## **Indoor air quality and pandemic emergencies**

New air filtration systems for pandemic risk reduction



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## **Working Group**

Rhoss S.p.A Politecnico di Torino – TEBE @ IEEM Group

## **1. Introduction**

## **Covid-19 pandemic**

The COVID-19 pandemic put HVAC systems to the test, highlighting the shortcomings of existing air treatment technologies and system management.

## **Pros and cons of the pandemic.**

**Increased attention on occupants' health conditions in buildings** **It showed the ineffectiveness of HVAC systems to meet this challenge**

## **Starting conditions.**

Under **normal conditions** , HVAC systems are operated to ensure **adequate indoor conditions while minimising the energy and environmental impacts of buildings**.

Under **emergency conditions**, the focus was entirely on ensuring adequate indoor conditions so as **not** to **compromise the health of the occupants**.

## **Recommendations during the pandemic**

During the pandemic, several **recommendations were defined for the management of air systems** to limit the spread of the SARS-CoV-2 virus (and its variants) and to ensure the maintenance of good air quality in confined spaces.

## **Actions**

## **Air handling unit (AHUs) operation entailed:**

- **Almost continuous operation of the system** (up to 24 hours a day);
- **Elimination of the recirculation function of the return air** (to avoid the transport of chemical/biological agents);
- **Deactivation of heat recovery units** (to avoid contamination between return air and outdoor air flows).



## **Improved indoor air quality**



**Higher energy consumption**

## **Objectives of design**

With the aim of gradually returning HVAC systems to normal operation, the design of AHU configurations will depend on innovative solutions and technologies, the adoption of which can return systems management to standard operations, ensuring a good compromise between **energy consumption, indoor air quality and occupant health**.

## **Actions**

**To reduce energy costs related to air handling system management, it is necessary:**

- To re-introduce return air recirculation;
- To re-introduce the use of heat recovery units;
- Adopt **innovative technological solutions** to reduce the transport of chemical/biological agents in the return air.



**Improved indoor air quality**



**Lower energy consumption**

## **How to evaluate investment projects in the energy sector?**





## **Critical issues of classrooms**

Schools are recognised as critical points for the transmission of the SARS-CoV-2 virus. The elements that make classrooms particularly **critical** for risks of direct contagion are:

- The high **density** of people;
- The seating **arrangement** inside the classrooms;
- The prolonged **amount of time spent indoors** (required by the lessons).



**Dynamics of contamination in the presence of an infectious subject without ventilation**



**Dynamics of contamination in the presence of an infectious subject with ventilation**

#### **CO2 rate on a school day**

(Reference standards for air quality EN 13 779)



## **2. Research project**

## **Objective of the research**

The research aims to compare different configurations of AHUs, taking into account management differences in the **pre-COVID**, **COVID** and **post-COVID** phases.

#### **Post-COVID configuration**

In post-COVID configurations, the analysis compares the use of two filter systems: absolute filter H13 and Photocatalytic filter on the return.

## **Application case: school building**



## **Photocatalytic filter: how it works**

Most of the technologies used to kill viruses and bacteria use photocatalysts based on titanium dioxide (TiO2), a substance that needs to be exposed to UV light to be activated.

The development of a **new photocatalyst based on tungsten trioxide (WO3)** has increased the effectiveness of photocatalysis and eliminated the problem of UV light being activated by LED lamps.



## **Analysis scenarios**

#### **Pre-Covid situation**

## **1. System with recirculation**

with functioning heat recovery unit

**1.** Pre-filter on outdoor air

**2.** Pre-filter on return

**3.** F7 STANDARD filter

#### **Covid situation**

**2. All-outdoor air system**  with heat recovery unit NOT working

**1.** Pre-filter on outdoor air

**2.** Pre-filter on return

**3. F7 STANDARD filter**

#### **Post-Covid situation**

#### **3. System with recirculation**

with functioning heat recovery unit

**1.** Pre-filter on outdoor air

- **2.** Pre-filter on return
- **3.** AIR'SUITE F7 filter
- **4.** Photocatalytic filter

### **4. System with recirculation**

with functioning heat recovery unit

**1.** Pre-filter on outdoor air **2.** Pre-filter on return

- **3.** AIR'SUITE F7 filter
- **4.** ABSOLUTE Filter

## **Pre-COVID situation**

Recirculation system with working heat recovery unit.





- **1** PRE-FILTER on outdoor air
	- **2** PRE-FILTER on return
- **3** STANDARD F7 FILTER
- **m**<br>**n** Room air flow rate
- **m** Outdoor air flow rate
- **m**<sub>cs</sub> Expelled air flow rate
- **m** Recirculation air flow rate

## **COVID situation**

All-outdoor air system with non-functioning heat recovery unit.





## **Post-COVID situation (1)**

Recirculation system with working heat recovery unit with Ponente 1000 filter.





## **Post-COVID situation (2)**

Recirculation system with working heat recovery unit with Absolute H13 filter.







## **Cost-Benefit Analysis**

Incremental Analysis

$$
\triangle BCR = \frac{\sum_{i} B(i)_{\text{postCovid}} - \sum_{i} B(i)_{\text{preCovid}}}{\sum_{i} C(i)_{\text{postCovid}} - \sum_{i} C(i)_{\text{preCovid}}}
$$

$$
B(i)_{\text{postCovid/ PreCovid}} = \text{Benefits}
$$

$$
C(i)_{\text{postCovid/ PreCovid}} = \text{Costs}
$$

∆**BCR > 1** PostCovid Benefits > PreCovid Benefits

## **Evaluation of costs**



**Running costs**

**MESTMENT** 

**Costs of investment**



**Maintenance costs**



**Costs of disposal**

## **Assessment of benefits: Health**

The **Cost Of Illness** method makes it possible to assess the **BENEFITS** of the filter as **AVOIDED COSTS**: direct costs and indirect costs (via **Human Capital Approach**).



#### **Indirect Costs =**

**Unused educational resource costs**



#### **Lost school days**

Share of educational service that remains an unused resource. It is monetised through the average annual per capita income from employment in the public administration

## **COVID-19: Clinical manifestation**

### **Common symptoms**

Fever, dry cough, fatigue.

## **Rare symptoms In serious cases**



## **COVID-19: Clinical manifestation**

Symptoms vary according to the severity of the disease:

## **1.**

## **No symptoms**

(asymptomatic);

#### **2.**

#### **Flu-like symptoms**

Such as fever (in more than 90% of cases), dry cough (more than 80% of cases), tiredness, shortness of breath (about 20% of cases) and difficulty breathing (about 15% of cases);

## **3.**

#### **Serious symptoms**

The most severe cases of infection can cause pneumonia, acute renal failure, and even death. Patients also present with leucopenia (white blood cell deficiency) and lymphocytopenia (lymphocyte deficiency).

#### **Asymptomatic infection**

Individuals who test positive in the virological test for SARS-CoV-2, but do not have symptoms compatible with COVID-19.

#### **Mild illness**

**Home management**

Individuals who have one of the various symptoms of COVID-19 (fever, cough, headache, ...) but do not have shortness of breath, dyspnoea or abnormal chest images. They can be managed in an outpatient setting or at home. No imaging or specific laboratory evaluations.

#### **Moderate illness**

Individuals showing evidence of lower respiratory disease during clinical assessment and having oxygen saturation (SpO2 > 94%). As lung disease can progress rapidly, patients with moderate disease must be monitored.

#### **Hospitalisation**

#### **Severe/serious illness**

Individuals who have SpO2 = 30 breaths/min. These patients may undergo rapid clinical deterioration. Oxygen therapy must be administered immediately.

**Hospitalisation (ICU)**

#### **Critical illness**

Individuals with respiratory failure, septic shock and multiple organ dysfunctions. These patients need treatment in an intensive care unit (ICU).

# **3. Summing up...**





## **Assessment of benefits: Performance**

The performance of students in classrooms is influenced by the **concentration** of<sub>co2</sub> (used as an **indicator of air quality**) in the room, with the same air flow rate from the different configurations considered.

The $_{\rm{co2}}$  concentration in the environment varies (decreases) due to different filter technologies with different abatement capacities.



## **Comparison with Pre-Covid configuration**

## **Post-Covid (1) vs. Pre-Covid**

(Photocatalytic filter + Air'Suite vs. market filter F7)



## **Post-Covid (2) vs. Pre-Covid**

(Absolute filter H13 + Air'Suite vs. market filter F7)



## **Comparison with Covid configuration**

## **Post-Covid (1) vs. Covid**

(Photocatalytic filter + Air'Suite vs. market filter F7)



The analysis underlines the unsustainability of energyintensive HVAC system countermeasures undertaken during the pandemic emergency and supports the need to identify solutions able to provide healthy indoor spaces, whilst reducing the air handling energy impact.



## **New air for the future.**

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