		Category	otal Number of Intries	1. Efficacy Testing	2. T _{rained} Workforce	3. IAQ/ Public Health	. Standards 2 Guidelines	5. Regulatory Guidance	S. Proven Safety	. Proven erformmance	8. Education Dutreach	'. Labeling Tod Info	10. New Tech. Research	11. Cost	Far UV	'. Installation mmissioning	. Collaboration
Panels WH-OSTP	lide # 2 I-1	Develop standard efficacy testing methods for air treatment technologies that promote	22 12	1. 7e	~ 3	r: 4	4°, 68,	5.0	s. Sa	V. 4	«Ö	6 4	70 Be	TT	12	57 33	14
WIFOSTF	2 1-1	appropriate labeling and informed use and enable high-quality, standardized, innovative products to come to market in a trusted manner.		\checkmark								\checkmark					
WH-OSTP	2 1-2	Conduct multidisciplinary epidemiological and implementation research on built environment technologies for reducing disease spread like GUV.				\checkmark							\checkmark				
WH-OSTP	2 1-3	Establish indoor air quality and built environment interventions like GUV as routine and significant parts of public health and epidemiological strategy				\checkmark				\checkmark							
WH-OSTP	3 G-1	Expand and train workforce for installation and maintenance of GUV installations			\checkmark												
WH-OSTP	3 G-2	Develop more affordable form factors and fixtures for GUV including LED lights											\checkmark	\checkmark			
WH-OSTP	3 G-3	Support innovation in building and infrastructure design, indoor air quality monitors, pathogen sensors, advanced materials, and air disinfection technologies to foster healthy, safe and secure working, learning, and living environments for all				\checkmark							\checkmark				
WH-OSTP PNNL	Total Entries = 5 I-1			1	1	3	0	0	0	1	0	1	3	1	0	0	0
PNNL	5 1-2	Field evaluations/demonstrations to show technology is safe and effective Guidelines + educated workforce to design, install, operate, maintain GUV systems in buildings			,		,		\checkmark	\checkmark	\checkmark						
PNNL	5 1-3	Validate and/or document safety of far-UV direct irradiation before deployment			\checkmark		\checkmark		/						/		
PNNL	6 G-1	Ensure safety of technology in occupiable spaces				<u> </u>									V		
PNNL	6 G-2	Educated workforce to design, install, operate, and maintain			\checkmark	v			v							\checkmark	
PNNL	6 G-3	Clear guidelines/standards of most effective and efficient combinations of risk mitigation strategies (GUV, ventilation, room air cleaners, etc.) for IAQ and reduced disease transmission				\checkmark	\checkmark										
PNNL FDA	Total Entries = 8 I-1	6 Alignment on what are considered medical claims		0	2	2 √	2	0	3	1	1	0	0	0	1	1	0
FDA	8 1-2	Addressing ongoing pandemic concerns				\checkmark											
FDA	9 G-1	Continue to collaborate with the agency to bring safe and effective products to the market		\checkmark		-			\checkmark	\checkmark							\checkmark
FDA	Total Entries =			1	0	2	0	0	1	1	0	0	0	0	0	0	1
CDC/NIOSH	11 -1	Continuing to understand the role UV technologies can play throughout local, state, and federal government agencies									\checkmark						\checkmark
CDC/NIOSH	11 -2	Decoupling UV air treatment from UV surface disinfection					\checkmark				\checkmark						
CDC/NIOSH	11 -3	Improving guidance for design, installation, commissioning, operation and periodic performance validation		\checkmark			\checkmark									\checkmark	
CDC/NIOSH	11 I-4	Documenting successful in-duct UV air treatment case studies				\checkmark				\checkmark							
CDC/NIOSH	12 G-1	Increase knowledge about the benefits/limitations of far UV									\checkmark				\checkmark		
CDC/NIOSH	12 G-2	Enhance design, installation and operation guidance			\checkmark		\checkmark									\checkmark	
CDC/NIOSH	12 G-2.1	Focus on end-users and decision makers									\checkmark						
CDC/NIOSH	12 G-2.2	Cover all accepted/proven UV technologies					\checkmark	\checkmark			\checkmark						\checkmark
CDC/NIOSH	12 G-2.3	Establish proven, user-friendly performance verification protocols		\checkmark			\checkmark	\checkmark								\checkmark	
CDC/NIOSH	12 G-2.4	Provide credentialing for system designers/installers			\checkmark											\checkmark	
CDC/NIOSH	12 G-3	Take steps toward standard testing and regulation		\checkmark			\checkmark	\checkmark									
CDC/NIOSH NIST	Total Entries = 14 I-1	11 Consensus-based standards and test methods		3 √	2	1	6 √	3	0	1	5	0	0	0	1	4	2

										Categ	ories						
		Category	Total Numberof Entries	.1. Efficacy Testing	2. Trained Workforce	3. IAQ/ Public Health	4. Standards & Guidelines	5. Regulatory Guidance	6. Proven Safety	7. Proven Performman _{ce}	8. Education Outreach	9. Labeling Prod Info	10. New Tech, Research	11. Cost	12. Far UV	13. Installation Commissioning	1. Collaboration
Panels NIST	lide # 14 I-2	Consistent approaches to conformity assessment	2 4	, r	~ Z	ਅੰ ਦੱ	√ 4. 48	v; 0 √	S, O	V. 4	ø, O	o; €	ਮ ਕ	1	1	4 8	77
NIST	14 I-3	Stakeholder awareness		•			•	•			\checkmark	•					
NIST	15 G-1	Sound, widely-accepted standards and test methods for determining efficacy and safety		\checkmark			\checkmark		\checkmark	\checkmark							
NIST	15 G-2	Coordination among public and private sector stakeholders									\checkmark						\checkmark
NIST	15 G-3	Framework for how to leverage progress when addressing the next challenge				\checkmark	\checkmark	\checkmark			\checkmark						\checkmark
NIST	Total Entries =			3	0	1	4	2	1	1	3	1	0	0	0	0	2
OSHA	17 -1	Universal performance metric –under which conditions will GUV produce IAQ making fewer people sick		\checkmark		\checkmark	\checkmark			\checkmark							
OSHA	17 -2	Universal safety metric -UV dosing under which conditions is safe for workers				\checkmark	\checkmark		\checkmark								
OSHA	## 1-3	Development of measurement techniques for the 2 issues above		\checkmark		\checkmark	\checkmark	\checkmark									
OSHA	18 G-1	OSHA is actively partnering with academic and governmental groups to support the development of performance and measuring standards		\checkmark		\checkmark	\checkmark			\checkmark							\checkmark
OSHA	Total Entries =			3	0	4	4	1	1	2	0	0	0	0	0	0	1
EPA	27 -1	EPA faces many challenges in regulating devices because the current regulatory framework does not allow for pre-market review of product safety or efficacy claims and does not address the complexity of devices available on the market today.		\checkmark	Ū	·	·	\checkmark	-	-	\checkmark	Ū	Ū	Ū	Ū	Ū	-
EPA	27 1-2	Resource constraints limit the ability to undertake regulatory changes at this time.						./						./			
EPA	27 1-3	Device products with claims to control SARS-CoV-2 have continued to expand during the pandemic.		\checkmark				v					\checkmark	v			
EPA	28 1-4	Public health consequences for insufficiently regulated devices.				\checkmark			\checkmark	\checkmark							
EPA	28 1-4.1	Users may not use prudent disinfection processes if they believe they are protected by these technologies.				\checkmark			\checkmark		\checkmark						
EPA	28 1-4.2	Users may believe they do not have to follow public health guidance, such as handwashing, wearing masks, social distancing, etc.				\checkmark			\checkmark		\checkmark	\checkmark					
EPA	28 1.5	Some devices may cause harm:							\checkmark		\checkmark	\checkmark					
EPA	28 1.5.1	Some UV lights can causeburns of skin/eyes, skin cancer.							\checkmark		\checkmark	\checkmark					
EPA	28 1.5.2	Some UV light devices generate ozone which can exacerbate asthma and chronic obstructive pulmonary disease.							\checkmark		\checkmark	\checkmark					_
EPA	Total Entries =			2	0	3	0	2	6	1	6	4	1	1	0	0	0
Federal Panelists	# (Total = 45)		45 100%	13 28.9%	5 <i>11.1%</i>	16 <i>35.6%</i>	16 35.6%	8 17.8%	12 26.7%	8 17.8%	15 <i>33.3%</i>	6 <i>13.3%</i>	4 8.9%	2 4.4%	2 4.4%	5 <i>11.1%</i>	6 13.3%
P-1: Donsky	31 1.1	Candida auris		\checkmark		\checkmark				\checkmark							
P-1: Donsky	31 1.1.1	Environment is important				\checkmark	\checkmark				\checkmark						
P-1: Donsky	31 1.1.2	Manual cleaning suboptimal				\checkmark	\checkmark				\checkmark						
P-1: Donsky	31 1.1.3	UV-C effective		\checkmark		\checkmark				\checkmark							
P-1: Donsky	31 1.2	Why is UV not being used?				\checkmark	\checkmark	\checkmark			\checkmark						
P-1: Donsky	31 1.2.1	Cost				\checkmark					\checkmark			\checkmark			
P-1: Donsky	31 1.2.2	Ease of use				\checkmark					\checkmark			\checkmark			
P-1: Donsky	31 1.2.3	Evidence		\checkmark						\checkmark	\checkmark						
P-1: Donsky	31 1.2.4	CDC recommendations and practice guidelines				\checkmark	\checkmark	\checkmark			\checkmark						

		Categ	Total Numberof	untries - or 1. Efficiacy Testing	2. Trained Workforce	3. IAQ/ Public Health	4. Standards & Guidelines	5. Regulatony Guida <i>n</i> ce	6. P _{loven} Safety	7. Proven Performmance	8. Education Outreach	9. Labeling Prod Info	10. New Tech. Research	11. Cost	12. Faruv	. ^{Installation} mmissioning	. Collaboration
Panels P-1: Donsky	lide # 32 G.1	Do-it-yourself test protocol	Tota	Lutries 1. Effica Testing	2. T. War	3. IJ	4. % 2. 0.	5. R. Guić	6. p. Safe	7. p.	8. E.	9. Li Proc	AC.	11.	12.	13. Com	14.
P-1: Donsky	32 G.1.1	Commercial biological indicator spores		√ ∕		/	\checkmark	\checkmark		/	~						√ ∕
P-1: Donsky	32 G.1.2	Simple, standard exposure protocol		\checkmark		~	V		./	V	× ./						V
P-1: Donsky	32 G.1.3	Process in-house or send to commercial lab for testing		v V		v J	1	1	v	1	v						1
P-1: Donsky	32 G.2	Compare Devices		v V		v V	v V	۰ ا		v V							v
P-1: Donsky	3 G.3	Cost		√		·	•	•		√				\checkmark			•
P-1: Donsky	32 G.4	Evidence		\checkmark						\checkmark							
P-1: Donsky P-1: Mathew	Total Entries = 34 I.1	16 Infection prevention principles are the building blocks for safer healthcare delivery		10	0	12	8	5	1	8	10	0	0	3	0	0	4
P-1: Mathew	34 1.2	Challenges in resilient healthcare staffing and systems			,	\checkmark	\checkmark	\checkmark			\checkmark					/	
P-1: Mathew	34 1.3	Turnover of staff/ EVS: requires frequent training and monitoring/			V	V										V	,
P-1: Mathew	34 1.4	assessment of any drift in cleaning techniques Rise in antimicrobial resistance (AMR)/ novel pathogens		,	\checkmark	\checkmark	,			,			,			\checkmark	\checkmark
P-1: Mathew	34 1.5	Impact of climate change and spread of soil microbes with AMR (floods leading to soil erosio	ns-	\checkmark		√ ,	\checkmark			\checkmark			V				√ ,
P-1: Mathew	35 G.1	with exposures and impacting plants/animals and humans) Devices and tools that are automated (less prone to human errors/ drifts in human technique				\checkmark							\checkmark				\checkmark
			5)	\checkmark		\checkmark							\checkmark				\checkmark
P-1: Mathew	35 G.2	Need to tap into Al- gather data and provide real time feedback		\checkmark		\checkmark				\checkmark			\checkmark				\checkmark
P-1: Mathew	35 G.3	UV Devices that are safe in healthcare settings (both in acute care and in Long Term Acute Ca and Skilled Nursing facilities	re			\checkmark			\checkmark		\checkmark						\checkmark
P-1: Mathew	35 G.4	Devices for other industries : travel and hospitality (global utilization to decrease spread of AI through land transport/planes/ships)	ИR			\checkmark	\checkmark		\checkmark	\checkmark	\checkmark	\checkmark					\checkmark
P-1: Mathew	35 G.5	Devices for Community centers/places of worship/recreation/museums/music/opera (singing = airborne spread)				\checkmark	\checkmark		\checkmark	\checkmark	\checkmark	\checkmark					\checkmark
P-1: Mathew	35 G.6	Cost effective and access by communities currently faced with health inequities and limited access to healthcare		\checkmark		\checkmark	\checkmark				\checkmark			\checkmark			\checkmark
P-1: Mathew	Total Entries =			4	2	11	5	1	3	4	5	2	4	1	0	2	9
P-1: Blatchley	37 1.1	Lack of standards for design, validation/testing		\checkmark		\checkmark	\checkmark	\checkmark			\checkmark	\checkmark					\checkmark
P-1: Blatchley	37 1.1.1	Quantitative link between system characteristics and performance (risk-based approach)		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark			\checkmark
P-1: Blatchley	37 1.2	Optimization of UVC exposure		./		./	./	./	./	./	./	./	./				./
P-1: Blatchley	37 1.2.1	Disinfection vs. human exposure		\checkmark			` √	√	\checkmark	, V	\checkmark	√	√				\checkmark
P-1: Blatchley	37 1.3	Need for new, efficient UVC sources		\checkmark		\checkmark	\checkmark	\checkmark			\checkmark		\checkmark		\checkmark		\checkmark
P-1: Blatchley	37 1.3.1	Higher output power, wavelength selection		\checkmark					\checkmark	\checkmark			\checkmark		\checkmark		\checkmark
P-1: Blatchley	38 G.1	Develop standards for design, testing/validation		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark					\checkmark
P-1: Blatchley	38 G.2	Develop new, efficient UV sources		\checkmark		\checkmark							\checkmark	\checkmark			
P-1: Blatchley	38 G.3	Develop UV-based applications across scales		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark			\checkmark				\checkmark
P-1: Blatchley P-1: McPhaul	Total Entries = 40 1.1	9 Communication to the public about its effectiveness: Does it work?		9	0	* √	7 √	7 √	6 √	6 √	₅ √	₅ √	7	2	2	0	8 √

Danak	lide #	Category	^T otal Numberof Entries	1. Efficacy Testing	2. Trained Workforce	3. IAQ/ Public Health	4. Standards & Guidelin _{es}	5. Regulatory Guidance	6. Proven Safety	⁷ . Proven Performmance	8. Education Outreach	9. Labeling Prod Info	10. New Tech. Research	1. Cost	12. Far UV	13. Installation Commissioning	.4. Collaboration
Panels P-1: McPhaul	40 1.2	Communication about its safety: Is it safe? Even for children, older adults, the medically fragile and	H	4 1	14 -	··· 1	4 40	5, 0 /	/		0	5 4	7 4	ч	T	4 0	- /
P-1: McPhaul	40 1.3	those who are immune compromised? Who should I believe when considering GUV?				v	v	v	×,		,	,					v ,
		-				\checkmark	\checkmark	\checkmark	\checkmark		\checkmark	\checkmark					\checkmark
P-1: McPhaul	41 G.1	Scale up two-way processes for communicating with the public and medical community including their participation in evaluating GUV to achieve heathy indoor air and spaces		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark		\checkmark	\checkmark					\checkmark
P-1: McPhaul	41 G.2	Equity and Inclusion: Will everyone have access to GUV?				\checkmark					\checkmark			\checkmark			\checkmark
P-1: McPhaul	41 G.3	Environmental Sustainability – Can GUV help reduce carbon emissions and other negative impacts on the environment?		\checkmark		√	\checkmark	\checkmark	\checkmark	\checkmark	•		\checkmark	·			√
P-1: McPhaul	Total Entries =	6		2	0	6	5	5	5	2	4	3	1	1	0	0	6
Panel 1 - R&D	# (Total = 42)		42 100%	25 59.5%	2 4.8%	37 88.1%	25 59.5%	18 42.9%	15 35.7%	20 47.6%	24 57.1%	10 <i>23.8%</i>	12 28.6%	7 16.7%	2 4.8%	2 4.8%	27 64.3%
nab			100%	33.370	4.070	00.170	55.570	42.370	33.770	47.070	57.170	23.870	20.070	10.770	4.8%	4.8%	04.370
P-2: Stines	46 1.1	Proper application of UVC for HVAC must be based on use case		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark	\checkmark				\checkmark
P-2: Stines	46 1.1.1	Surface treatment of cooling coils and pass-by air disinfection have are not the same.		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark	\checkmark				\checkmark
P-2: Stines	46 1.2	In-Room Upper Air UVGI		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark			\checkmark		\checkmark
P-2: Stines	46 1.2.1	Proper selection and sizing by manufacturers/reps		\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-2: Stines	46 1.2.2	Safe installation of equipment by contractors (including post-install commissioning)		\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-2: Stines	46 1.3	"UV-in-a-box"				\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark			\checkmark
P-2: Stines	46 1.3.1	Public understanding of both benefits and limitations				\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark					\checkmark
P-2: Stines	47 G.1	Integrating UVC-LED technology into HVAC and Upper Air as appropriate and as needed			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark	\checkmark	\checkmark	\checkmark
P-2: Stines	47 G.2	Understanding and properly applying 222nm technology as it continues to evolve for in-room air and surface applications			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark	\checkmark	\checkmark	\checkmark
P-2: Stines	47 G.3	Working together (manufacturers and regulatory bodies) to establish fair and effective standards for HVAC and Upper Air GUVI equipment and applications to ensure products actually do what they say and that all entries into these markets are held to the same standards.		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-2: Stines	Total Entries =	10		6	5	10	10	8	9	8	8	10	2	6	3	5	10
P-2: Claus	49 1.1	Convincing (potential) customers why GUV is the right solution:			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-2: Claus	49 1.1.1	FOR INFECTION CONTROL			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark
P-2: Claus	49 1.1.2	TO MAKE SPACES HEALTHER			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark
P-2: Claus	49 1.1.3	TO PROTECT SOCIETY			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark
P-2: Claus	49 1.1.4	TO ACHIEVE ECONOMIC BENEFIT			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-2: Claus	49 1.2	Getting (more) scientific (solid!) evidence that GUV		\checkmark		\checkmark	\checkmark		\checkmark	\checkmark	\checkmark						\checkmark
P-2: Claus	49 1.2.1	Can lower infection risk		\checkmark		\checkmark	\checkmark			\checkmark	\checkmark						\checkmark
P-2: Claus	49 1.2.2	Can be safely applied		\checkmark		\checkmark	\checkmark		\checkmark		\checkmark						\checkmark
P-2: Claus	49 1.2.3	Works for many concerning pathogens		\checkmark		\checkmark	\checkmark		\checkmark	\checkmark	\checkmark					\checkmark	\checkmark
P-2: Claus	49 1.3	Better, collaborative, focused, trusting relationship with Regulatory stakeholders				\checkmark	\checkmark	\checkmark			\checkmark	\checkmark					\checkmark
P-2: Claus	50 G.1	Active support and recognition by government (agencies) that GUV provides infection prevention		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark					\checkmark

		c	Category Value Category	iacy	2. Trained Workforce	3. IAQ/ Public Health	4. Standards & Guidelines	5. Regulatory Guidance	ven V	7. Proven Performmance	· Education Jutreach	9. Labeling Prod Info	10. New T _{ech.} Research	bst	12. Far UV	13. Installation Commissioning	Collabora tion
Panels	lide #			Littries 1. Efficacy Testing	2. Tre Work	3. IA Publi	4. Ste & Gu	5. Re _g Guide	6. Proven Safety	7. P _{IC} Perfo	8. Educatic Outreach	9. Lai Prod	10. N Rese	11. Cost	12. F.	13. Ir Comr	14. C
P-2: Claus	50 G.1.1	Is a viable technology		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark					\checkmark
P-2: Claus	50 G.1.2	Is safe		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark					\checkmark
P-2: Claus	50 G.1.3	Is "Green" = energy efficient		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark					\checkmark
P-2: Claus	50 G.1.4	Should be implemented		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark					\checkmark
P-2: Claus	50 G.1.5	Needs Education of the public		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark					\checkmark
P-2: Claus	50 G.2	Having Research results and (national and international) standards to substantiate above	•	√		√	√	√	√	√	√	√	\checkmark				√
P-2: Claus	50 G.3	Getting government funding for R&D		•		√	•	•	•	•	√	•	√	\checkmark			√
P-2: Claus	50 G.4	Light sources:		\checkmark		√	\checkmark	\checkmark	\checkmark	\checkmark	√	\checkmark	√	•			√
P-2: Claus	50 G.4.1	Getting higher efficiency and more reliable and cheaper (mW/\$) UV-C LED		√		√	•	•	√	√	√	√	√	\checkmark			√
P-2: Claus	50 G.4.2	Getting shorter wavelengths		√		√			√	√	√	•	√	√	\checkmark		√
P-2: Claus	50 G.4.3	Ground breaking, new technologies???		√		./	\checkmark		√	./	√		./	./	./		, ,
P-2: Claus	50 G.5	GUV becoming commodity		√	\checkmark	√	√	\checkmark	√	√	√	\checkmark	•	√	•	\checkmark	√
P-2: Claus	Total Entries =	23		16	6	23	20	15	20	20	23	16	6	7	2	7	23
P-2: Piper	52 1.1	Increase Awareness of GUVI Advantages and Opportunity to Improve Indoor Air Quality v (Visible/Audible Support by Government)	with	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-2: Piper	52 1.2	Visible/Audible Support by Government		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark
P-2: Piper	53 G.1	Near Term – Immediately Raise Awareness, Encourage and Actually Protect Public Facility	ties			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark					\checkmark
P-2: Piper	53 G.2	Medium Term – Enact Healthy Building Standards and Obtain Additional Funding		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark			\checkmark
P-2: Piper	53 G.3	Long Term – Reduce or Eliminate the Transmission of Infectious Disease		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark			\checkmark
P-2: Piper	Total Entries =			4	1	5	5	5	5	5	5	5	2	3	0	2	5
P-2: Anand	55 I.1	Not making the cut into the top or essential purchasing list		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark			\checkmark
P-2: Anand	55 1.2	Lack of recognition from regulators for organizations that implement GUV solutions		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark					\checkmark
P-2: Anand	55 1.3	Unclear guidance from regulations for the adoption of GUV solutions		\checkmark			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark					\checkmark
P-2: Anand	56 G.1	Make GUVI a standard of care in healthcare within the regulatory space		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-2: Anand	56 G.2	Shift from supplementary sanitization to critical infection prevention tool		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-2: Anand	56 G.3	Funding to healthcare institutions to adopt GUVI solutions		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark	\checkmark
P-2: Anand	Total Entries =	6		6	3	5	6	6	6	6	6	6	1	4	0	3	6
P-2: Mathur	58 I.1	Limited customer knowledge and understanding about UV value proposition				\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark					\checkmark
P-2: Mathur	58 1.2	Lack of industry test and performance standards for whole room UV disinfection		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark
P-2: Mathur	58 1.3	Wild wild west scenario resulting in confusion and skepticism arising from a variety of	inor	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-2: Mathur	58 1.4	companies offering UV products with unsubstantiated claims, and potentially unsafe dev Limited guidance from healthcare professional organizations regarding the application of		× /	v	,	,	,	,	,	,	,		,		,	,
P-2: Mathur	59 G.1	healthcare settings Guidance from government and healthcare agencies supporting GUV for infection preven	tion	V /		V /	V /	V	V /	V /	V,	V		V		V	\checkmark
				\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark			\checkmark
P-2: Mathur	59 G.2	Having (national and international) standards to drive device selection and adoption		\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark			\checkmark
P-2: Mathur	59 G.3	Paradigm shift from an optional disinfection technology to a standard infection preventio in a layered approach	n tool	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark

Panels P-2: Mathur	lide # 59 G.4	277	Category	Total Numberof Entries	.1. Efficacy Testing	2. Trained Workforce	3. IAQ/ Public Health	4. Standards & Guidelines	5. Regulatony Guidance	6. P _{loven} Safety	⁷ . Proven Performmance	8. Education Outreach	9. Labeling Prod Info	10. New Tech. Research	^{11.} Cost	12. Far UV	13. Installation Commissioning	14. Collaboration
P-2: Mathur	Total Entries =	8			6	3	7	7	7	7	7	7	7	0	5	0	4	7
Panel 2 - OEM's	# (Total = 52) %			52 100%	38 73.1%	18 <i>34.6%</i>	50 <i>96.2%</i>	48 92.3%	41 78.8%	47 90.4%	46 88.5%	49 <i>94.2%</i>	44 84.6%	11 <i>21.2%</i>	25 48.1%	5 <i>9.6%</i>	21 40.4%	51 <i>98.1%</i>
OEIWI 3	76			100%	/3.1%	34.0%	90.2%	92.3%	/0.0%	90.4%	00.3%	94.2%	04.0%	21.2%	46.1%	9.0%	40.4%	98.1%
P-3: ASHRAE	61 I.1	Status of application-relevant standards/certifications for equipment effectiveness and safety			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark
P-3: ASHRAE	61 1.2	Hard to know who is a qualified provider			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-3: ASHRAE	61 1.3	Methods and tools for application			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-3: ASHRAE	62 G.1	Certified products with verifiable performance in application			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-3: ASHRAE	62 G.2	Well-trained, credentialed workforce			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-3: ASHRAE	62 G.3	IAQ standards that address infection risk			\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark					\checkmark
P-3: ASHRAE	Total Entries =	6			6	5	6	6	6	6	6	5	6	0	4	0	5	6
P-3: IEC	64 I.1	To prepare and maintain deliverables (standards and similar) specific to UV radiation for germicidal products within TC 34 scope			\checkmark		\checkmark	\checkmark	\checkmark				\checkmark					\checkmark
P-3: IEC	64 1.2	To monitor the activities of the IEC and ISO committees related to UV radiation for germi products	icidal				\checkmark	\checkmark	\checkmark				\checkmark					\checkmark
P-3: IEC	64 1.3	Currently working on IEC standards for Fixed and portable lighting products, cabinet type					\checkmark	\checkmark	\checkmark				\checkmark					1
P-3: IEC	64 G.1	germicidal products, and UV sources (e.g. Lamp or LEDs There is no defined 10-year goal as this is a standards development organization that dev and maintain IEC standards that is needed by the industry. Standards are constantly unde creation/revision.					√	√	√				√					√
P-3: IEC	Total Entries =				1	0	4	4	4	0	0	0	4	0	0	0	0	4
P-3: ISO	67 1.1	Traditional UV-C lamps contain mercury			1	0				v	0	آ		0	0	0	0	
P-3: ISO	67 1.2	The output power of the LED UV lamp is not enough					\checkmark				\checkmark			\checkmark				\checkmark
P-3: ISO	67 1.3	Far-ultraviolet rays have no damage to the human body, but the experimental data is not	enough				\checkmark			\checkmark		\checkmark	\checkmark	\checkmark		\checkmark		\checkmark
P-3: ISO	68 G.1	How to use new disruptive technologies such as artificial intelligence, cloud computing, re additive manufacturing (3D printing) and the Internet of Things to change traditional UV- systems?					\checkmark	\checkmark	\checkmark					\checkmark			\checkmark	\checkmark
P-3: ISO	68 G.2	How to improve the UV-C output power of UV LED?					\checkmark							\checkmark			\checkmark	\checkmark
P-3: ISO	68 G.3	How to solve the human-machine coexistence of far UV-C?				\checkmark	\checkmark						\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark
P-3: ISO	Total Entries =	6			0	1	6	2	2	2	1	2	3	5	1	2	3	6
P-3: NEMA	70 I.1	Market not developing, still niche				\checkmark	\checkmark	\checkmark	\checkmark			\checkmark	\checkmark	\checkmark				\checkmark
P-3: NEMA	70 1.2	Persistent safety concerns and perceptions about 'radiation'				√	√	√	√	\checkmark		√	√	√				√
P-3: NEMA	70 1.3	Inconsistent regulatory approaches & enforcement				\checkmark	\checkmark	\checkmark	-	-		\checkmark	\checkmark	-				\checkmark
P-3: NEMA	70 1.4	Inconsistent standards & guidelines				\checkmark	\checkmark	\checkmark				\checkmark	\checkmark					\checkmark
P-3: NEMA	70 1.5	"Wild West" with claims in marketplace			\checkmark		\checkmark	\checkmark	\checkmark			\checkmark	\checkmark					\checkmark
P-3: NEMA	70 1.6	Missed window of opportunity; "pandemic 'over' but standards not yet fully in place. Man customers have adopted nonchalant attitude re: necessity.	ıy				\checkmark	\checkmark	\checkmark			\checkmark	\checkmark					\checkmark
P-3: NEMA	70 1.7	No requirements in building codes, despite WHO pushing					\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark					\checkmark
P-3: NEMA	71 G.1	Full set of standards in place including standards for germicidal efficacy of products			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark					\checkmark
P-3: NEMA	71 G.2	Requirements in building codes including IAQ			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark

		(Total Numberod	Lathies - or 1. Efficacy Testing	2. Trained Workforce	3. IAQ/ Public Health	4. Standards & Guidelines	5. Regulatory Guidance	6. Proven Safety	⁷ . Proven Performmance	8. Education Outreach	9. Labeling Prod Info	10. New Tech, Research	11. Gost	12. Faruv	13. Installation Commissioning	t. Collaboration
Panels P-3: NEMA	lide # 71 G.3	Put safety concerns/perceptions to rest	22		~ <u>-</u>	ri d V	4 ×	5° 5 V	و. مع	~` ª	∞ ŏ √	ः र्द	77 B	11	1	4 8 V	Å J
P-3: NEMA	71 G.4	Consistent regulatory approach/framework		√	√	\checkmark	√	\checkmark	√	√	√	√				\checkmark	√
P-3: NEMA	71 G.5	Education and training for professionals			\checkmark	\checkmark	\checkmark	\checkmark			\checkmark					\checkmark	\checkmark
P-3: NEMA	Total Entries =	12		5	9	12	12	10	6	5	12	11	2	0	0	4	12
P-3:IES	73 .1	Address poor GUVI products by achieving industry agreement on minimum performance requirements		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark
P-3:IES	73 1.2	Establish an industry certification to assure a minimum level of competence for GUVI ins	stallers.	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark
P-3:IES	73 1.3	Unify and simplify GUVI by aligning influential relevant industry groups like IUVA, DOE, If ASHRAE, IALD & NALMCO on key GUVI issues	ES,		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark
P-3:IES	74 G.1	Educate more installers and distributors			\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark
P-3:IES	74 G.2	Increase radiant efficiencies for UV-B and UV-C LEDs and retrofit products for existing lamp shapes (assuming LEDs provide advantages beyond being environmentally friendly)		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark
P-3:IES	74 G.3	Achieve Federal DOE regulations (CCMS Database) for GUVI minimum requirements to remove ineffective and unsafe products from the marketplace	2.	\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark				\checkmark	\checkmark
P-3:IES	Total Entries =	6		4	5	6	6	6	6	6	6	6	0	0	0	6	6
P-3:IUVA	76 1.1	Consensus methods for the measurement of the effectiveness of $GUVI$ for the disinfection surfaces and air	on of	\checkmark		\checkmark	\checkmark	\checkmark		\checkmark	\checkmark	\checkmark				\checkmark	\checkmark
P-3:IUVA	76 1.2	Development of consensus methods for communicating the capabilities of GUVI which accurately reflect GUVI benefits and limitations		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-3:IUVA	76 1.3	Ensuring GUVI is increasingly recognized as a key element for comprehensive programs t create safer, more energy efficient built environments	to	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-3:IUVA	77 G.1	Improve GUVI technologies allowing improved power, efficiency and wavelength selection	on	\checkmark		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark			\checkmark
P-3:IUVA	77 G.2	Integrate GUVI into built environment designs		\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark		\checkmark	\checkmark
P-3:IUVA	77 G.3	Develop a more complete understanding of the role for GUVI in disinfection and health o public	of the	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark	\checkmark		\checkmark	\checkmark
P-3:IUVA	Total Entries =			6	4	6	6	6	5	6	6	6	2	5	0	5	6
Panel 3 - Associations	# (Total = 40)		40		24	40	36	34	25	24	31	36	9	10	2	23	40
Associations	%		100%	6 55.0%	60.0%	100.0%	90.0%	85.0%	62.5%	60.0%	77.5%	90.0%	22.5%	25.0%	5.0%	57.5%	100.0%
Total	# (Total = 179)		17	9 98	49	143	125	101	99	98	119	96	36	44	11	51	124
All Panels	# (TOLAI = 179) %	179	1009		27.0%		70.0%	56.0%	55.0%	55.0%		54.0%	20.0%	25.0%		28.0%	69.0%
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