

# On reimagining our post-COVID world

“Only a life lived for others is a life worthwhile.” – Albert Einstein, Nobel Laureate in Physics, 1921, quoted in *The New York Times*, June 20, 1932. Einstein archives 29-041

Sureka *et al.*<sup>[1]</sup> modelled a suraksha chakra (safety circle) by designing a new scoring system to protect healthcare workers from COVID. They published the scoring system in the April 2021 issue of the *Journal* and assessed implementation of the protocol in regular and surprise rounds. What its approach is, is that by constantly nudging our fellow workers, we can motivate them to follow the best practices and hence, in the process, can protect ourselves and those around us.

Nevertheless, what we infer by observing [Figures 1 and 2] is that members of the committee have been briefing each other through PowerPoint presentations. While this presentation has its own limitations and challenges,<sup>[2]</sup> since middle of 2020 various scientists have been underscoring the risk of airborne transmission of SARS-CoV-2 and the resulting higher risk of striking those assembling in enclosed spaces.<sup>[3]</sup> Thus, we need to make every possible attempt to avoid sharing a common physical environment while the novel Coronavirus 2019 lurks in the air in search of a potential host.

While communicating with each other is the need of the hour, in our world, since arrival of the novel Coronavirus, we need to constantly invent or redesign or restructure our surroundings so as not to provide favorable conditions for this virus to spread unabatedly. When we share air in a hall, we would remember that the air we breathe is communal. Since asymptomatic transmission accounts for somewhere from one-third to 59% of all transmissions globally, all of us, especially healthcare workers, should observe all of the COVID-appropriate behaviors at all the times.

As evidence is now emerging that enhancing ventilation in buildings secures the health of its occupants, we should make appropriate changes in building designs where scores of occupants constantly breathe common air. Therefore, oral presentation with distribution of pamphlets, or similar or novel methods of information dissemination are needs

of the hour in open spaces where currents of outdoor air dissipate the concentration of virus-laden particles in ambient air, subsequently diminishing the possibility of exposure to its occupants.

Second, the investigators assess members of its team regarding observation of hand hygiene under a heading ‘H’. Here, we need to inform our fellow workers that practicing this habit not only saves patients from SARS-CoV-2 infection but also from several other diseases,<sup>[4]</sup> some of which are potentially lethal.<sup>[5]</sup> So while incidence of fomite-borne transmission can be significantly decreased by frequently washing our hands, it has to be inculcated in our minds that hospital-acquired infections constitute an avoidable burden on our health care system. Several ardent supporters of this practice have shared their experiences, and one common theme among them is that having availability of running water at an accessible distance is a prerequisite to observing this sanitary ritual. Such basic points need to be taken into consideration when designing hospital wards, catering not only to COVID patients but also to non-COVID patients.

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