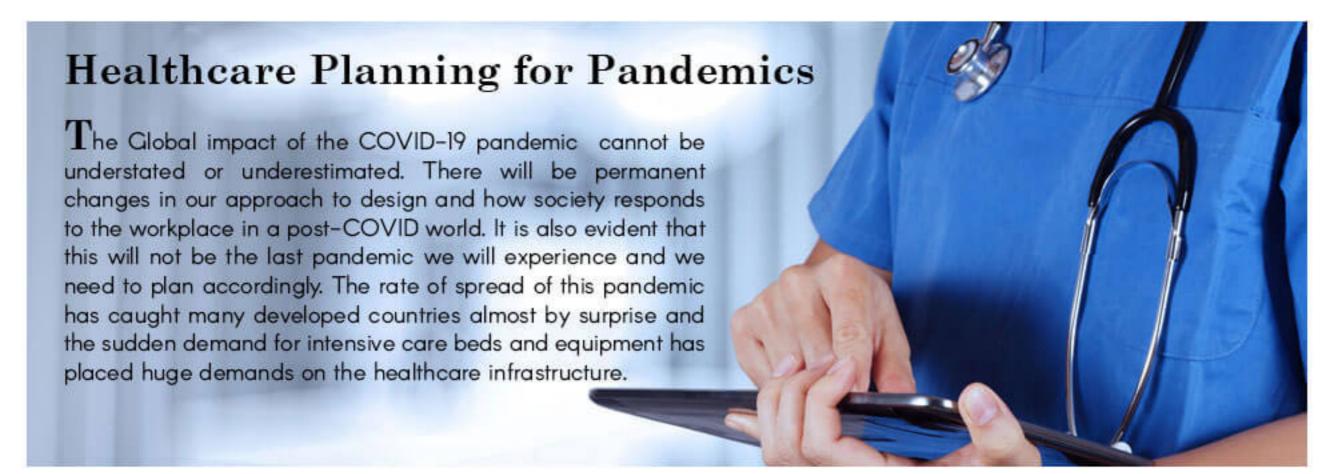


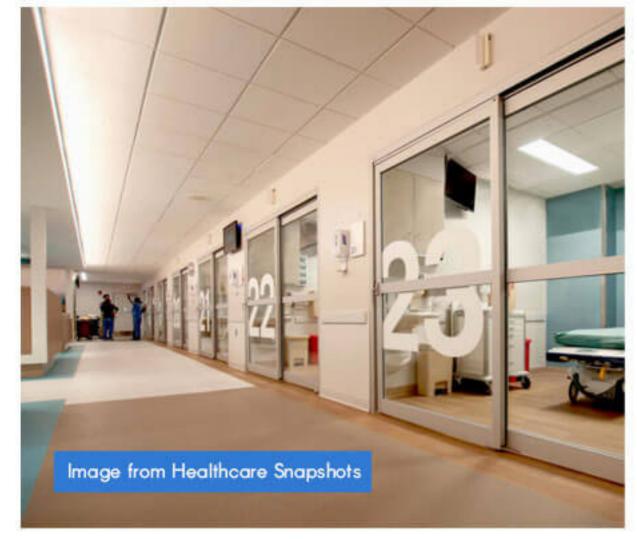
Greetings Everyone!

In this month's e-news, we are pleased to feature an article on the impact of the current "COVID-19" pandemic on the architectural profession and the design of medical facilities, written by our very own Anton Alers, Principal of VERITAS Architects Australia.

Other initiatives undertaken by VERITAS in response to the pandemic will also be featured.

We hope you enjoy this month's VERITAS e-news! And please don't hesitate to contact us if you would like to know more about any of the stories featured here.







I lexibility and capacity are key factors in healthcare design for pandemics. Hospital wards need to be able to be flipped into isolation units and their air-conditioning systems able to be activated to provide negative pressure operation for these wards to prevent cross-infection. There is a capital cost in providing this additional capability in mechanical ventilation systems, but this cost is less than over-providing permanent intensive care beds when there is not such peak demand.

Pop-up hospitals have emerged as an alternative to providing additional beds during this crisis. Tents and portable prefabricated modular units based on tried and proven mobile military hospital models have proven effective but these not ideal solutions for both healthcare professionals and patients. Adaptation of large existing spaces is another option to rapidly create additional bed capacity. Apart from installing partitioning and medical services into these spaces, there is an opportunity to produce modular ICU and ward rooms, complete with ensuites for installation into warehouses, conference centres and even indoor sports stadiums. Such modular systems can also be deployed to provide accommodation in situations of natural disaster, as well as housing the homeless – which is likely to present itself as a real consequence of the economic impacts of a COVID-19 driven economic recession.

Medical professionals and support staff are a critical front line defence in pandemics, and should not be unreasonably exposed to the risk of working in this environment. Increased attention is required to protect these essential personnel in such times. Dedicated circulation routes and zones separating infectious patients from the rest of the healthcare facility are required to reduce the risk of cross contamination.