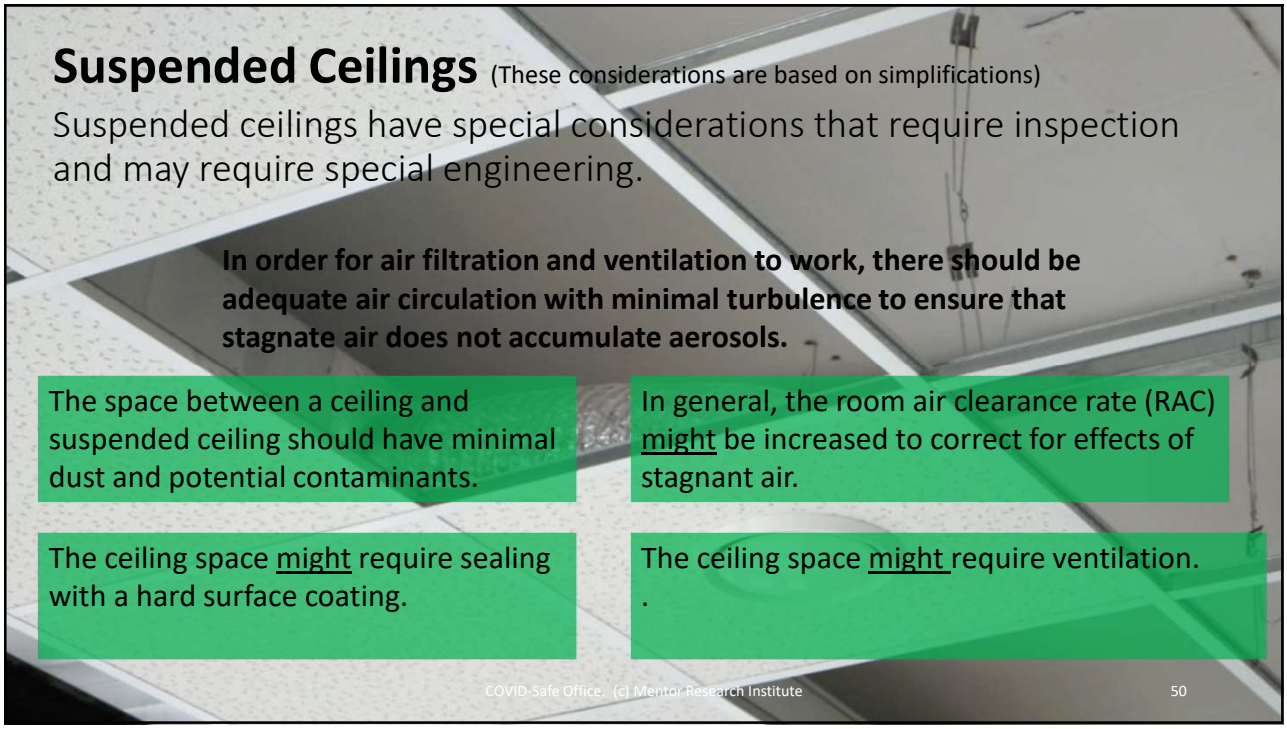
Suspended Ceilings (These considerations are based on simplifications)
Suspended ceilings have special considerations that require inspection and may require special engineering.
In order for air filtration and ventilation to work, there should be adequate air circulation with minimal turbulence to ensure that stagnate air does not accumulate aerosols.
The space between a ceiling and suspended ceiling should have minimal dust and potential contaminants.
In general, the room air clearance rate (RAC) might be increased to correct for effects of stagnant air.
The ceiling space might require sealing with a hard surface coating.
The ceiling space might require ventilation.
.
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50

Pressurized Air Wall & Dedicated Clean Air Supply for Patient

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Dehumidifier

35% ideal

< 30% is too low

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Ventilation using HVAC

For employers

OSHA – Oregon

The employer is **not** required to meet the provisions of the American National Standards (ANSI)/American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE) Standards 62.1 and 62.2 (ASHRAE 2019a, 2019b), but to the degree the employer does so it is in compliance with this paragraph. In accordance with the HVAC manufacturer's instructions and the design specifics of the HVAC system and as frequently as is necessary, the employer must ensure the following:

?

A) All air filters are maintained and replaced as necessary to ensure the proper function of the ventilation system; and

B) All intake ports that provide outside air to the HVAC system are cleaned, maintained, and cleared of any debris that may affect the function and performance of the ventilation system.

Pg 9

https://osha.oregon.gov/OSHARules/div1/437-001-0744.pdf

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BUYER BEWARE - ASHRAE Ventilation Standards in General for a Psychiatric Exam Room (RAC) is not Engineered for SAR-CoV-2 Infection Control

Table L-1 Check Table for the Ventilation Rate Procedure *(Continued)*

Occupancy Category	Combined Outdoor Air Rate (R_c) cfm/ft^2	L/s· m^2
Psychiatric consultation room	0.21	
Psychiatric examination room	0.21	
Psychiatric group room	0.41	
Psychiatric seclusion room	0.15	
Urgent care examination room	0.36	
Urgent care observation room	0.21	
Urgent care treatment room	0.44	
Urgent care triage room	0.51	

- **A CDC RAC of 6 requires 15 minutes in a typical physician exam room appointment. (e.g. 180 to 200ft3)**
- **ASHRAE standard HVAC RAC 6 ventilation is 50 minutes when clearing 105ft3/min in 5000ft3.**

OHSA Oregon does not expect ASHRAE ventilation standards for SARS-Cov-2 mitigation. Those standards may not be adequate alone for infection control if 50 minutes exposure in a 500ft2 psychotherapy office.

ASHRAE - American Society of Heating, Refrigerating and Air-Conditioning Engineers

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Proxies for Infection Risk Monitoring

1. CO2
2. Particle Count
3. Temperature
4. Humidity
5. Visibility improvement (sight & laser)
6. Time (virus biological weaknesses)

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Monitoring

1. CO2
2. Temperature
3. Humidity

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Particle Monitoring

- 2.5 to 5.0 microns
- > 5 microns

58

Proxy measures of air quality are
visual, odor, CO2, humidity, temperature, & particle count.

Cleared in 16 minutes with 2 AirDoctor machines running at high speed.

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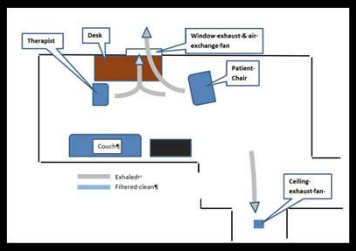

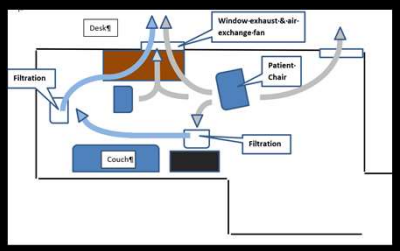

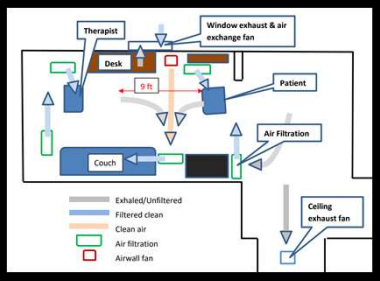

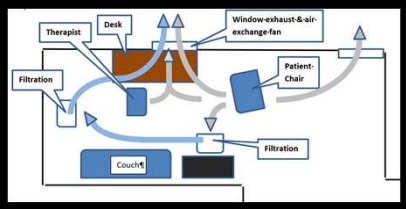

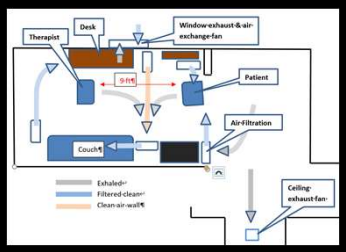

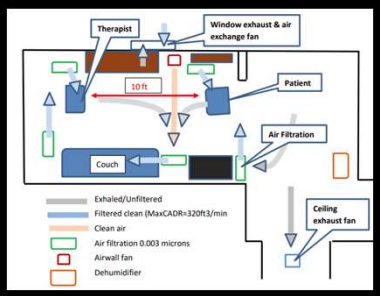

Many design possibilities

These were all tested

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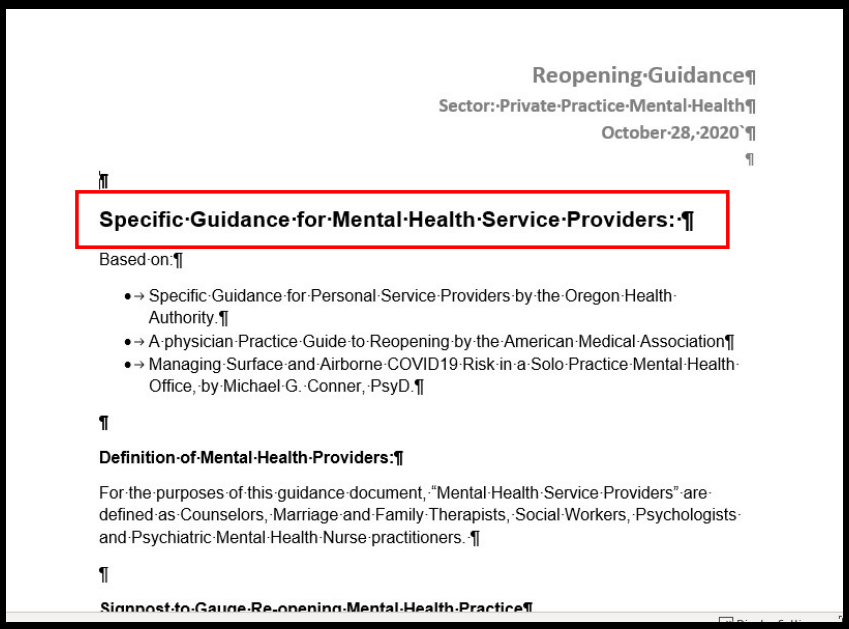

Reopening·Guidance¶
Sector:·Private·Practice·Mental·Health¶
October·28,·2020`¶
¶

Specific·Guidance·for·Mental·Health·Service·Providers:·¶

Based·on:¶

- → Specific·Guidance·for·Personal·Service·Providers·by·the·Oregon·Health·Authority.¶
- → A·physician·Practice·Guide·to·Reopening·by·the·American·Medical·Association¶
- → Managing·Surface·and·Airborne·COVID19·Risk·in·a·Solo·Practice·Mental·Health·Office,·by·Michael·G.·Conner,·PsyD.¶

¶

Definition·of·Mental·Health·Providers:¶

For·the·purposes·of·this·guidance·document,·"Mental·Health·Service·Providers"·are·defined·as·Counselors,·Marriage·and·Family·Therapists,·Social·Workers,·Psychologists·and·Psychiatric·Mental·Health·Nurse·practitioners.·¶

¶

Signpost·to·Gauge·Re-opening·Mental·Health·Practice¶

Specific Office Guidance

Available for download: www.OregonTherapyForum.com

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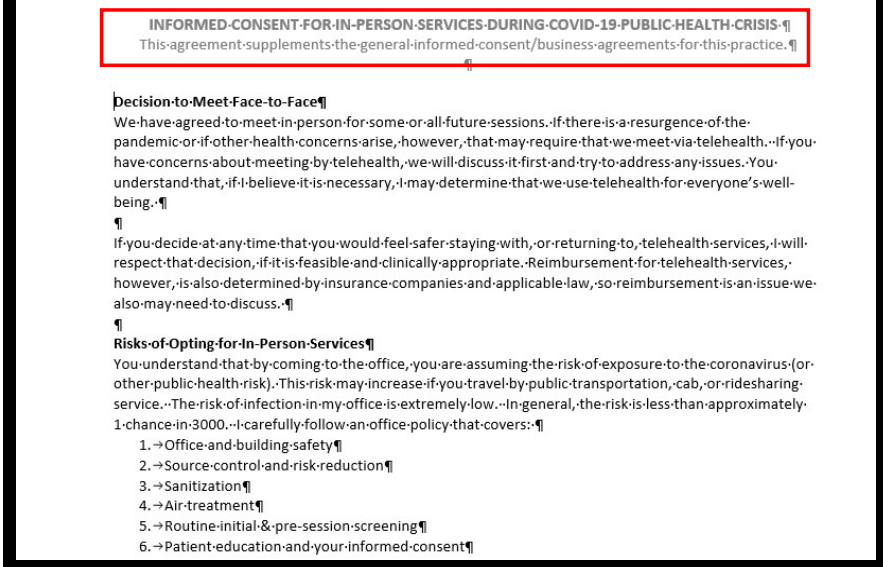

INFORMED·CONSENT·FOR·IN-PERSON·SERVICES·DURING·COVID-19·PUBLIC·HEALTH·CRISIS·¶
This·agreement·supplements·the·general·informed·consent/business·agreements·for·this·practice.¶
¶

Decision·to·Meet·Face-to-Face¶

We·have·agreed·to·meet·in·person·for·some·or·all·future·sessions.·If·there·is·a·resurgence·of·the·pandemic·or·if·other·health·concerns·arise,·however,·that·may·require·that·we·meet·via·telehealth.··If·you·have·concerns·about·meeting·by·telehealth,·we·will·discuss·it·first·and·try·to·address·any·issues.·You·understand·that,·if·I·believe·it·is·necessary,·I·may·determine·that·we·use·telehealth·for·everyone's·well-being.·¶

¶

If·you·decide·at·any·time·that·you·would·feel·safer·staying·with,·or·returning·to,·telehealth·services,·I·will·respect·that·decision,·if·it·is·feasible·and·clinically·appropriate.·Reimbursement·for·telehealth·services,·however,·is·also·determined·by·insurance·companies·and·applicable·law,·so·reimbursement·is·an·issue·we·also·may·need·to·discuss.·¶

¶

Risks·of·Opting·for·In-Person·Services¶

You·understand·that·by·coming·to·the·office,·you·are·assuming·the·risk·of·exposure·to·the·coronavirus·(or·other·public·health·risk).·This·risk·may·increase·if·you·travel·by·public·transportation,·cab,·or·ridesharing·service.··The·risk·of·infection·in·my·office·is·extremely·low.··In·general,·the·risk·is·less·than·approximately·1·chance·in·3000.··I·carefully·follow·an·office·policy·that·covers:·¶

1. →Office·and·building·safety¶
2. →Source·control·and·risk·reduction¶
3. →Sanitization¶
4. →Air·treatment¶
5. →Routine·initial·&·pre-session·screening¶
6. →Patient·education·and·your·informed·consent¶

Informed Consent for In-Person Psychotherapy

Available at: www.OregonTherapyForum.com

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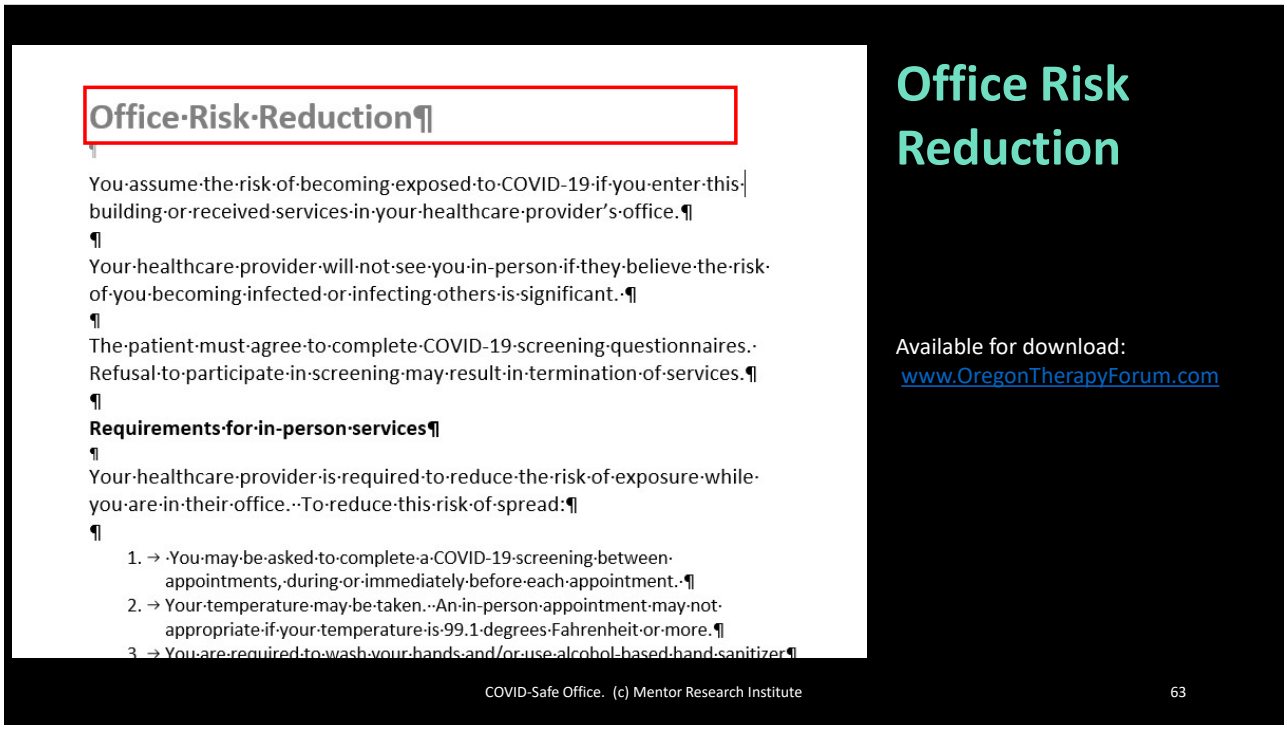
Office·Risk·Reduction¶
¶
You·assume·the·risk·of·becoming·exposed·to·COVID-19·if·you·enter·this·building·or·received·services·in·your·healthcare·provider's·office.¶
¶
Your·healthcare·provider·will·not·see·you·in-person·if·they·believe·the·risk·of·you·becoming·infected·or·infecting·others·is·significant.·¶
¶
The·patient·must·agree·to·complete·COVID-19·screening·questionnaires.·Refusal·to·participate·in·screening·may·result·in·termination·of·services.¶
¶
Requirements·for·in-person·services¶
¶
Your·healthcare·provider·is·required·to·reduce·the·risk·of·exposure·while·you·are·in·their·office.··To·reduce·this·risk·of·spread:¶
¶
1. → ·You·may·be·asked·to·complete·a·COVID-19·screening·between·appointments,·during·or·immediately·before·each·appointment.·¶
2. → Your·temperature·may·be·taken.··An·in-person·appointment·may·not·appropriate·if·your·temperature·is·99.1·degrees·Fahrenheit·or·more.¶
3. → You·are·required·to·wash·your·hands·and/or·use·alcohol-based·hand·sanitizer¶
Office Risk Reduction
Available for download:
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COVID-Safe Office. (c) Mentor Research Institute
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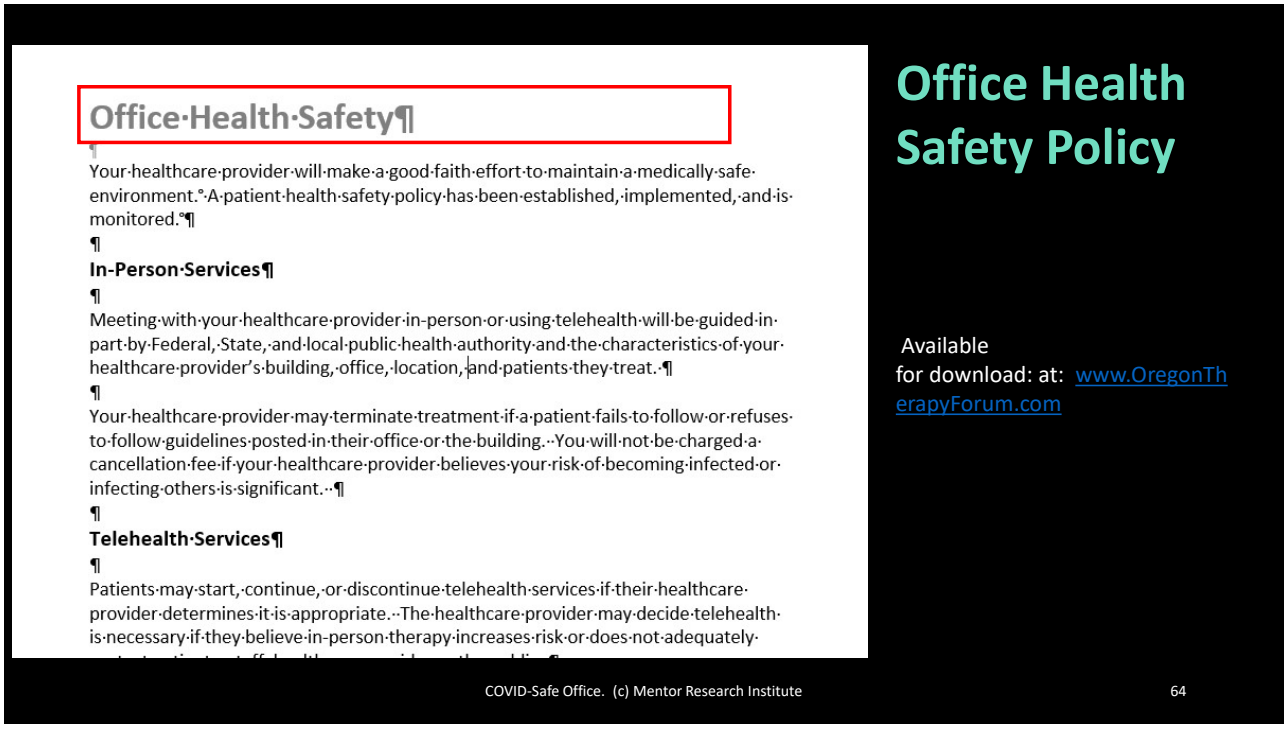
Office·Health·Safety¶
¶
Your·healthcare·provider·will·make·a·good·faith·effort·to·maintain·a·medically·safe·environment.°·A·patient·health·safety·policy·has·been·established,·implemented,·and·is·monitored.°¶
¶
In-Person·Services¶
¶
Meeting·with·your·healthcare·provider·in-person·or·using·telehealth·will·be·guided·in·part·by·Federal,·State,·and·local·public·health·authority·and·the·characteristics·of·your·healthcare·provider's·building,·office,·location,·and·patients·they·treat.·¶
¶
Your·healthcare·provider·may·terminate·treatment·if·a·patient·fails·to·follow·or·refuses·to·follow·guidelines·posted·in·their·office·or·the·building.··You·will·not·be·charged·a·cancellation·fee·if·your·healthcare·provider·believes·your·risk·of·becoming·infected·or·infecting·others·is·significant.··¶
¶
Telehealth·Services¶
¶
Patients·may·start,·continue,·or·discontinue·telehealth·services·if·their·healthcare·provider·determines·it·is·appropriate.··The·healthcare·provider·may·decide·telehealth·is·necessary·if·they·believe·in-person·therapy·increases·risk·or·does·not·adequately·
Office Health Safety Policy
Available for download: at: www.OregonTherapyForum.com
COVID-Safe Office. (c) Mentor Research Institute
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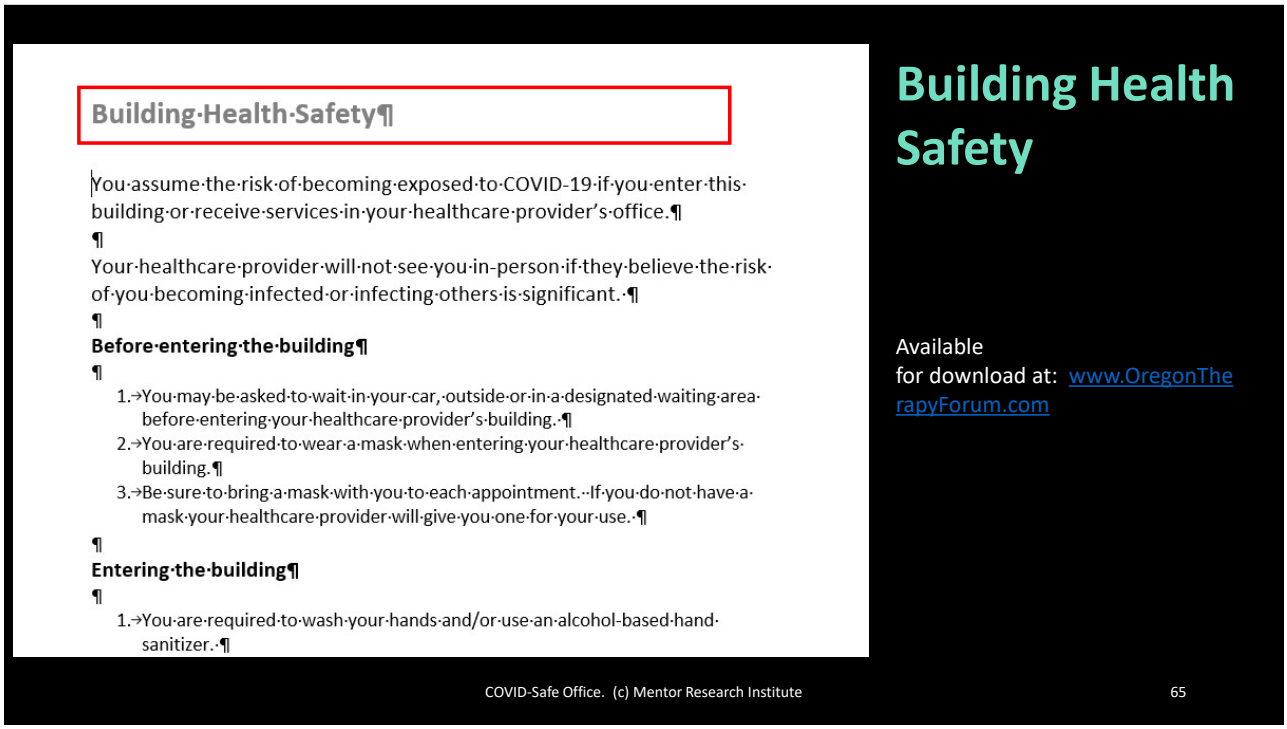
Building Health Safety
Building·Health·Safety¶
You·assume·the·risk·of·becoming·exposed·to·COVID-19·if·you·enter·this·building·or·receive·services·in·your·healthcare·provider's·office.¶
¶
Your·healthcare·provider·will·not·see·you·in-person·if·they·believe·the·risk·of·you·becoming·infected·or·infecting·others·is·significant.·¶
¶
Before·entering·the·building¶
¶
1.→You·may·be·asked·to·wait·in·your·car,·outside·or·in·a·designated·waiting·area·before·entering·your·healthcare·provider's·building.·¶
2.→You·are·required·to·wear·a·mask·when·entering·your·healthcare·provider's·building.¶
3.→Be·sure·to·bring·a·mask·with·you·to·each·appointment.··If·you·do·not·have·a·mask·your·healthcare·provider·will·give·you·one·for·your·use.·¶
¶
Entering·the·building¶
¶
1.→You·are·required·to·wash·your·hands·and/or·use·an·alcohol-based·hand·sanitizer.·¶
Available
for download at: www.OregonTherapyForum.com
COVID-Safe Office. (c) Mentor Research Institute
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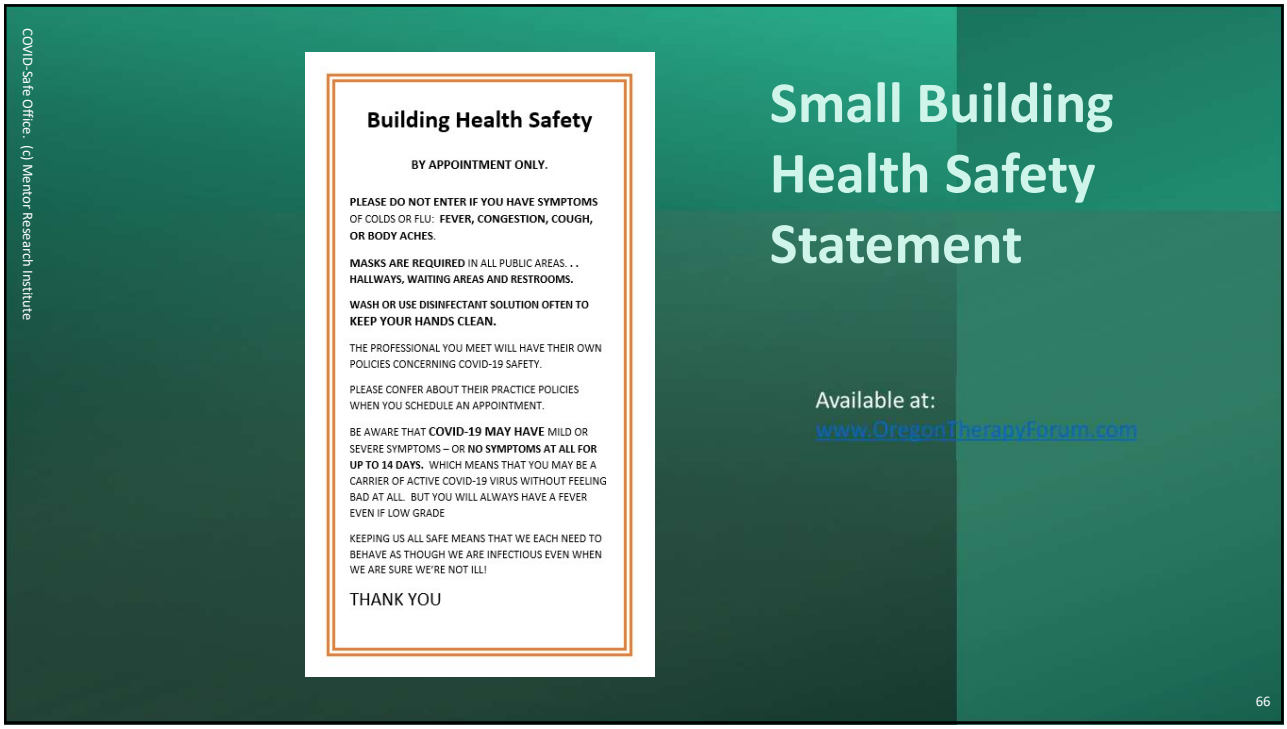
COVID-Safe Office. (c) Mentor Research Institute
Building Health Safety
BY APPOINTMENT ONLY.
PLEASE DO NOT ENTER IF YOU HAVE SYMPTOMS OF COLDS OR FLU: FEVER, CONGESTION, COUGH, OR BODY ACHES.
MASKS ARE REQUIRED IN ALL PUBLIC AREAS. . . HALLWAYS, WAITING AREAS AND RESTROOMS.
WASH OR USE DISINFECTANT SOLUTION OFTEN TO KEEP YOUR HANDS CLEAN.
THE PROFESSIONAL YOU MEET WILL HAVE THEIR OWN POLICIES CONCERNING COVID-19 SAFETY.
PLEASE CONFER ABOUT THEIR PRACTICE POLICIES WHEN YOU SCHEDULE AN APPOINTMENT.
BE AWARE THAT COVID-19 MAY HAVE MILD OR SEVERE SYMPTOMS – OR NO SYMPTOMS AT ALL FOR UP TO 14 DAYS. WHICH MEANS THAT YOU MAY BE A CARRIER OF ACTIVE COVID-19 VIRUS WITHOUT FEELING BAD AT ALL. BUT YOU WILL ALWAYS HAVE A FEVER EVEN IF LOW GRADE
KEEPING US ALL SAFE MEANS THAT WE EACH NEED TO BEHAVE AS THOUGH WE ARE INFECTIOUS EVEN WHEN WE ARE SURE WE'RE NOT ILL!
THANK YOU
Small Building Health Safety Statement
Available at:
www.OregonTherapyForum.com
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COVID-Safe Office. (c) Mentor Research Institute

How do you Determine the Risk of Aerosolized SARS-CoV-2 Infection?

2 Different Models (same results)

1. Viral load (viruses/ml of air exhaled)
2. Quanta (statistical unit of infectivity)

Level of Certainty (recommended)

1. Safety factor = 2
2. Order of magnitude = 1 decimal point

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Is walking and talking safer than sitting in your office?

Estimation of airborne viral emission: Quanta emission rate of SARS-CoV-2 for infection risk assessment

G. Buonanno[a,b,*], L. Stabile[a], L. Morawska[b]

[a] Department of Civil and Mechanical Engineering, University of Cassino and Southern Lazio, Cassino, FR, Italy
[b] International Laboratory for Air Quality and Health, Queensland University of Technology, Brisbane, Qld, Australia

The results showed that high quanta emission rates (> 100 quanta h−1) can be reached by an asymptomatic infectious SARS-CoV-2 subject performing vocalization during light activities (i.e. walking slowly) whereas a symptomatic SARS-CoV-2 subject in resting conditions mostly has a low quanta emission rate (< 1 quanta h−1).

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What do "Risk of Infection" terms mean?

Very High?
High?
Moderate?
Low?

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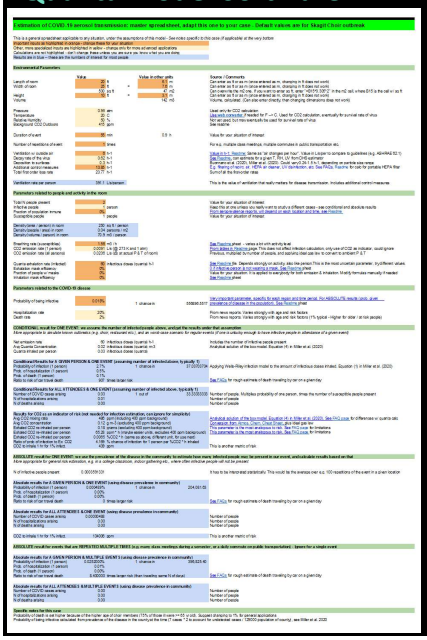
Engineers can give you the odds that you will become infected they…

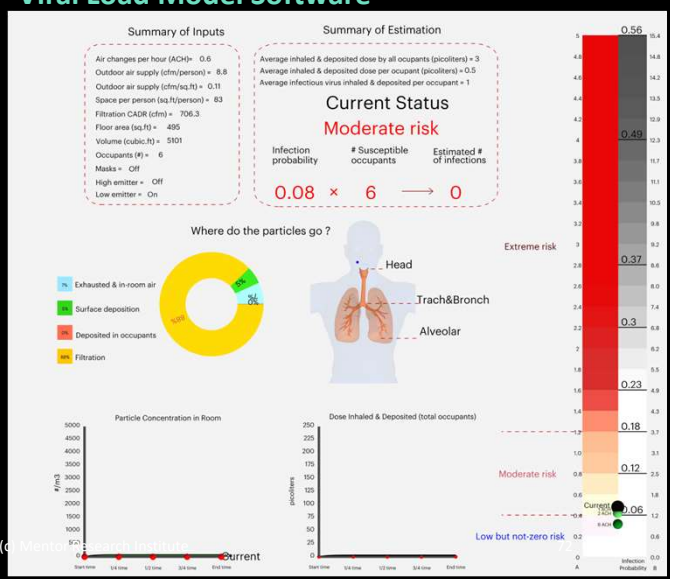
1. ….use mathematical models based on the science of fluid dynamics and airborne infection transmission. (Air is a fluid)
2. Created software based on comprehensive models that simulate and test limits.
3. Found that different models (quanta vs viral load) generated the same numerical estimates of transmission risk.
4. Discovered that using machines to capture live virus and measure infection risk killed SARS-CoV-2. (This theoretically may have increased the effectiveness of air filtration)
5. The virus transmission risk estimators are excellent tools to assess relative risk based on local and setting parameters.
6. With such data you can establish a safety factor (or make decisions based on order of magnitude).

Estimation Methods for SARS-CoV-2 Aerosol Transmission Risk

Quanta Model Software



Viral Load Model Software



The healthcare professions that provide psychotherapy have not endorsed an engineered standard for air treatment.

A national standard will not be developed or approved without a GREAT deal of effort and financial investment.

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Do vaccines prevent asymptomatic infection?

Vaccinations may reduce asymptomatic infection 35% to 80%.

Some people who receive only 1 of 2 required vaccinations may have no protection against asymptomatic infection.

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No Mask: What are your chances?

1. Prevalence (%) = < 3% or .03 (actually < 0.018%, or 0.00018)
2. Asymptomatic (%) = 40% or 0.4
3. Screening false positive (%) = 80% or 0.8
4. Aerosol infection risk (%) = < 3.0% or 0.03 **[1] (actually 2.7%, or 0.027)
5. Vaccinated (to keep you out of the hospital) (%) = 95% or 0.05

Chance of getting infected = [.03 + (0.4 x 0.03)]x 0.2 x 0.03
= 0.000252 or 1 chance in 3967

Chance of long COVID = 0.000252 x 0.5 = 0.000126
= 0.000126 or 1 chance in 7936

Chance of hospitalization = 0.05 x 0.000252 = 0.000063
= 0.0000063 or 1 chance in 158,730

**[1] Using the University Colorado Boulder Aerosolized COVID-19 Risk Estimator: 2 people, 1 infected, 55-minute appointment, 5000ft3 office, 9 feet apart, 800ft3/min CADR, 0.003μ, comprehensive screening, 1 hour between in-person appointments, sanitization of fomites between appointment, safety factor 3.

75

Here are 4000 gumballs.

What is the chance of picking the one gumball that has no gum in it?

76

Based on the CDC.

- The odds of being struck by a car when driving in **the United States** is about 1 in 4,292.
- The odds of dying as the result of being struck by a car are about 1 in 47,273.

https://www.cdc.gov/transportationsafety/pedestrian_safety/index.html

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Potential Arguments to NOT See Patients In-person

1. My office is too small.
2. My office design does not allow safe distances.
3. Ventilation is not adequate or possible.
4. Air exchange is not adequate or possible.
5. The building has a retrofitted HVAC with shared office air.
6. Office HVAC MERV 13 air filtration is not adequate or possible.
7. Standalone air filtration is not adequate.
8. Psychotherapist is immunosuppressed.
9. Too many patients are immunosuppressed.
10. Community adjusted prevalence is > 3% (1 chance in 33)
11. There is a new variant of SARS-CoV-2 (e.g., variant P.1 or B.1) is in my community

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For your consideration:

Maintaining a COVID-Safe Practice

With regard to meeting with patients in-person MRI offers comprehensive recommendations and cautions that pandemic risks require continuous thoughtful attention.

www.MentorResearchInstitute.com

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