



Legionnaires' Disease Risk Communication Toolkit



Community Settings Module

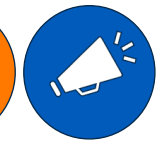
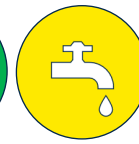


CSTE
COUNCIL OF STATE AND
TERRITORIAL EPIDEMIOLOGISTS

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Community Settings Module



Welcome to the Community Settings Module, a supplement to the *Legionnaires' Disease Risk Communication Toolkit*. This module should be used in conjunction with the *Toolkit* document and the other supplemental modules. The Community Settings Module contains the following information:

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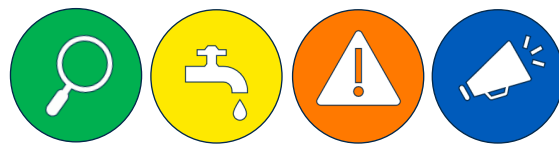
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The individual chapters in the *Legionnaires' Disease Risk Communication Toolkit* document provide foundational information applicable to all the settings in which exposure to *Legionella* most commonly occurs. The *LDRC Toolkit* document offers key information about Legionnaires' disease (LD), identifies legal issues, discusses important considerations when communicating about LD with stakeholders and the public, and provides an overview of water management programs (WMPs). The information in these chapters applies to all the settings in which exposure to *Legionella* most commonly occurs. The *LDRC Toolkit's* supplemental modules are a series of setting- and scenario-specific documents that address LD-related information and messaging targeted for that setting. The setting- and scenario-specific modules are:

- Healthcare Facilities
- Congregate Residential Facilities
- Hotels and Hospitality Facilities
- Community Settings
- Routine Environmental Test Results in the Absence of Cases

Each module also provides templates and sample messages for key communication items such as notification letters, public health orders, press releases, and health department advisories. The modules also identify practice tips and other resources to help state, tribal, local, and territorial (STLT) health agency staff communicate the risks of LD in these specific settings and scenarios to target audiences.

Variables Affecting LD Outbreaks

The goal of the modules is to provide STLT health agency staff with clear guidance about communicating LD risks in a specific setting or scenario and tools to use in those efforts. However, it is important to note that there are many factors that may affect a jurisdiction's investigation, response, and communications about a specific LD outbreak. The following factors are just some of the variables that can influence the course of an LD outbreak—even within the same types of settings—and the response to it:

- Potential for population with increased risk for LD in the setting
- Overnight stay at the setting or not
- Commercial setting or non-commercial setting
- Length of exposure in the setting
- Mixed/hybrid settings (i.e., locations with features common to different LD risks)
- Environmental assessment and environmental sampling *Legionella* results

Above all, these modules provide a starting point from which to tailor risk communication about

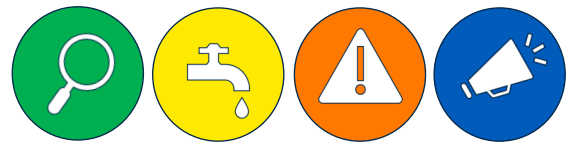
LD outbreaks in the identified setting. Each jurisdiction can make its own determination about the nature and scope of its investigation and response, and the messages and targets for communication, given the specifics of each LD outbreak and the jurisdiction's laws, regulations, and policies.

Module Components

The setting- and scenario-specific modules follow the same format and include the following sections:

- **Scope of Module**—Provides a quick overview of the types of buildings and facilities addressed in the module.
- **Factors Affecting Investigation**—Discusses factors in the specific setting (e.g., healthcare, congregate residential) or scenario (i.e., routine environmental test results in the absence of cases) that help determine how a public health agency addresses LD cases or an outbreak in that setting.
- **Key Risk Factors**—Identifies and discusses the key risk factors in the setting that can give rise to *Legionella* growth and LD. This section addresses risk factors associated with buildings and facilities as well as factors affecting persons who occupy or visit the setting. Each module includes a one-page figure summarizing these key risk factors for quick reference.
- **Key Audiences and Messages Overview**—Identifies and addresses the key audiences for messaging in the module setting. The section discusses the relevance and role of each audience to the identification, investigation, mitigation, and prevention of *Legionella* and LD.
- **Key Audience and Messaging Tables**—A series of tables provides detailed messaging guides geared to each key audience in the setting or scenario. This section opens with an index table that lists all the messaging table templates by audience. Each series of color-coded key audience tables includes one or more messaging scenarios for that audience. Each messaging table contains an annotated, customizable template of text to include in communications about that scenario.
- **Toolkit Appendix**—Provides other samples and templates related to the content of the module.

Finally, the messaging needed in a specific scenario or outbreak will vary with the unique facts of that event and the laws and policies of the jurisdiction where it is occurring. **For this reason, the information in each module and the messaging tables, templates, and samples should be used as a starting point to craft communications tailored to the user's specific needs and circumstances.**



CDC defines a community-associated outbreak as “an increase in Legionnaires’ disease cases in a certain geographic area beyond what one would normally expect for the same time and place” (CDC, 2021a). Cases and outbreaks of Legionnaires’ disease (LD) in a community setting may, at least initially, be difficult to attribute to a specific source. Given the range of potential facility types and building water systems (including cooling towers) where *Legionella* can grow and be dispersed, as well as the many buildings a person visits and the activities they undertake daily, the task of identifying a source of exposure can be daunting.

Investigating and communicating with the owners and operators of facilities that are potential sources of exposure—coupled with health alerts to healthcare providers, other agencies and jurisdictions, the media, and the public—can further help to identify other additional cases. This in turn can provide more exposure information to help determine the potential sources of infection. The investigation may or may not ultimately lead to the identification of a source of *Legionella* exposure.

Scope of Module

This module includes the following types of facilities in a community which may become colonized with *Legionella* and become sources for exposure:

- Public, private, and commercial facilities
 - Public buildings and government office buildings
 - Private office, retail, and commercial buildings
 - Industrial and manufacturing facilities
 - Schools and universities
 - Places of worship
 - Gyms and fitness centers, community centers, and entertainment venues
- Private residences
 - Single-family homes, townhomes, small multiple-family residences (e.g., duplexes, triplexes, fourplexes), mobile homes, motor homes, and trailers
 - For buildings with multiple housing units using a centralized hot water system, see Congregate Residential Facilities Module
- Recreational and non-recreational water features
 - Recreational water features including pools, hot tubs, water slides, and interactive water features
 - Non-recreational water features including decorative fountains, misters, atomizers, car washes, air washers, and humidifiers



- Community-wide or unknown
 - Cooling towers
 - Community water systems

Factors Affecting Investigation

Persons who have been diagnosed with LD—but who do not have exposure to travel or healthcare settings—can provide key information to public health agencies about their daily activities such as location and time spent at home, work, school, places of worship, recreation, and other activities. Epidemiologists can then try to establish where persons with LD may have been exposed to *Legionella* and if there are any common sources of exposure. Mapping potential exposures of cases obtained through interviews can help to identify any common sources, including those at short-term or event facilities like fairgrounds. Consider cooling towers if cases are tightly clustered in time and neighborhood, as cooling towers have been frequently implicated during community outbreak investigations. While municipal water supplies are not a known common source of *Legionella* exposure, public health investigators may also wish to contact local water utilities to identify any changes in potable water supplied to an area (CDC, 2021a). Changes in municipal water may impact conditions within buildings served, resulting in conditions more favorable to *Legionella* growth and spread within those building water systems or devices. Where there are multiple cases within a community, CDC notes that the community's water supply may also be considered "to determine if there were any changes that could have contributed to *Legionella* growth (e.g., modifications to potable water disinfection, water main breaks, major construction activity, water service interruptions)" (CDC, 2021a). Properties that use well water may have that source evaluated, too.

For More Information...

Cooling towers can cause LD outbreaks if they are not properly maintained. CDC provides additional information about how to determine if a building has a cooling tower. See "Procedures for Identifying Cooling Towers" at <https://www.cdc.gov/legionella/health-depts/environmental-inv-resources/id-cooling-towers.html>

Key Risk Factors in Community Settings

The inquiry into a community-associated LD case can implicate other settings, such as healthcare, congregate residential, and hotels and other hospitality settings, depending on the information provided by persons with LD about their potential sources of exposure. There are multiple factors that can make various facilities within a community susceptible to *Legionella* growth and spread. While not all the risk factors identified below will apply equally to all the types of facilities discussed in this module, they are indicative of the types of risks that can arise. The categories of risk factors applicable to the community settings are discussed below.

Complex Potable and Drinking Water Distribution Systems

Although it can vary among facilities, many types of buildings in community settings can have complicated water systems given the size of some buildings and the wide range of water applications in them. Large buildings can have complex potable/drinking water systems that



include recirculating hot water, long distribution or riser runs, multiple water heaters, and numerous fixtures, which can lead to multiple potential sources of *Legionella*. Some facilities can also undergo frequent construction or renovation to modernize and expand capacity, which can cause disruptions and changes in water pressure that dislodge biofilm and release *Legionella* or other waterborne pathogens into the water system. Frequent disruptions to a water system can also lead to the introduction of contaminants into the water system and potential stagnation in areas where water flow is reduced or cut off. Smaller facilities may not have the same level of complexity in their water systems; however, they may not receive the same level of ongoing maintenance as larger properties which can foster conditions for *Legionella* colonization.

Sources of Aerosolized Water

This is a broad category that includes many types of potential sources of *Legionella* within a range of building types: from large public and commercial facilities to private residences. Sources of aerosolized water include showers, faucets, humidifiers, pools, hot tubs, pools, decorative fountains, ice machines, misters, equipment that uses water (e.g., personal respiratory therapy machines), or other water features. Industrial and manufacturing operations may involve processes in which employees are exposed to water and mist. Note that some sources of aerosolized water may be temporary, such as a hot tub display at fairs, home and garden shows, and conventions.

Building Systems with Cooling Towers

Large facilities are likely to have complex cooling systems that include cooling towers, which if not properly maintained, can become colonized with *Legionella*. Cooling towers can then disperse water droplets containing *Legionella* into the exterior air around them and become potential sources of exposure for the neighboring area around the building with the cooling tower. Depending on their size, office buildings, educational buildings, retail facilities, hospitals, industrial facilities, and places of worship can have one or more cooling towers. Smaller buildings and private residences are very unlikely to have cooling towers.

Specific Building or Location Features

There may be features specific to a particular building, facility, or location that increases its potential for *Legionella* growth or spread. For example, some facilities in a community setting may sit vacant for extended periods of time, thereby increasing the likelihood that water can sit and stagnate in the facility's plumbing if not properly maintained. Vacancy issues were especially a consideration for office buildings, university and school buildings, places of worship, and some retail locations during the COVID-19 pandemic as these facilities sat vacant for months (CDC, 2021b). Venues like water parks, water slides, and amusement parks expose patrons and staff to water and water mist.

Hybrid Settings

Some facility types within a community setting can have aspects of other settings. In addition to having large complex water systems, office buildings, schools, and universities may also contain recreational water features like hot tubs and pools. If private residences are used for bed and breakfast inns, vacation rentals, or short-term residence rentals (either the whole or partial residence, e.g., Airbnb, VRBO), they may be considered to be a hospitality facility for the purposes of an epidemiological investigation; however, these properties share many of the same features as private residences and often are not subject to the same tourist



accommodation regulations as hotels. Each element is assessed as an individual functional unit as well as in the context of a community setting as a whole.

Length of Time In or Near Sources

Because LD is associated with extended exposures to a community source colonized with *Legionella*, the longer a person spends time in or around these sources—as residents, overnight guests, event attendees, employees, students, volunteers, or otherwise spending time there—the greater the potential to contract LD. Employees and others who work in occupations or around sources that regularly expose them to water and mist may also be vulnerable to legionellosis. While time spent in a source location is important, community-associated LD outbreaks can also implicate sources discharging mist to outside air. Mist from cooling towers colonized with *Legionella* can drift and affect persons outside in the neighboring area or may affect people inside the building at which the cooling tower is located or in other buildings in the area.

At-risk Persons In or Near Sources

Some people may have factors that predispose them to acquiring LD, such as being aged 50 years and older, being a current or former smoker, or having a higher risk of infection (e.g., have a chronic illness, respiratory disease, or a weakened immune system). Other individuals may be at risk for LD based on the amount of time they spend in or near a community source in which facilities or equipment colonized with *Legionella* produce mist.

Figure 1 describes risk factors that affect community buildings and the person using them. Specific facility types (e.g., commercial, office, residential) that may have the listed risk factor are indicated in parentheses.

Key Audiences and Messages

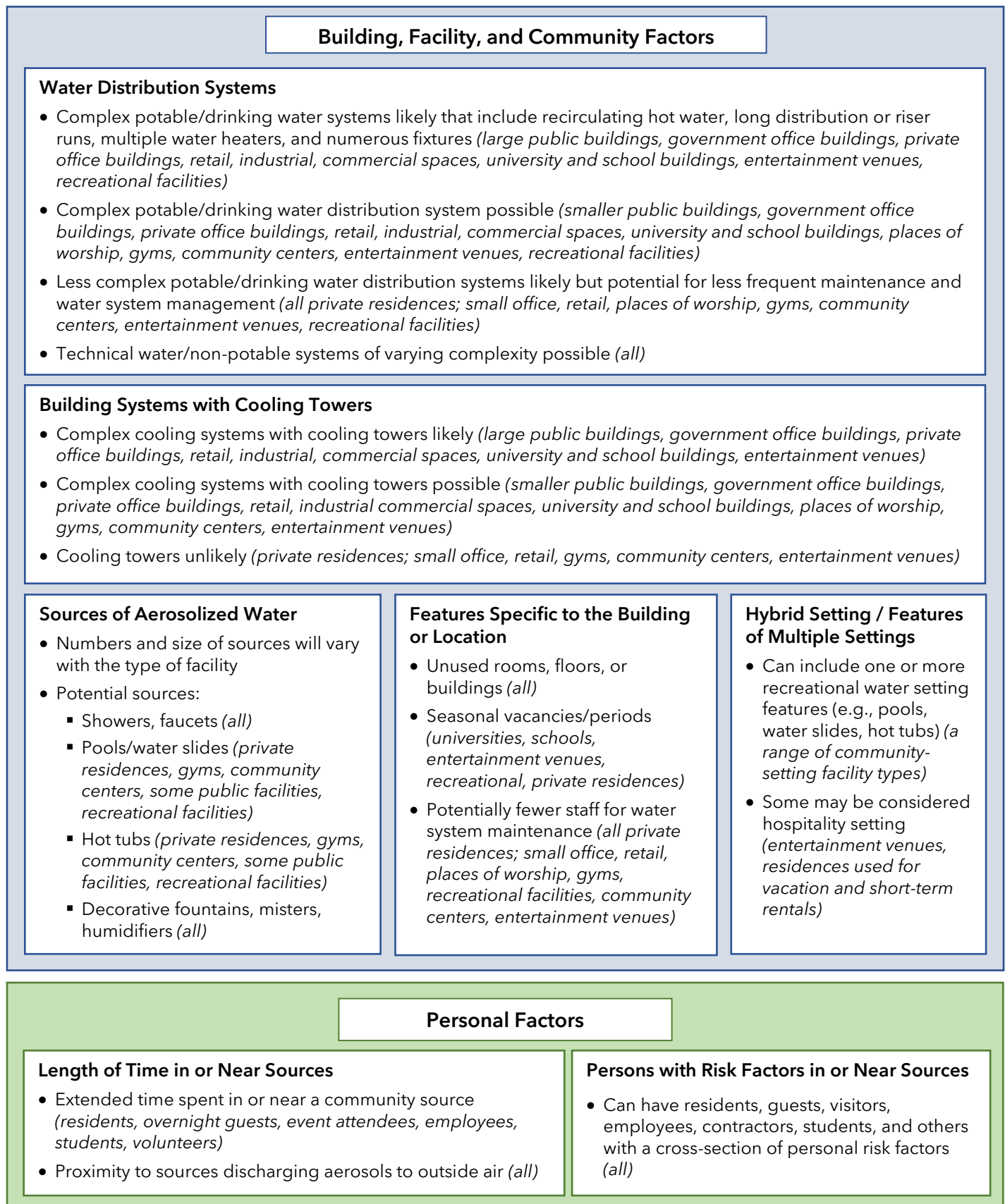
Each community setting has key audiences for messaging about LD identification, investigation, mitigation, and prevention. Each of these persons and organizations may require foundational information about LD as well as information tailored to their perspective in the LD event. Messaging may also evolve during the LD investigation as suspected outbreaks are confirmed, additional information becomes available, or if follow-up is indicated with affected persons and facilities. Because the source of a community-associated *Legionella* exposure can be difficult to establish, if at all, there may not be a clear source location to identify in messaging to key audiences. While acknowledging the potential limitations in exposure information, the key audiences for community settings are the same as those identified in other modules, but the messaging may differ.

Facility

Owners, operators, and managers are generally both the operational and legal points of contact for suspected and confirmed public health communicable disease investigations and response activities; however, this should be confirmed by the laws and regulations in a specific jurisdiction. The appropriate parties to contact can also vary depending on the size and type of facility involved (e.g., owned by large corporation, a small business, a place of worship, a private home).



Figure 1: Key Risk Factors in Community Settings





A facility's owners, operators, or managers are also likely to be a key source of information about residents, staff, customers, volunteers, and other persons who stayed, worked at, or visited during period under investigation. Depending on the laws, regulations, or policies of a jurisdiction, facility managers and employees may be required to use messaging supplied by a public health agency to communicate with potentially exposed persons or to alert prior, current, and prospective residents, customers, and others about an ongoing LD investigation; however, in other jurisdictions, public health agencies can recommend but not require specific messaging. With some facilities such as schools or universities, other government agencies and levels are likely to be involved in the investigation and remediation of the facility; they may also manage the messaging to students, parents, and staff.

For More about Routine Environmental Testing Results....

See the "Routine Environmental Testing Results in the Absence of Cases" Module for additional messaging about this scenario.

Should a facility raise concerns about sharing personally identifiable information about residents, customers, or others, note that federal and state laws provide exceptions to confidentiality requirements for public health purposes or other exceptions that would allow for access to information about individuals. (See *LDRC Toolkit* Chapter 3 "Access to Information and Confidentiality".) Any questions or concerns about accessing or sharing personally identifiable information may be discussed with the public health agency's legal counsel.

Messaging to facilities that have not been linked to a community-associated LD outbreak will likely focus on informing the facility's owners and operators about the specific investigation, the role their building may have in LD, and encouraging good water management practices and testing of the facility's systems for *Legionella*. Specifically, the facility representatives should be informed about the process for investigating, testing, and mitigating potential sources of *Legionella* in the facility's water systems, cooling towers, and plumbed water features, as well as other equipment or devices that use water. If a facility is indicated as a likely exposure source for *Legionella*, messages focusing on requested or required actions as part of an investigation by a public health agency should be employed. If general risk communication methods are ineffective at promoting action by a facility implicated as an exposure source, messaging about and the use of public health orders or other enforcement mechanisms may be helpful.

Finally, public health agencies should consider requesting (or requiring) copies of all written materials and other notices shared with residents, staff, and visitors to ensure that the information being provided is accurate and complete. Correct information is especially important for persons potentially exposed to *Legionella* who should be monitored for symptoms and seek treatment if symptoms develop. Facilities subject to health orders may also be required to provide copies of all notices and notifications. Public health agencies should also confirm that facilities notify residents, staff, and visitors about the results of tests on its water systems arising from a public health investigation.

People in the Community

The people who live, work, attend school and places of worship, patronize businesses, or otherwise spend time in the area in which a community-associated LD outbreak is occurring are all key audiences. Consider using multiple communication methods (e.g., print, air, social



media) to reach different audiences in the community. Messages should address the cause of LD, sources, risk factors, and symptoms of the disease. If known, people should be informed about their specific potential exposure at a facility or in a geographic area and its timing. Messaging should encourage persons to speak with their doctor if they experience legionellosis symptoms. Points of contact with the public health agency and sources for additional information should also be clearly communicated. Messaging can also include information about prevention within private homes (CDC, 2022). If the source of an outbreak can be identified, more targeted messaging can be used to reach affected persons. This includes specific messaging to persons who may visit or be employed in occupational settings in which they are regularly exposed to water and water vapor in doing their jobs. (See box “LD Outbreaks in Occupational Settings”.)

LD Outbreaks in Occupational Settings

When LD cases or an outbreak are linked to a workplace, persons who have spent time there—employees, contractors, volunteers—should receive clear information about LD that addresses the cause, sources, risk factors, and symptoms of the disease. Messaging should include information about:

- Specific potential exposures at the facility
- When exposure likely occurred (if known)
- Corrective actions taken by the employer (and/or facility owner)
- How employees should proceed if they are sick or worried about having been exposed
- How to speak with their doctor and/or or occupational health clinic about the exposure
- Employee rights
- Points of contact within the organization and the public health agency
- Sources for additional information

Further, the issue of personal protective equipment (PPE) consistent with or beyond that already used in the occupational setting may arise if there are employees at higher risk (whether due to personal medical history or exposure risks due to specific job duties).

It is important to remember that a jurisdiction’s occupational health and safety laws (state-run plans or federal OSHA) and workers’ compensation system, as well as obligations arising from union contracts, and other agreements or personnel policies affect the duties of employers and the rights of employees and others.



Persons with Confirmed LD

Persons who have been confirmed to have LD from an outbreak may require additional information as the public health investigation proceeds (e.g., for medical or legal purposes, out of interest or concern). Health agency staff should identify the extent and types of information that can be legally shared within the scope of their jurisdiction's laws, and that the information released is supported by data and sound public health practice. Health agencies may also consider media releases with investigation updates to keep affected and interested persons informed. (See "Media and the Public" section below.)

Healthcare Providers and Facilities

Conducting outreach to healthcare providers and targeted healthcare facilities in the community in which an LD outbreak is occurring/has occurred helps to educate them about LD and alert them to the signs and symptoms indicating a patient may be suffering from LD. The public health agency can also provide guidance on appropriate diagnostic testing and treatment, and instructions about retaining or forwarding clinical specimens or isolates. Health alerts sent by the public health agency to healthcare providers and facilities are used to highlight specific suspected or confirmed LD outbreaks and to inform practitioners and clinical laboratories how to report cases to the agency. Health agencies may also consider issuing health alerts to providers before the opening of seasonal attractions to remind them about LD signs and symptoms (or about waterborne illnesses generally) and how to report cases.

Other Agencies and Governments

A public health agency may inform other divisions within the public health agency, other government agencies in its state/jurisdiction, and agencies in other units of government (i.e., local, regional, state, federal, tribal, territorial) about an LD outbreak as required by law, standard procedure, or voluntarily as public health partners. Consider issuing an Epi-X alert if the community outbreak occurs in a common travel destination. Identifiable personal information can only be shared according to state and federal confidentiality laws and rules. Depending on the extent and nature of an LD event, other divisions, agencies, or units of government may have regulatory or other legal authority over the operation of a facility (e.g., building code enforcement, environmental health/sanitation inspections, recreational water inspections, water utilities).

Media and the Public

Providing information to the media and the public about a suspected or confirmed LD outbreak is an important part of the risk communication process in many situations, but it should be approached taking care to balance the privacy interests of the involved facilities and individuals with the right of the public to be made aware of public health threats. (See *LDRC Toolkit* Chapter 3 "Accessing Information and Confidentiality" for more information.) LD cases or outbreaks in a community may generate significant ongoing public and media attention as the public health agency undertakes the process of identifying possible sources of exposure. Issuing press releases and other statements about an LD outbreak at or near a specific facility or in the community generally can help to identify other persons who may have been exposed and alert them to the symptoms to watch for during the incubation period. In some instances, proactive messaging with a suspected source facility may garner the facility's voluntary cooperation with testing, investigation, mitigation, and prevention; some facilities may react to negative media attention by being hesitant to test or undertake mitigation activities unless ordered to do so. For



community LD outbreaks from an unknown source, releasing information to the media, public, and healthcare providers may produce additional leads as to the origin of the outbreak or provide opportunities for interventions and prevention activities at additional facilities that may be contributing to the outbreak (e.g., public messaging intended to reach cooling tower owners and operators for whom public health may not have direct contact information). Finally, providing updates on the status of an LD investigation can help to assure the public that the outbreak is being addressed and mitigated.

Community Settings Module References

Centers for Disease Control and Prevention. (2021a, March 25). Legionella (*Legionnaires' disease and Pontiac fever*): Things to consider: Outbreak investigations. <https://www.cdc.gov/legionella/health-depts/epi-resources/outbreak-investigations.html>

Centers for Disease Control and Prevention. (2021b, July 22). Environmental health services: Reopening buildings after prolonged shutdown or reduced operation. <https://www.cdc.gov/coronavirus/2019-ncov/php/building-water-system.html>

Centers for Disease Control and Prevention. (2022, February 11). Drinking water: Preventing waterborne germs at home. <https://www.cdc.gov/healthywater/drinking/preventing-waterborne-germs-at-home.html>



Community Settings Module Selected Resources

- ASHRAE. Standard 188: Legionellosis: Risk Management for Building Water Systems (ANSI approved). Read-only access available at: <https://www.ashrae.org/technical-resources/standards-and-guidelines/read-only-versions-of-ashrae-standards>.
- ASHRAE. Guideline 12: Managing the Risk of Legionellosis Associated with Building Water Systems. Read-only access available at: <https://www.ashrae.org/technical-resources/standards-and-guidelines/read-only-versions-of-ashrae-standards>.
- CDC. Developing a Water Management Program to Reduce *Legionella* Growth and Spread in Buildings: A Practical Guide to Implementing Industry Standards. June 5, 2017. Version 1.1. Available at: <https://www.cdc.gov/legionella/downloads/toolkit.pdf>.
- CDC. The Toolkit for Controlling *Legionella* in Common Sources of Exposure (*Legionella* Control Toolkit). January 13, 2021. Version 1.1. Available at: <https://www.cdc.gov/legionella/wmp/control-toolkit/index.html>.
- CDC. Legionnaires' Disease Communication Resources. Available at: <https://www.cdc.gov/legionella/health-depts/communications-resources.html#press-releases>.
- CDC. Reopening Buildings After Prolonged Shutdown or Reduced Operation. Available at: <https://www.cdc.gov/nceh/ehs/water/legionella/building-water-system.html>.
- CDC. Considerations for Vacation Rental Owners and Managers: How to Prevent Legionnaires' Disease. Available at: <https://www.cdc.gov/legionella/wmp/vacation-rental.html>.
- CDC. Hot Tub Displays and *Legionella* Risk: Guidance for Environmental and Public Health Practitioners. Available at: <https://emergency.cdc.gov/han/HAN00422.asp>.
- CSTE. Water Management Program Template. Available at: <https://www.cste.org/general/custom.asp?page=Legionnaires>.
- Cooling Technology Institute (CTI). Guideline (GDL) 159: Practices to Reduce the Risk of Legionellosis from Evaporative Heat Rejection Equipment Systems. Available at: <https://www.coolingtechnology.org/single-post/2020/02/01/cti-releases-comprehensive-legionellosis-guideline>.
- OSHA. Legionellosis (Legionnaires' Disease and Pontiac Fever). Available at: <https://www.osha.gov/legionnaires-disease>.



This section of the module contains messaging tables that address key audiences associated with suspect or confirmed community-associated LD cases or outbreaks. LD risk communication materials gathered from states, localities, and federal sources were used to help create the messaging tables in this module. Readers should consider the following when using the messaging tables:

- Each series of color-coded key audience tables includes one or more messaging scenarios for that audience.
 - The same colors are used across the all the modules for the same audiences (e.g., materials for the press and public are in tables with orange banners).
- Each messaging table contains an annotated template of text to include in communications about that scenario.
 - Module users are free to choose which content to use in a template and modify it according to their needs.
- ***Italicized topic headings*** introduce a series of bulleted statements with text that can be adapted into letters, handouts, or notices.
 - Topic headings are not necessarily intended to be used in messaging documents.
- [Text in brackets] can be edited or added by the user to tailor a document for the specific use.
 - For example, "The [state/local health agency] has identified..." becomes "The Anytown Health Department has identified..."
- *[Italicized text in brackets]* are instructions to the user and are not intended to be included in messaging documents.

The next page contains an index of the messaging tables and lists each key audience and messaging scenarios addressed. The index also lists the corresponding module page numbers for the messaging tables.

IMPORTANT NOTE:

The messaging indicated in a specific scenario or outbreak will vary with the unique facts of that event and the laws and policies of the jurisdiction where it is occurring. **For this reason, these messaging tables, templates, and samples should be used as a starting point to craft communications tailored to the user's specific needs and circumstances.**



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Alert to municipal water suppliers about possible link to LD case(s)/outbreak in a community setting	CS-55
Media and the public	
Press release or alert to the media and public about LD case(s)/outbreak in a community setting	CS-57



Community Settings–Messaging for Facilities

Messaging Purpose:

- Informing one of multiple facilities about a LD community-associated cluster/outbreak:
Facility is not under full investigation
 - Facility is one of many facilities that are possible exposure sources
 - Contents may be further tailored for a specific facility type

Purpose of communication:

- The [state/local health agency] has identified [number] cases of Legionnaires' disease (LD) in [identify geographic area].
- These individuals likely acquired *Legionella* in or around [geographic area and/or facility name] during [timeframe].
- [We are providing this [letter] to you for your information only; you are not legally required to take action at this time.]
- The [state/local health agency] welcomes your cooperation with the investigation of the LD cases.

Basics about LD:

- LD is a serious form of pneumonia (lung infection) that is spread from aerosolized water (water droplets) that contains *Legionella* bacteria.
- LD is generally not spread from person to person.
- Most healthy people do not get LD after being exposed to *Legionella*.
 - Being 50 years or older or having certain risk factors such as being a current or former smoker, having chronic lung disease, having a weakened immune system, or taking medication that weakens your immune system can increase the chances of getting LD.
- Symptoms of LD include cough, muscle aches, fever, shortness of breath, and headache.
 - Symptoms usually start 2 to 14 days after breathing in water droplets with *Legionella*.
- LD can be treated with antibiotics.
- Most people who get LD need care in a hospital but make a full recovery. However, LD can sometimes result in lung failure or death.

Sources of exposure:

[Edit sources as appropriate for facility type:]

- *Legionella* is naturally found in freshwater environments, such as lakes and streams; however more commonly causes human infection when it grows and spreads in building water systems (e.g., hot water tanks and heaters, showerheads, sink faucets, large plumbing systems, hot tubs, cooling towers, other water sources like decorative fountains).
- *Legionella* is common in the environment and can remain there unless proper steps are taken to control it.
- [At this time, there is no direct evidence that a case of LD was acquired at your facility; however, we felt it was prudent to notify you.]

[Continued next page]

Community Settings—Messaging for Facilities

Messaging Purpose: Informing one of multiple facilities about a LD community-associated cluster/outbreak: Facility is not under full investigation (*continued*)

Suggested actions:

- Building owners/operators may wish to test their water for *Legionella* and review their water maintenance procedures to help minimize future risk.
 - Information about water system maintenance is available through the Centers for Disease Control and Prevention (CDC) at <https://www.cdc.gov/legionella/wmp/overview.html>.
- [While the investigation is underway, out of an abundance of caution, [state/local health agency] recommends that people who are at increased risk for severe disease from *Legionella* consider postponing their visit to [location/facility].]

Actions potentially required:

- [While there are currently no legal restrictions or actions required,] we are informing you to ensure that you have updated information and help you minimize the risk of *Legionella* in your facility's water systems.
- If we determine that other people with LD also [reside in, work at, or visited] your facility, we may ask for your assistance in investigating further.

Communications requested:

- Thank you for your active cooperation in the [state/local health agency] investigation.
- Please contact the [state/local public health agency or other agency] if you learn of other cases of LD among occupants, staff, or visitors.
- Please contact [name, phone number, and email address of person/office] at the [state/local health agency or other agency] for more information or to answer questions.

Templates & Samples

See additional samples and templates in the *LDRC Toolkit Appendix*



Community Settings—Messaging for Facilities

Messaging Purpose:

- Informing one of multiple facilities about a LD community-associated cluster/outbreak:
Full investigation is indicated
 - Facility is one of many facilities that are possible exposure sources
 - Scenario indicates need for full investigation and action by facility owners
 - Contents may be further tailored for a specific facility type

Purpose of communication:

- The [state/local health agency] has identified [number] cases of Legionnaires' disease (LD) in [identify geographic area].
- These individuals likely acquired *Legionella* in or around [geographic area and/or facility name] during [timeframe].
- The [state/local health agency] has reasonable cause to believe that your facility [is one of multiple facilities that] is or may be colonized with *Legionella* (the bacteria that cause LD) and it may be a threat to public health.
- An environmental assessment of your facility by [state/local public health agency] is necessary and specific remediation measures may be needed based on the assessment findings.
- The [state/local health agency] welcomes your cooperation with the investigation of the LD cases.

Basics about LD:

- LD is a serious form of pneumonia (lung infection) that is spread from aerosolized water (water droplets) that contains *Legionella* bacteria.
- LD is generally not spread from person to person.
- Most healthy people do not get LD after being exposed to *Legionella*.
 - Being 50 years or older or having certain risk factors such as being a current or former smoker, having chronic lung disease, having a weakened immune system, or taking medication that weakens your immune system can increase the chances of getting LD.
- Symptoms of LD include cough, muscle aches, fever, shortness of breath, and headache.
 - Symptoms usually start 2 to 14 days after breathing in water droplets with *Legionella*.
- LD can be treated with antibiotics.
- Most people who get LD need care in a hospital but make a full recovery. However, LD can sometimes result in lung failure or death.

Sources of exposure:

[Edit sources as appropriate for facility type:]

- *Legionella* is naturally found in freshwater environments, such as lakes and streams; however more commonly causes human infection when it grows and spreads in building water systems (e.g., hot water tanks and heaters, showerheads, sink faucets, large plumbing systems, hot tubs, cooling towers, other water sources like decorative fountains).

[Continued next page]

Community Settings—Messaging for Facilities

Messaging Purpose: Informing one of multiple facilities about a LD community-associated cluster/outbreak:
Full investigation is indicated (*continued*)

- *Legionella* bacteria are common in the environment and can persist unless proper steps are taken to control it.

Required actions (as applicable):

- The [state/local public health agency] is requesting your assistance in gathering information about the cases who report being at [or in the geographic area near] your facility.
- You should inform building staff, [residents/other], and visitors about the LD cases/outbreak. [State/local health agency] can assist you with [and/or provide you with templates for] notifications.
- You should review your water system and facility maintenance procedures to help minimize future risk.
 - Information about water management programs are available through the Centers for Disease Control and Prevention (CDC) at <https://www.cdc.gov/legionella/wmp/overview.html>.
- [Facility name] may need to have a water management program (WMP).
 - If [facility] does not have a WMP and it meets the characteristics outlined in ASHRAE Standard 188, it should develop and implement one. See the worksheet from CDC to identify which buildings or systems should have a WMP: <https://www.cdc.gov/legionella/wmp/toolkit/wmp-risk.html>.
 - If [facility] does not meet the characteristics outlined in ASHRAE Standard 188 indicating the need for a WMP, consider implementing elements of a WMP according to facility or device characteristics.
 - Resource documents include the CDC Water Management Program Toolkit (www.cdc.gov/legionella/wmp/toolkit/index.html) and the CSTE Water Management Program template (<https://www.cste.org/general/custom.asp?page=Legionnaires>).
- An environmental assessment of your facility by the [state/local public health agency] is necessary to determine if there is potential for ongoing risk of exposure to *Legionella*.
- *[If cases are linked to a specific device such as a decorative fountain, hot tub, or other device that aerosolizes water and there is evidence to suggest the device may be the source of the outbreak:]*
 - Remove [device] from service until [state/local public health agency] can conduct the environmental assessment.
- Upon completion of the environmental assessment, [state/local public health agency] personnel may recommend control measures as indicated by the assessment findings that your facility should undertake to mitigate any ongoing risk and prevent future *Legionella* colonization.

Communications requested:

- Thank you for your active cooperation in the [state/local health agency] investigation.
- Please contact the [state/local public health agency or other agency] if you learn of other cases of LD among occupants, staff, or visitors.
- Please contact [name, phone number, and email address of person/office] at the [state/local health agency or other agency] for more information or to answer questions.

Templates & Samples

See additional samples and templates in the
LDRC Toolkit Appendix



Community Settings–Messaging for Facilities

Messaging Purpose:

- Informing a facility about a single LD community-associated case with other potential exposure sites
 - A single case not currently under full investigation
 - Contents may be further tailored for a specific facility type

Purpose of communication:

- On [date], the [state/local health agency] has identified a person with Legionnaires' disease (LD) who [was at/stayed at/worked at/visited] your facility [or the geographic area near it] from [date range], which is within the LD incubation period of 2 to 14 days.
- LD is one of the illnesses reported to the [state/local health agency] because of its potential to cause outbreaks.
- The [state/local health agency] welcomes your cooperation with the investigation of this LD case.

Basics about LD:

- LD is a serious form of pneumonia (lung infection) that is spread from aerosolized water (water droplets) that contains *Legionella* bacteria.
- LD is generally not spread from person to person.
- Most healthy people do not get LD after being exposed to *Legionella*.
 - Being 50 years or older or having certain risk factors such as being a current or former smoker, having chronic lung disease, having a weakened immune system, or taking medication that weakens your immune system can increase the chances of getting LD.
- Symptoms of LD include cough, muscle aches, fever, shortness of breath, and headache.
 - Symptoms usually start 2 to 14 days after breathing in water droplets with *Legionella*.
- LD can be treated with antibiotics.
- Most people who get LD need care in a hospital but make a full recovery. However, LD can sometimes result in lung failure or death.

Sources of exposure:

[Edit sources as appropriate for facility type:]

- *Legionella* is naturally found in freshwater environments, such as lakes and streams; however more commonly causes human infection when it grows and spreads in building water systems (e.g., hot water tanks and heaters, showerheads, sink faucets, large plumbing systems, hot tubs, cooling towers, other water sources like decorative fountains).
- *Legionella* bacteria are common in the environment and can persist unless proper steps are taken to control it.

[Continued next page]

Community Settings—Messaging for Facilities

Messaging Purpose: Informing a facility about a single LD community-associated case with other potential exposure sites (*continued*)

Suggested actions:

- You may [wish to/be required to] inform building staff, residents, and visitors about the LD case. [Health agency] can assist you with [and/or provide you with templates for] notifications.
- You may also [wish to/be required to] review your water/facility maintenance procedures to help minimize future risk.
 - Information about water system maintenance is available through the Centers for Disease Control and Prevention (CDC) at <https://www.cdc.gov/legionella/wmp/overview.html>.
- [Facility name] may need to have a water management program (WMP).
 - If [facility] does not have a WMP and it meets the characteristics outlined in ASHRAE Standard 188, it should develop and implement one. See the worksheet from CDC to identify which buildings or systems should have a WMP: <https://www.cdc.gov/legionella/wmp/toolkit/wmp-risk.html>.
 - If [facility] does not meet the characteristics outlined in ASHRAE Standard 188 indicating the need for a WMP, consider implementing elements of a WMP according to facility or device characteristics.
 - Resource documents include the CDC Water Management Program Toolkit (www.cdc.gov/legionella/wmp/toolkit/index.html) and the CSTE Water Management Program template (<https://www.cste.org/general/custom.asp?page=Legionnaires>).

Actions potentially required:

- The [state/local public health agency] is requesting your assistance in gathering information about the case who was at your facility.
- An environmental assessment of your facility by the [state/local public health agency] may be necessary to determine if there is potential for ongoing risk of exposure to *Legionella* and specific remediation measures may be needed based on the assessment findings.
- *[If cases are linked to a specific device such as a decorative fountain, hot tub, or other device that aerosolizes water and there is evidence to suggest the device may be the source of the outbreak:]*
 - Remove [device] from service until [state/local public health agency] can conduct the environmental assessment.

Communications requested:

- Thank you for your active cooperation in the [state/local health agency] investigation.
- You [may/will] be contacted by [state/local public health agency] to schedule an environmental assessment of the facility.
- In the meantime, if you have additional information and questions, or if you learn of other cases of LD among residents, staff, or visitors, regardless of where they live, please contact [name, phone, email] at the [the state/local public health agency].

Templates & Samples

See additional samples and templates in the *LDRC Toolkit Appendix*



Community Settings—Messaging for Facilities

Messaging Purpose:

- Informing a facility about multiple LD community-associated cases/outbreak
OR
- A single case with minimal/no other exposure sites
 - Scenarios requires full investigation and action by facility owners
 - Contents may be further tailored for a specific facility type

Purpose of communication:

- On [date], the [state/local health agency] has identified a person with Legionnaires' disease (LD) who [was at/stayed at/worked at/visited] your facility [or the geographic area near it] from [date range], which is within the LD incubation period of 2 to 14 days.
- There is reasonable cause to believe that your property is or may be colonized with *Legionella* (the bacteria that cause LD) and that it may be a threat to public health.
- An environmental assessment of your facility by [state/local public health agency] is necessary and specific remediation measures may be needed based on the assessment findings.
- The [state/local health agency] welcomes your cooperation with the investigation of the LD case(s).

Basics about LD:

- LD is a serious form of pneumonia (lung infection) that is spread from aerosolized water (water droplets) that contains *Legionella* bacteria.
- LD is generally not spread from person to person.
- Most healthy people do not get LD after being exposed to *Legionella*.
 - Being 50 years or older or having certain risk factors such as being a current or former smoker, having chronic lung disease, having a weakened immune system, or taking medication that weakens your immune system can increase the chances of getting LD.
- Symptoms of LD include cough, muscle aches, fever, shortness of breath, and headache.
 - Symptoms usually start 2 to 14 days after breathing in water droplets with *Legionella*.
- LD can be treated with antibiotics.
- Most people who get LD need care in a hospital but make a full recovery. However, LD can sometimes result in lung failure or death.

Sources of exposure:

[Edit sources as appropriate for facility type:]

- *Legionella* is naturally found in freshwater environments, such as lakes and streams; however more commonly causes human infection when it grows and spreads in building water systems (e.g., hot water tanks and heaters, showerheads, sink faucets, large plumbing systems, hot tubs, cooling towers, other water sources like decorative fountains).
- *Legionella* bacteria are common in the environment and can persist unless proper steps are taken to control it.

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Community Settings—Messaging for Facilities

Messaging Purpose: Informing a facility of multiple LD community-associated cases/outbreak OR a single case with minimal/no other exposure sites (*continued*)

Required actions (as applicable):

- The [state/local public health agency] is requesting your assistance in gathering information about the cases who were at your facility.
- You should inform building staff, residents, and visitors about the LD case(s)/outbreak. [Health agency] can assist you with [and/or provide you with templates for] notifications.
- You should review your water/facility maintenance procedures to help minimize future risk.
 - Information about water system maintenance is available through the Centers for Disease Control and Prevention (CDC) at <https://www.cdc.gov/legionella/wmp/overview.html>.
- [Facility name] may need to have a water management program (WMP).
 - If [facility] does not have a WMP and it meets the characteristics outlined in ASHRAE Standard 188, it should develop and implement one. See the worksheet from CDC to identify which buildings or systems should have a WMP: <https://www.cdc.gov/legionella/wmp/toolkit/wmp-risk.html>.
 - If [facility] does not meet the characteristics outlined in ASHRAE Standard 188 indicating the need for a WMP, consider implementing elements of a WMP according to facility or device characteristics.
 - Resource documents include the CDC Water Management Program Toolkit (www.cdc.gov/legionella/wmp/toolkit/index.html) and the CSTE Water Management Program template (<https://www.cste.org/general/custom.asp?page=Legionnaires>).
- An environmental assessment of your facility by the [state/local public health agency] is necessary to determine if there is potential for ongoing risk of exposure to *Legionella*.
- *[If cases are linked to a specific device such as a decorative fountain, hot tub, or other device that aerosolizes water and there is evidence to suggest the device may be the source of the outbreak:]*
 - Remove [device] from service until [state/local public health agency] can conduct the environmental assessment.
- Upon completion of the environmental assessment, [state/local public health agency] personnel may recommend control measures as indicated by the assessment findings that your facility should undertake to mitigate any ongoing risk and prevent future *Legionella* colonization.

Communications requested:

- Thank you for your active cooperation in the [state/local health agency] investigation.
- You will be contacted by [state/local public health agency] to schedule an environmental assessment of the facility.
- In the meantime, if you have additional information and questions, or if you learn of other cases of LD among residents, staff, or visitors, regardless of where they live, please contact [name, phone, email] at the [the state/local public health agency].

Templates & Samples

See additional samples and templates in the *LDRC Toolkit Appendix*



Community Settings–Messaging for Facilities

Messaging Purpose:

- Investigation at a cooperative or compliant facility in LD community-associated case(s)/outbreak
 - Investigation is needed for public health purposes
 - Remediation is indicated per investigation findings
 - Facility is cooperative or compliant with public health requests

Purpose of communication:

- Thank you for your cooperation with the [state/local health agency] investigation of a case[s] of Legionnaires' disease (LD) in a [person OR resident/visitor/staff member] at your facility. [OR [State/local health agency] is investigating a case[s] of LD in a [person OR resident/visitor/staff member] at your facility.]
- The [state/local public health agency] has identified [number] of people/person(s) diagnosed with LD who were at your facility from [date range], which is within the LD incubation period of 2 to 14 days.
- There is reasonable cause to believe that your property is or may be colonized with *Legionella* (the bacteria that cause LD) and that it may be a threat to public health.
- An environmental assessment of your facility by [state/local public health agency] is necessary and specific response activities may be needed based on the assessment findings.

Basics about LD:

- LD is a serious form of pneumonia (lung infection) that is spread from aerosolized water (water droplets) that contains *Legionella* bacteria.
- Symptoms of LD include cough, muscle aches, fever, shortness of breath, and headache.
 - Symptoms usually start 2 to 14 days after breathing in water droplets with *Legionella*.
- LD can be treated with antibiotics.
- Most people who get LD need care in a hospital but make a full recovery. However, LD can sometimes result in lung failure or death.
- The bacteria are generally not spread from person to person.

Sources of exposure:

[Edit sources as appropriate for the facility:]

- *Legionella* is naturally found in freshwater environments, such as lakes and streams; however more commonly causes human infection when it grows and spreads in building water systems (e.g., hot water tanks and heaters, showerheads, sink faucets, large plumbing systems, hot tubs, cooling towers, other water sources like decorative fountains).

Actions required as applicable:

- The [state/local public health agency] is requesting your assistance in gathering more information about the LD case[s] who have been at the facility during [time frame].
- An environmental assessment of your facility by the [state/local public health agency] is necessary to determine if there is potential for ongoing risk of exposure to *Legionella*.

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Community Settings—Messaging for Facilities

Messaging Purpose: Investigation at a cooperative facility in LD community-associated case(s)/outbreak
(continued)

- *[If cases are linked to a specific device such as a decorative fountain, hot tub, or other device that aerosolizes water and there is evidence to suggest the device may be the source of the outbreak:]*
 - Remove [device] from service until [state/local public health agency] can conduct the environmental assessment.
- Upon completion of the environmental assessment, [state/local public health agency] personnel may recommend control measures as indicated by the assessment findings that your facility should undertake to mitigate any ongoing risk and prevent future *Legionella* colonization.
- You should inform building staff, residents, and visitors about the LD case(s)/outbreak. [Health agency] can assist you with [and/or provide you with templates for] notifications.
- You should review your water/facility maintenance procedures to help minimize future risk.
 - Information about water system maintenance is available through the Centers for Disease Control and Prevention (CDC) at <https://www.cdc.gov/legionella/wmp/overview.html>.
- [Facility name] may need to have a water management program (WMP).
 - If [facility] does not have a WMP and it meets the characteristics outlined in ASHRAE Standard 188, it should develop and implement one. See the worksheet from CDC to identify which buildings or systems should have a WMP: <https://www.cdc.gov/legionella/wmp/toolkit/wmp-risk.html>.
 - If [facility] does not meet the characteristics outlined in ASHRAE Standard 188 indicating the need for a WMP, consider implementing elements of a WMP according to facility or device characteristics.
 - Resource documents include the CDC Water Management Program Toolkit (www.cdc.gov/legionella/wmp/toolkit/index.html) and the CSTE Water Management Program template (<https://www.cste.org/general/custom.asp?page=Legionnaires>).

Communications requested:

- Thank you for your active cooperation in the [state/local health agency] investigation.
- You [will/may] be contacted by [the state/local public health agency] to schedule an environmental assessment of the facility.
- In the meantime, if you have additional information and questions, or if you learn of other cases of LD among residents, staff, or visitors, regardless of where they live, please contact [name, phone, email] at the [the state/local public health agency].

Templates & Samples

See additional samples and templates in the
LDRC Toolkit Appendix



Community Settings–Messaging for Facilities

Messaging Purpose:

- Investigation at an uncooperative or non-compliant facility identified as an exposure source in LD community-associated case(s)/outbreak
AND/OR
- Investigation is needed for public health purposes
AND/OR
- Remediation is indicated per investigation findings
 - Facility is uncooperative/non-compliant with public health requests
 - Ordering the facility to allow assessment or investigation and take actions required by law to mitigate conditions giving rise to LD
 - A decision may be made to send a final notice before issuing an order or combining the two.
- *The legal requirements for notice and an order depend on a specific jurisdiction's laws and should be followed.*

Purpose of communication:

- On [date(s)], the [state/local public health agency] contacted [facility name] because there is reasonable cause to believe that the property is or may be colonized with *Legionella* (the bacteria that causes Legionnaires' disease (LD) and that it may be a threat to public health.
- The [state/local public health agency] has identified [number of people/person(s)] diagnosed with LD who report [being at/visiting] your facility from [date range], which is within the LD incubation period of 2 to 14 days.
- [Facility] has not responded to requests to [allow an environmental assessment, perform environmental sample testing for *Legionella*, and/or has not undertaken remediation measures indicated].
- This notice is a final request to [allow an environmental assessment, perform environmental sample testing for *Legionella*, and/or undertake remediation measures] before a [health order] is issued mandating compliance.
 - [OR] [[Facility] is ordered pursuant to [cite state/local law] to allow the property to undergo an environmental assessment, perform environmental sample testing for *Legionella*, and/or take the required actions to mitigate the conditions that promote *Legionella* growth and spread].]

Sources of exposure:

[Edit sources as appropriate for setting:]

- *Legionella* is naturally found in freshwater environments, such as lakes and streams; however, it more commonly causes human infection when it grows and spreads in building water systems (e.g., hot water tanks and heaters, showerheads, sink faucets, large plumbing systems, hot tubs, cooling towers, other water sources like decorative fountains).

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Community Settings–Messaging for Facilities

Messaging Purpose: Investigation at an uncooperative or non-compliant facility identified in LD community-associated case(s)/outbreak (*continued*)

Actions required:

[Edit actions as appropriate for setting:]

- An environmental assessment of your facility by the [state/local public health agency] is necessary to determine if there is potential for ongoing risk of exposure to *Legionella*.
- *[If cases are linked to a specific device such as a decorative fountain, hot tub, or other device that aerosolizes water and there is evidence to suggest the device may be the source of the outbreak:]*
 - Remove [device] from service until [state/local public health agency] can conduct the environmental assessment.
- Upon completion of the environmental assessment, [state/local public health agency] personnel may recommend control measures as indicated by the assessment findings that your facility should undertake to mitigate any ongoing risk and prevent future *Legionella* colonization.
- Failure to comply with this [final notice] [and/or order] may result in further administrative, civil, and criminal penalties.

Communications requested:

- You [will/may] be contacted by [the state/local public health agency] to schedule an environmental assessment of the facility if you do not respond to this notice.
- In the meantime, if you have additional information and questions, or if you learn of other cases of LD among residents, staff, or visitors, regardless of where they live, please contact [name, phone, email] at the [the state/local public health agency].

Templates & Samples

See additional samples and templates in the *LDRC Toolkit Appendix*



Community Settings–Messaging for Facilities

Messaging Purpose:

- Health order to require a facility identified as an exposure source in a LD community-associated case(s)/outbreak to address and remediate *Legionella* in the facility
 - *Legal requirements for health orders will vary by jurisdiction; consult with legal counsel in drafting order*

[Note: This order may be modified with revised requirements as additional information about the community outbreak or conditions at identified source facility becomes available or initial response activities are implemented. If the facility does not comply with the initial order, additional administrative, civil, or criminal proceedings may be required.]

Introduction:

- *[Include if applicable to the facility:]* [Facility name] has been issued a [license] by the [health/other agency name] to operate a [identify type of regulated facility].
- Based on information and belief, you are the [facility owner, person in control, registered agent OR other] of [property name and address] (the “Property”).
 - If you are not the [owner, person in control, or registered agent OR other] of the Property, please contact [health agency contact name] at [phone number/email address] immediately.
- [Samples were taken from [several locations] at the Property by [state/local/other health agency name/ CDC] as part of a *Legionella* outbreak in [community name OR at the Property].
 - [Preliminary testing by [health agency/CDC] has detected the presence of *Legionella* bacteria in the Property’s [list sites, e.g., hot tub, water heater, faucet heads sinks/showers, cooling towers, decorative fountains].]
- The [health agency] has identified [case(s)/an outbreak] of legionellosis among persons at or associated with the Property.
- *[If facility failed to comply with previous required actions:]* [Facility name] failed to take previously identified required actions identified by the [health agency] [include list].

Legionella basics:

[Include basic information about Legionella as appropriate:]

- [*Legionella* bacteria can cause Legionnaires’ disease (LD) or related conditions that may adversely affect public health.]
- [People may be exposed to *Legionella* when they inhale aerosolized water droplets containing the bacteria.]
- [*Legionella* can grow in a building’s water systems or devices (e.g., hot water heaters, pipes, water storage tanks, cooling towers, decorative fountains, hot tubs).]

Statement of authority:

- Pursuant to [cite statute authorizing the public health order], this Order is being issued based on [reasonable cause OR (other legal standard specified in authorizing statute)] to believe that the Property is or may be [colonized by *Legionella* OR a source of a communicable disease] that could constitute a

[Continued next page]

Community Settings–Messaging for Facilities

Messaging Purpose: Health Order (*continued*)

threat to public health [OR other language contained in authorizing statute].

- *[Include if applicable to the facility:]* [[Cite statute authorizing regulation of facility type, or authorizing public health investigation] authorizes the [health director] to require [emergency action OR other standard in statute] to protect the health, safety, and welfare of any [occupants, persons] at [facility type].]
- In accordance with [cite statute authorizing public health investigation], the [health director] may investigate incidents of communicable disease.
 - These investigations can include assessments of buildings and conveyances and their contents and laboratory analysis of samples collected during the course of investigations [OR other similar language from applicable statute].
- Further, [pursuant to [cite statute authorizing public health action if different statute], the [health agency] may take actions necessary to protect public health, including ordering that specific measures be undertaken at the Property [OR other similar language from applicable statute].

Actions ordered:

- You are ordered to authorize entry to and submit Property to investigation by [health agency].
- The Property at issue and water systems and devices therein may not be [moved, caused to move, or allowed to move from its current location OR (other language contained in authorizing statute)] until authorization is received from the [health agency].
- The [health agency] issues this Order to [identify actions required (e.g., implement water system control measures, temporarily close property)] as [identified below OR listed in Appendix/Exhibit ____].
 - **[Note:** *required actions can be listed in the text of the order instead of an in appendix.*
- This Order will be in effect until the [health agency] determines that all components of this Order have been satisfied and there are no additional cases of legionellosis associated with the Property.
- If subsequent samples collected from the Property test positive for *Legionella* at any time, appropriate response activities should be undertaken, and this Order may be further modified or extended.
 - [If the [health agency] receives a new report of a case of legionellosis that is epidemiologically linked to the Property, a new or amended Order may be issued.]
- Failure to abide by this Order and further instructions from [health agency] may result in fines, criminal penalties, and/or other further legal action.

To contest or appeal order:

- If you object to this Order, you may [request a hearing] in the [administrative body or court name] in accordance with [statute citation].
 - **[Note:** *Include information about your jurisdiction's administrative procedures and judicial processes available for contesting or appealing the order.*

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Community Settings–Messaging for Facilities

Messaging Purpose: Health Order (*continued*)

Contact information and signatures:

- If you have any questions, information, or concerns, please contact [health agency contact name] at [phone number/email address] immediately.
- This Order is issued under my authority as the [health director or other official's title] for the [jurisdiction or health agency] on this [date] day of [month and year].
 - [Signature block for health/other official]

Proof of service:

- [I hereby certify that this Order was served [by mail/posting/in-hand/(other)] to the above-named individual and upon the establishment listed above.]
- [Date] at [time AM/PM] by [signature and print name of person serving order].

APPENDIX OR EXHIBIT LANGUAGE

The [health agency] orders you to take the following required actions associated with the Property:

[Note: The required actions in a particular scenario will depend on the type of source facilities identified and the specific water systems/devices in which Legionella has been detected. Broadly, required actions can be identified as administrative, disease surveillance, required notifications, environmental health, and other required actions.

The required actions listed below are examples of some types of action that can be ordered. They are intended for illustrative purposes only and are not a complete list of all appropriate required actions.]

Administrative required actions:

- Immediately notify the [health agency program or contact person name] at [contact information] if you or personnel at the Property are unable to comply with any of the identified required actions.

Disease surveillance required actions:

- Immediately notify the [health agency program, contact person name, OR agency disease reporting line] at [contact information] of any probable, suspect, or confirmed cases of legionellosis and any known [persons, residents, visitors, staff, contractors, or volunteers] exhibiting any symptoms compatible with legionellosis.

Notification required actions:

Provide written notice

- Immediately provide the [attached] public health notice from the [health agency] to all [persons,

[Continued next page]

Community Settings–Messaging for Facilities

Messaging Purpose: Health Order (*continued*)

residents, visitors, staff, and volunteers] at the Property.

- The information in the public health notice should be communicated to all current [persons, residents, visitors, staff, and volunteers] and those who visited or occupied the Property [before [date] OR between dates of ____ and ____].
- Immediately notify all [persons, residents, visitors, staff, and volunteers] at [the time of entry OR identify date, time or event], using documents provided by the [health agency], of the *Legionella* outbreak occurring at the Property.

Post notice

- The public health notice or other signage provided by the [health agency] should be posted at all entries to the Property, on the front entrance, and placed within view of [persons, residents, visitors, staff, and volunteers] at the [front desk, foyer, reception area, etc.] of the Property.
 - The public health notice should also be posted in staff areas of the Property.
 - A copy of the public health notice shall also be given to all [persons, residents, visitors, staff, and volunteers].

Record of notice

- You are advised to retain documentation that each notification was made.
- [Records of notification shall be provided to the [health agency].]

Environmental health required actions:

[Note: Environmental health required actions will vary depending on the identified source facility, the water systems/devices involved, the extent of *Legionella* colonization, and the regulatory authority/policies of the health agency. The items below are samples of possible environmental health required actions. **These items are examples only and not an exhaustive list of appropriate actions.**]

Retain consultant to assess water systems

- *Example 1:* Within [72, 48 OR ____] hours of this Order, hire at your own expense the services of a *Legionella* consultant or environmental consulting firm to assess the Property's water systems.
- *Example 2:* Retain the services of an environmental consultant who is both (1) able to develop and implement an ASHRAE 188-compliant water management program (WMP) and (2) capable of *Legionella* environmental testing at an ELITE member laboratory (or able to subcontract with such a laboratory).
 - The chosen consultant must be reviewed and approved by the [health agency] prior to conducting any assessments or services. The deadline for complying with this provision is [date].]
 - If the Property's contract with the consultant terminates early for any reason, then the Property must immediately implement and maintain an ASHRAE 188-compliant WMP with another environmental consultant that meets the same criteria above for selection of the initial consultant.

[Continued next page]

Community Settings–Messaging for Facilities

Messaging Purpose: Health Order (*continued*)

Perform environmental assessment/develop environmental sampling plan

- *Example 1:* Within [24 OR ____] hours of hire, have an assessment performed by the consultant and provide the [health agency] with a written summary of actions taken toward remediation at least every [48 OR ____] hours.
- *Example 2:* Direct the consultant to contact [health agency contact name] at [contact information] within [24 hours OR ____] of the consultant's selection to determine the actions necessary for developing the Property's *Legionella* sampling plan.
 - Submit the sampling plan to [health agency contact name] at [contact information] within [7 days OR ____] of selecting the consultant.
 - Within [48 hours OR ____] of sampling plan approval by the [health agency], perform all *Legionella* sampling tests in accordance with the sampling plan.

Remediation plan

- *Example 1:* In response to any positive *Legionella* sample results, [and if directed so by the [health agency],] prepare and submit for approval a remediation plan that addresses [, but is not necessarily limited to,] the following:
 - A short-term remediation plan, to be submitted within [72 hours OR ____], describing methods and corrective actions for controlling the risks of legionellosis from the Property's water system. The short-term remediation plan must be substantially implemented within [96 hours OR ____] of approval by the [health agency].
 - A long-term prevention plan describing the water system management and the ongoing operational methods for controlling and monitoring the growth of *Legionella* within the Property's water systems and devices. A draft of the plan must be presented to the [health agency] no later than [30 days OR ____] after being directed to complete a plan.

Conduct response activities

- *Example 1:* Initiate remediation actions within [24 OR ____] hours of hiring the environmental consultant.
- *Example 2:* Increase the temperatures of water heaters on the property to a minimum of [140 OR ____] degrees Fahrenheit, while following local and state anti-scald regulations. The deadline for complying with this provision is [date].
- *Example 3:* Restrict the use of tap water at the Property and use bottled water until [facility] can provide satisfactory proof to the [health agency] that [0.2-micron biological OR ____] point of use filters are installed on all showerheads, sink and tub faucets, and other water sources intended for use in the facility.

Testing water systems/devices for *Legionella*

- *Example 1:* The Property's water system shall be tested for *Legionella* according to the investigation sampling plan devised by [Property OR consultant name] to verify the effectiveness of treatment of the Property's water system.

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Community Settings–Messaging for Facilities

Messaging Purpose: Health Order *(continued)*

- *Example 2:* The WMP shall require testing according to the investigation sampling plan for *Legionella* using traditional spread-plate culture methods, that testing be performed at least quarterly, and that the investigation sampling plan shall remain in place [through the termination date of this Order].
- *Example 3:* At a minimum, each set of tests performed as part of the investigation sampling plan shall include a representative sample of the building’s water system, including but not limited to the following locations: *[edit as appropriate: distal, medial, and proximal locations from the water distribution system, hot water heaters, devices that use water, cooling towers]*.
- *Example 4:* Provide results of all water testing to [health agency contact name] within [one business day OR (other timeframe)] of receipt via email [OR other method] to [email address/other].
- *Example 5:* Perform ongoing *Legionella* testing to confirm remediation and report results to the [health agency] as they become available.

Other required actions:

- [Additional information regarding feasible, required technical actions to be implemented will be provided to you in a timely manner.]

Templates & Samples

See additional samples and templates in the *LDRC Toolkit Appendix*



Community Settings–Messaging for Facilities

Messaging Purpose:

- Providing general information about LD risks, mitigation, and prevention to persons in a community
 - May be adapted into messages for patrons, staff, visitors, and others at facilities or locales during a community-associated LD investigation
 - Contents should also be tailored for the specific kind of facility or locale, if known

Overview:

- Legionnaires' disease (LD) is a form of pneumonia (lung infection) caused by *Legionella* bacteria.

Sources of exposure:

- *Legionella* bacteria can occur in freshwater environments and in water systems in built environments.
- *Legionella* grows well in warm water and can multiply in large or complex water systems, like those found in [office and educational buildings, retail and industrial facilities, and places of worship OR facility/locale name if known].
- [Edit sources as appropriate for facility type:] Likely sources of exposure in a facility include water in sinks and showers (and other potable water), cooling towers, hot water heaters, medical and therapeutic equipment, hot tubs, pools, and decorative fountains.
- People can become sick when they breathe in mist from a water source (e.g., shower) that contains *Legionella*.
- LD cannot normally be spread from person to person.

Persons at risk:

- Most healthy people do not get LD after being exposed to *Legionella*.
- Being 50 years or older or having certain risk factors such as being a current or former smoker, having chronic lung disease, having a weakened immune system, or taking medication that weakens the immune system can increase the chances of getting LD.

Signs and symptoms:

- Symptoms of LD include cough, muscle aches, fever, shortness of breath, and headache.
- Symptoms usually start 2 to 14 days after breathing in mist or water droplets that contain *Legionella*.
- Symptoms of LD may be similar to those of other respiratory diseases, such as COVID-19. It is important that people discuss the potential for LD with their doctors because the treatment for LD is different than for COVID-19.
- LD is diagnosed using chest x-rays or physical exams to check for pneumonia and tests for infection with *Legionella*.

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Community Settings–Messaging for Facilities

Messaging Purpose: General information about LD risks for persons in a community (*continued*)

Treatment:

- LD is treated with antibiotics (drugs that kill bacteria in the body).
- Most people who get LD need care in a hospital but make a full recovery. However, LD can sometimes result in lung failure or death.

Mitigation and prevention for individuals:

- If you have one of the risk factors above, take these extra steps as a precaution:
 - Do not take a shower (hot or cool) since it creates mist. Take a bath instead. Fill the tub slowly to reduce splashing and water mist, and minimize time in the bathroom while the tub is filling.
 - You may wash dishes but fill the sink slowly to avoid creating mist.
 - It is okay to drink cold water from the tap but start with cold water when heating water for tea, coffee, or cooking.
- Speak with your doctor about other precautions they may recommend.
- *[For all community members, regardless personal risk factors:]* Review CDC materials about preventing waterborne disease at home: <https://www.cdc.gov/healthywater/drinking/preventing-waterborne-germs-at-home.html>.
- *[See “Providing General Information to Persons about LD Prevention Measures in Households” template in this module for additional prevention ideas.]*

Contact information:

- Please contact [name, phone number, and email address of person/office] at the [facility] for more information or if you have questions.
- Further information is also available from the [state/local health agency and/or CDC website].

Templates & Samples

See additional samples and templates in the *LDRC Toolkit Appendix*



Community Settings–Messaging for Facilities

Messaging Purpose:

- Providing general information about LD risks, mitigation, and prevention for facility engineering and maintenance staff
 - Can be adapted into messages for facility engineering, maintenance, and environmental health staff during a community-associated LD investigation

Basics about LD:

- Legionnaires' disease (LD) is a serious form of pneumonia (lung infection) that is spread from aerosolized water (water droplets) that contains *Legionella* bacteria.
- Symptoms of LD can include cough, muscle aches, fever, shortness of breath, and headache.
 - Symptoms usually start 2 to 14 days after breathing in water droplets that contain *Legionella*.
- Most healthy people do not get LD after being exposed to *Legionella*.
 - Being 50 years or older or having certain risk factors such as being a current or former smoker, having chronic lung disease, having a weakened immune system, and taking medication that weakens the immune system can increase the chances of getting LD.
- LD can be treated with antibiotics. Most people who get LD need care in a hospital but make a full recovery. However, LD can sometimes result in lung failure or death.
- The bacteria are generally not spread from person to person.

Sources of exposure:

- *Legionella* can be found in freshwater environments and in water systems in built environments.
- *Legionella* grows well in warm water and can multiply in large or complex water systems, like those found in office and educational buildings, and retail and industrial facilities. Common sources of exposure also include hospitals and hotels.
 - Likely sources of exposure in a facility include water in sinks and showers, cooling towers, hot water heaters, hot tubs, and decorative fountains [edit sources as appropriate for setting].
- *Legionella* bacteria are common in the environment and can persist unless proper steps are taken to prevent its growth and spread.

Investigation:

- An environmental assessment can help determine if there are conditions and devices that could promote *Legionella* growth and spread.
- Testing environmental samples from the facility's water systems for *Legionella* can help to determine if a facility or device is [potentially] colonized with the bacteria.

Mitigation:

- Water systems that are suspected to be colonized with *Legionella* should undergo response activities.
 - [Cleaning and other response activities may be [requested/required] by [state/local health agency] to address an [ongoing community-associated] LD outbreak even if a source of infection has not yet been determined.]

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Community Settings–Messaging for Facilities

Messaging Purpose: General information to engineering staff (*continued*)

- Recommended mitigation measures may include:
 - Flushing of the facility’s water systems.
 - Installation of point-of-use filters on water fixtures in staff and public areas.
 - Restricting use of water that cannot be filtered.
 - Determining adherence to the facility’s water management program (WMP).
 - Ensuring that routine or investigative environmental sampling is conducted and reviewing results.
 - Working with the facility to optimize the WMP and reduce the risk of [and control] *Legionella* growth.
 - Installation of supplemental disinfection systems in water systems throughout the facility.
 - Working with the facility to address identified deficiencies.
 - Determining if the deficiencies have been properly addressed.

Prevention:

- To prevent *Legionella* growth, building water systems should be properly monitored and maintained.
- Many community facilities should consider having a water management program (WMP).
 - If the facility does not have a WMP and it meets the characteristics outlined in ASHRAE Standard 188, it should develop and implement one. See the worksheet from CDC to identify which buildings or systems should have a WMP: <https://www.cdc.gov/legionella/wmp/toolkit/wmp-risk.html>.
 - Resource documents include the CDC Water Management Program Toolkit (www.cdc.gov/legionella/wmp/toolkit/index.html) and the CSTE Water Management Program template (<https://www.cste.org/general/custom.asp?page=Legionnaires>).

Contact information:

- Please contact [name, phone number, and email address of person/office] at the [state/local health agency or other agency] if your facility tests positive for *Legionella*, you learn of [any/other] cases of LD, or for more information or questions.

Templates & Samples

See additional samples and templates in the *LDRC Toolkit Appendix*



Community Settings–Messaging for Persons

Messaging Purpose:

- Notice or letter to persons about LD community-associated case(s)/outbreak
 - Letter can be adapted for the public health agency or the facility to give to guests/visitors

Purpose of communication:

- The [state/local health agency] has identified people with Legionnaires' disease (LD) who were likely exposed to the bacteria that cause this illness in the [geographic area and/or facility] during [timeframe if known] within the LD incubation period of 2 to 14 days.
- LD is a potentially serious form of pneumonia (lung infection) caused by *Legionella* bacteria.

Basics about LD:

- LD is spread from aerosolized water (water droplets) that contains *Legionella*.
- The bacteria are generally not spread from person to person.
- Most healthy people do not get LD after being exposed to *Legionella*.
 - Being 50 years or older or having certain risk factors such as being a current or former smoker, having chronic lung disease, having a weakened immune system, and taking medication that weakens the immune system can increase the chances of getting LD.
- Symptoms of LD can include cough, muscle aches, fever, shortness of breath, and headache.
 - Symptoms usually start 2 to 14 days after breathing in water droplets that contain *Legionella*.
 - Symptoms of LD may be similar to those of other respiratory diseases, such as COVID-19. It is important to discuss the potential for LD with your doctor because the treatment for LD is different than for COVID-19.
- LD is diagnosed using chest x-rays or physical exams to check for pneumonia and tests for infection with *Legionella*.
- LD can be treated with antibiotics. Most people who get LD need care in a hospital but make a full recovery. However, LD can sometimes result in lung failure or death.

Sources of exposure:

- *Legionella* is naturally found in freshwater environments, such as lakes and streams. It can also be present in community water systems; however, it more commonly causes human infection when it grows and spreads in building water systems and devices with conditions favorable for growth and spread (e.g., hot water tanks and heaters, showerheads, hot tubs, decorative fountains, cooling towers).
- The [state/local health agency] is working with potential sources in [geographic area] to test for *Legionella* and disinfect systems as recommended or required.

Suggested actions:

- You should monitor your health: if you develop[ed] the symptoms of LD within two weeks (14 days) of being at [location/facility], please seek medical attention right away.
- Please also show this letter to your doctor so they know to test you for LD as indicated by your

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Community Settings–Messaging for Persons

Messaging Purpose: Letter to persons about LD community-associated case(s)/outbreak (*continued*)

symptoms.

- Ask your doctor to test you with a urine test and a respiratory (sputum/phlegm) culture or PCR before administering antibiotics.
- If you test positive, ask your doctor to report your illness to [health agency] immediately.
- [While the investigation is underway, out of an abundance of caution, [state/local health agency] recommends that people who are at increased risk for severe disease from *Legionella* consider postponing their visit to the [location/facility].]
- *[If there is concern about potential involvement of community water systems or drinking water systems within a particular community facility:]* In the meantime, if you have one of the risk factors above, take these extra steps as a precaution:
 - Do not take a shower (hot or cool) since it creates mist. Take a bath instead. Fill the tub slowly to reduce splashing and water mist, and minimize time in the bathroom while the tub is filling.
 - You may wash dishes but fill the sink slowly to avoid creating mist.
 - It is okay to drink cold water from the tap but start with cold water when heating water for tea, coffee, or cooking.
 - Speak with your doctor about other precautions they may recommend.
- *[For all community members, regardless personal risk factors:]* Review CDC materials about preventing waterborne disease at home: <https://www.cdc.gov/healthywater/drinking/preventing-waterborne-germs-at-home.html>.
- *[See “Providing General Information to Persons about LD Prevention Measures in Households” template in this module for additional prevention ideas.]*

Contact information:

- Please contact [name, phone number, and email address of person/office] at the [state/local health agency] for more information or if you have questions.

Templates & Samples

See additional samples and templates in the *LDRC Toolkit Appendix*



Community Settings–Messaging for Persons

Messaging Purpose:

- Notice or letter to persons about LD community-associated cases(s)/outbreak with suspected cooling tower or similar point source implicated

Purpose of communication:

- The [state/local health agency] has identified [number] people with Legionnaires' disease (LD) in [identify geographic area/facility vicinity].
- Mist from [cooling towers [and/or] evaporative condensers associated with air conditioning and industrial cooling] on buildings in the [suspected geographic area and/or facility] is suspected to be the source of exposure to *Legionella*.
- LD is a potentially serious form of pneumonia (lung infection) caused by *Legionella* bacteria.

Basics about LD:

- LD is spread from aerosolized water (water droplets) that contains *Legionella*.
- The bacteria are generally not spread from person to person.
- Most healthy people do not get LD after being exposed to *Legionella*.
 - Being 50 years or older or having certain risk factors such as being a current or former smoker, having chronic lung disease, having a weakened immune system, and taking medication that weakens the immune system can increase the chances of getting LD.
- Symptoms of LD can include cough, muscle aches, fever, shortness of breath, and headache.
 - Symptoms usually start 2 to 14 days after breathing in water droplets that contain *Legionella*.
 - Symptoms of LD may be similar to those of other respiratory diseases, such as COVID-19. It is important to discuss the potential for LD with your doctor because the treatment for LD is different than for COVID-19.
- LD is diagnosed using chest x-rays or physical exams to check for pneumonia and tests for infection with *Legionella*.
- LD can be treated with antibiotics. Most people who get LD need care in a hospital but make a full recovery. However, LD can sometimes result in lung failure or death.

Sources of exposure:

- *Legionella* is naturally found in freshwater environments, such as lakes and streams. It can also be present in community water systems; however, it more commonly causes human infection when it grows and spreads in building water systems and devices with conditions favorable for growth and spread (e.g., hot water tanks and heaters, showerheads, hot tubs, decorative fountains, cooling towers).
- Cooling towers are often part of the centralized air-cooling system for buildings or industrial processes that contain water and fans to remove heat from the air.
 - If cooling towers are not properly maintained, they can create water droplets containing *Legionella*. Fans in the cooling towers can then spread *Legionella* to neighboring areas in the community.
 - Home and car air-conditioning units do not use water to cool the air, so they are not a risk for

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Community Settings–Messaging for Persons

Messaging Purpose: Letter to persons about LD community-associated cases(s)/outbreak with suspected cooling tower or similar point source implicated (*continued*)

Legionella growth or spread.

- The [state/local health agency] is working with potential sources in [geographic area] to test for *Legionella* and clean and disinfect systems as recommended or required.

Suggested actions:

- You should monitor your health: if you develop[ed] the symptoms of LD within two weeks (14 days) of being at [location/facility], please seek medical attention right away.
- Please also show this letter to your doctor so they know to test you for LD as indicated by your symptoms.
 - Ask your doctor to test you with a urine test and a respiratory (sputum/phlegm) culture or PCR before administering antibiotics.
- If you test positive, ask your doctor to report your illness to [health agency] immediately.
- Speak with your doctor about other precautions they may recommend.
- [While the investigation is underway, out of an abundance of caution, [state/local health agency] recommends that people who are at increased risk for severe disease from *Legionella* consider postponing their visit to the [location/facility].]
- Review CDC materials about preventing waterborne disease at home: <https://www.cdc.gov/healthywater/drinking/preventing-waterborne-germs-at-home.html>.

Contact information:

- Please contact [name, phone number, and email address of person/office] at the [state/local health agency] for more information or if you have questions.

Templates & Samples

See additional samples and templates in the *LDRC Toolkit Appendix*



Community Settings–Messaging for Persons

Messaging Purpose:

- Providing general information to persons about LD prevention measures in households if LD case(s)/outbreak identified in a geographic area

Basics about LD:

- Legionnaires' disease (LD) is a potentially serious form of pneumonia (lung infection) caused by *Legionella* bacteria.
- LD is spread from aerosolized water (water droplets) that contains *Legionella*.
- The bacteria are generally not spread from person to person.
- Most healthy people do not get LD after being exposed to *Legionella*.
 - Being 50 years or older or having certain risk factors such as being a current or former smoker, having chronic lung disease, having a weakened immune system, and taking medication that weakens the immune system can increase the chances of getting LD.
- Symptoms of LD can include cough, muscle aches, fever, shortness of breath, and headache.
 - Symptoms usually start 2 to 14 days after breathing in water droplets that contain *Legionella*.
 - Symptoms of LD may be similar to those of other respiratory diseases, such as COVID-19. It is important to discuss the potential for LD with your doctor because the treatment for LD is different than for COVID-19.
- LD is diagnosed using chest x-rays or physical exams to check for pneumonia and tests for infection with *Legionella*.
- LD can be treated with antibiotics. Most people who get LD need care in a hospital but make a full recovery. However, LD can sometimes result in lung failure or death.

Sources of exposure:

- *Legionella* is naturally found in freshwater environments, such as lakes and streams. It can also be present in municipal/community water systems; however, it more commonly causes human infection when it grows and spreads in building water systems and devices with conditions favorable for growth and spread (e.g., hot water tanks and heaters, showerheads, hot tubs, decorative fountains, cooling towers, evaporative cooling systems).
- [There is no indication that municipal/community water supplies are currently involved in an LD outbreak; this information is to help people take action to prevent the growth and spread of *Legionella* in their residences.]

Precautions if LD case(s)/outbreak identified in a geographic area:

- If you have one of the risk factors above, take these extra steps as a precaution [*edit as needed*]:
 - Do not take a shower (hot or cool) since it creates mist. Take a bath instead. Fill the tub slowly to reduce splashing and water mist, and minimize time in the bathroom while the tub is filling.
 - You may wash dishes but fill the sink slowly to avoid creating mist.
 - It is okay to drink cold water from the tap but start with cold water when heating water for tea, coffee, or cooking.

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Community Settings–Messaging for Persons

Messaging Purpose: Providing general information to persons about LD prevention measures in households
(continued)

- Speak with your doctor about other precautions they may recommend.

Preventing Legionella growth and spread in household water sources:

- These practices can help reduce *Legionella* growth in household water systems [edit as needed]:
 - Let your faucets and showers run for at least 3 minutes when they have been out of use for more than a week. Minimize exposure to splashing and mist generation, for example, leaving the room while the water is running.
 - Thoroughly clean or replace your shower head and faucet aerators (screens) whenever buildup is visible.
 - Maintain your hot water tank according to manufacturer’s recommendations, which may include draining and flushing. Consider hiring a licensed plumber to perform this task.
 - Clean or replace all water filters per manufacturer’s instructions, such as whole house (e.g., water softeners) and point-of-use filters (e.g., built-in sink or refrigerator filters).
 - Remove, shorten, or regularly flush plumbing dead legs (a section of pipe capped off with little to no water flow). For future renovations, ensure your plumber avoids creating dead legs.
 - A hotter water temperature of 130–140°F can kill many harmful germs, but also increases the risk of scalding. If you set the water heater above 120°F, make sure you take extra precautions to mix cold and hot water (using thermostatic valves) at the faucet or shower to avoid scalding. This is especially important if young children, older adults, or other people at increased risk of scalding live in your home.
 - Medical devices and portable humidifiers should be operated, cleaned, and disinfected per manufacturer’s instructions. Do not use tap water if sterile water is recommended.
 - Drain garden hoses and shut off the water line when not in use for the season.
 - Maintain chemical levels in your hot tub per manufacturer’s recommendations.
 - Avoid high-risk activities. If you are at increased risk for LD, consider avoiding hot tubs, power washing, or similar activities, which may generate increased amounts of aerosols or mist.
- Review CDC materials about preventing waterborne disease at home: <https://www.cdc.gov/healthywater/drinking/preventing-waterborne-germs-at-home.html>.

Contact information:

- Please contact [name, phone number, and email address of person/office] at the [state/local health agency] for more information or if you have questions.

Templates & Samples

See additional samples and templates in the
LDRC Toolkit Appendix



Community Settings–Messaging for Persons

Messaging Purpose:

- Letter or memo to staff about LD case(s)/outbreak and public health investigation
 - Staff can include employees, volunteers, and contractors
 - Can be issued by facility or by public health agency

Purpose of communication:

- The [state/local health agency] has identified [number] people with Legionnaires' disease (LD) who were likely exposed to the bacteria that cause this illness in the [suspected geographic area and/or facility].
- LD is a potentially serious form of pneumonia (lung infection) that is spread from aerosolized water (water droplets) that contains *Legionella* bacteria.
- [[Facility name] is cooperating with the [state/local health agency] investigation of potential sources of exposure to *Legionella*.]
- This message is to provide you with information about LD and to inform you about the steps being taken to address any health concerns.

Sources of exposure:

- *Legionella* can occur in freshwater environments and in water systems in built environments.
- *Legionella* grow well in warm water and can multiply in large or complex water systems, like those found in [facility name]. Sources of exposure can include water used for showering, hot water heaters, hot tubs, decorative fountains, cooling towers, and commercial and industrial processes.
- People can become sick when they breathe in mist from a water source containing *Legionella*.
- LD cannot normally be spread from person to person.

Persons at risk:

- Most healthy people do not get LD after being exposed to *Legionella*.
- Being 50 years or older or having certain risk factors such as being a current or former smoker, having chronic lung disease, having a weakened immune system, or taking medication that weakens your immune system can increase the chances of getting LD.

Signs, symptoms, and treatment:

- Symptoms of LD can include cough, muscle aches, fever, shortness of breath, and headache.
- Symptoms usually start 2 to 14 days after breathing in mist or droplets that contain *Legionella*.
- Symptoms of LD may be similar to those of other respiratory diseases, such as COVID-19. It is important to discuss the potential for LD with your doctor because the treatment for LD is different than for COVID-19.
- LD can be treated with antibiotics and will likely require hospitalization. However, LD can sometimes result in lung failure or death.

Action being taken:

- [Edit response as applicable:] To ensure that staff, visitors, and others are protected while possible

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Community Settings–Messaging for Persons

Messaging Purpose: Letter or memo to staff about LD case(s)/outbreak and public health investigation (*continued*)

sources of *Legionella* exposure are being investigated, [facility] will continue to work with [state/local health agency] to take appropriate actions to protect the health of staff, visitors, and others [and to disinfect the water system, as needed].

- *[Edit response as applicable:]* Staff (employees, volunteers, and contractors) who have or are experiencing symptoms of LD during [timeframe] should seek medical attention immediately.
- [Facility name] will also contact staff who took sick leave during this time.
- [We are also offering staff [counseling and/or] information services. If you would like to use these services or want more information, contact [your manager/name].]

Action requested:

- If you are not sick, there is no need for you to see a doctor.
- If you are at increased risk for getting LD based on the risk factors listed above and are concerned about getting sick, or if you are currently or become sick with a cough, muscle aches, fever, shortness of breath, or headache, see your private healthcare provider right away or contact [name/office] to arrange to see a doctor.
 - Tell the doctor that you work in a facility where there has been a [case/outbreak] of LD so they can test you for LD if indicated by your symptoms.
 - If you test positive, ask your doctor to report your illness to [health agency] immediately.
 - Speak with your doctor about any other precautions they may recommend.
- If you see a doctor, notify [name/office] so our [facility] can track your illness.
- If you have any concerns or questions, please discuss them with [your manager/name].

Contact information:

- Please contact [name, phone number, and email address of person/office] at the [state/local health agency] for more information or if you have questions.

Templates & Samples

See additional samples and templates in the
LDRC Toolkit Appendix



Community Settings–Messaging for Healthcare Providers and Facilities

Messaging Purpose:

- Alert to healthcare providers about LD case(s)/outbreak in a community setting

Purpose of communication:

- [State/local public health agency] has confirmed [number] person[s] with Legionnaires' disease (LD) associated with [geographic area and/or facility].
- The persons with LD were likely exposed to *Legionella* bacteria during [timeframe] based on clinical symptoms and the incubation period of LD.
- The [state/local public health agency] is working [with facility name/facilities in the area], [in conjunction with the CDC,] to identify potential sources of exposure and mitigate risk of additional cases.

Action required:

- Healthcare providers should report probable, suspect, and confirmed cases of LD to the [state/local public health agency] as soon as possible.
- *[Include jurisdiction-specific notifiable disease reporting requirements and processes for Legionella/ legionellosis.]*

Action requested:

- Healthcare providers should consider LD when evaluating patients with community-acquired pneumonia:
 - Ask patients about residence, visits, or work at [geographic area/facility] within the 14 days prior to symptom onset.
 - Also ask patients about any healthcare visits (inpatient and outpatient), travel (including local travel), or possible exposure to other community sources of *Legionella* in the 14 days prior to symptom onset.
 - Keep in mind that the initial presentation of LD may be similar to other respiratory diseases, such as COVID-19, and prompt identification of *Legionella* infection can inform antibiotic treatment.
- Diagnostic testing for LD should include both urinary antigen and culture or PCR of lower respiratory secretions before treatment is administered. Lower respiratory specimens should be collected even if antibiotic therapy has been initiated.
 - Lower respiratory specimens (e.g., sputum, bronchoalveolar lavage) should be collected and frozen. [It may be possible to perform additional *Legionella* testing on lower respiratory specimens even if they do not test positive by culture or PCR.]
 - Isolation of *Legionella* by culture or PCR is important for public health investigation.
 - Molecular techniques can be used to compare clinical isolates to environmental isolates and confirm the outbreak source.
 - [Cultured specimens from patients who reported exposure to the geographic area or facility under investigation should be retained for potential additional testing at [the state public health laboratory].]
- *[Note if state PH laboratory is available to support testing (may not be applicable in some jurisdictions).]*

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Community Settings–Messaging for Healthcare Providers and Facilities

Messaging Purpose: Alert to healthcare providers about LD case(s)/outbreak in a community setting (*continued*)

- See [state/local public health agency at [website] for additional information.
- Additional treatment information is available on the CDC website at <https://www.cdc.gov/legionella/clinicians.html>.

Contact information:

- Please contact [name, phone number, and email address of person/office] at the [state/local health agency] for more information or to answer questions.

Templates & Samples

See additional samples and templates in the *LDRC Toolkit Appendix*



Community Settings–Messaging for Other Agencies and Governments

Messaging Purpose:

- Alert to other divisions, agencies, or units of government about LD case(s)/outbreak in a community setting

Overview:

- [State/local public health agency] is investigating [number] confirmed case[s] of Legionnaires' disease (LD).
- Persons with LD were likely exposed to *Legionella* [during/since timeframe] at [geographic area/facility].
- [The [state/local public health agency] is sending notification letters to persons who are known to have [been/stayed/worked/visited] at [suspected source area/facility] during/since [timeframe] [based on [facility's records].]
- Affected persons reside in or visited ([list jurisdiction(s)]).
 - Investigation of any suspected illness identified through this notification will be communicated and coordinated with the respective state or [or other jurisdictions'] health departments.
- Additional potential cases [are/may be] under investigation.

Potential sources and dates of exposure:

- The [number] confirmed case[s] of LD report [identify potential source(s) of exposure at] [number] different locations around [geographic area] [including stay/work/visit at [facility]].
- [Include other details that lead PH agency to believe there is an outbreak as appropriate, such as:]
 - [More specifics about locations and timeframe of exposure(s)]
 - [Baseline case counts]
 - [Percentage increase in the number of cases compared to average cases at the same time for the five years prior]
 - [Other information that may point toward or away from specific sources, for example:]
 - [Cases tightly clustered may point to a smaller source]
 - [Larger geographic distribution may point to one or more cooling towers]
 - [Lack of cases across a water distribution system may lessen concern for drinking water source]
 - [Other investigation-specific details that may be helpful to share]
- Illness onset dates range from [date] to [date].
- The [state/local public health agency] is currently working to identify the source of these infections and mitigate the risk of additional cases.

Clinical and laboratory:

- All persons' illnesses were diagnosed by [identify diagnostic methods such as *Legionella* urinary antigen testing and respiratory (sputum/phlegm) culture or PCR].
- [Number] cases were hospitalized and [no/number] deaths have been reported [as of/since] [date].

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Community Settings–Messaging for Other Agencies and Governments

Messaging Purpose: Alert other divisions, agencies, or units of government about cases/outbreak in a community setting (*continued*)

Action requested:

- Whenever possible, diagnostic testing of persons with community-acquired pneumonia should include collection of urine for antigen testing and lower respiratory specimens for culture or PCR of *Legionella* before antibiotics are administered.
 - Lower respiratory specimens should be collected even if antibiotic therapy has been initiated.
 - Lower respiratory specimens (e.g., sputum, bronchoalveolar lavage) should be collected and frozen. [It may be possible to perform additional *Legionella* testing on lower respiratory specimens even if they do not test positive by culture or PCR.]
 - Isolation of *Legionella* by culture or PCR is important for public health investigation. Molecular techniques can be used to compare clinical isolates to environmental isolates and confirm the outbreak source.
 - [If possible, isolates obtained should be saved/stored appropriately (rather than discarded) to allow [public health agency/laboratory] to conduct molecular comparisons if needed.] [OR [If isolates are obtained, the [public health agency/laboratory] should be consulted for coordination of/next steps related to molecular comparisons.]
- The [state/local public health agency] is requesting that state and local health departments examine reports of suspect or confirmed cases of legionellosis to determine whether any could be associated with residence, travel, work or visit to [geographic area/facility] since [date/timeframe].

Contact information:

- Public health officials [and other officials] who identify suspect or confirmed cases of LD among persons with a similar residence, travel, work or visit history and illness onsets within 14 days are asked to contact [name, phone number, and email address of person/office] at the [state/local health agency].

Templates & Samples

See additional samples and templates in the *LDRC Toolkit Appendix*



- Alert to municipal water suppliers about possible link to LD case(s)/outbreak in a community setting
 - For use by public health officials if a cooling tower or other common source of exposure has not been identified in a community outbreak and they have reason to believe that municipal water may be involved in LD case(s)/outbreak in a community

- The [state/local health agency] has identified [number] persons with Legionnaires' disease (LD) who were likely exposed to the bacteria that cause this illness in the [suspected geographic area and/or facility] during [timeframe].
- This message is to provide you with information about LD and to request your assistance in identifying any potential links between municipal water sources and the community-associated LD case(s)/outbreak.

- LD is a potentially serious form of pneumonia (lung infection) caused by *Legionella* bacteria; it generally does not spread from person to person.
- *Legionella* can be found in freshwater environments and in water sources in built environments.
- *Legionella* grows well in warm water and can multiply in large or complex water systems.
- Sources of exposure can be water used for showering, hot water heaters, hot tubs, decorative fountains, cooling towers, and commercial and industrial processes.
- People can become sick when they breathe in mist from a water source that contains *Legionella*.
- Changes in municipal water quality or water main breaks and construction may create changes in water quality and pressure that can produce conditions conducive to *Legionella* growth within water distribution systems and in facilities and equipment using municipal water.

- The [state/local public health agency] is currently working to identify the source(s) of these infections and mitigate the risk of additional cases.
- Affected persons reside in or visited ([list jurisdiction(s)]).
 - Investigation of any suspected sources or illness identified through this notification will be communicated and coordinated with the respective state or [or other jurisdictions'] health departments.
- [Additional potential cases are under investigation.]

- [State/local public health agency] is requesting that municipal water suppliers [OR municipal water supplier name(s)] review the utility's water treatment records to determine whether any conditions in water supplies occurred since [date/timeframe].

CSTE-LEGIONNAIRES' DISEASE RISK COMMUNICATION TOOLKIT

Community Settings–Messaging for Other Agencies and Governments

Messaging Purpose: Alert to municipal water suppliers about possible link to LD case(s)/outbreak in a community setting (*continued*)

- Records may be reviewed for:
 - Any changes that may have preceded the increase in cases, such as changes in treatment processes or annual free chlorine burn.
 - Water quality measurement trends that may indicate changes in water quality.
 - Water quality parameter values that may be favorable for *Legionella* growth but still within drinking water regulation compliance.
- Areas identified as conducive for or likely to promote *Legionella* can be addressed to improve water quality even if the water currently meets regulatory requirements.

Contact information:

- Municipal water officials [and other officials] who identify water supply changes potentially conducive for *Legionella* are asked to contact [name, phone number, and email address of person/office] at the [state/local health agency].

Templates & Samples

See additional samples and templates in the *LDRC Toolkit Appendix*



Community Settings—Messaging for Media and the Public

Messaging Purpose:

- Press release/alert to the media and public about LD case(s)/outbreak in a community setting

Overview:

- The [state/local public health agency] has identified [number] case[s] of Legionnaires' disease (LD), among people who were [residents, visitors, employees, other] at [geographic area/facility] in [timeframe].
- LD is a potentially serious pneumonia (lung infection) that people can get when exposed to *Legionella* bacteria.
- [If applicable:] [Facility name] is cooperating with the [state/local health agency] investigation of the potential sources of exposure to *Legionella*.]
- [Additional potential cases are under investigation.]

Potential sources of exposure:

- *Legionella* occur in freshwater environments and in water systems in built environments.
- *Legionella* grows well in warm water and can multiply in large or complex water systems, but it can also affect smaller buildings.
- Sources of exposure can include water used for showering, hot water heaters, hot tubs, decorative fountains, cooling towers, and commercial and industrial processes.
- People can become sick when they breathe in mist from a water source (e.g., shower) containing *Legionella*.
- *Legionella* cannot normally be spread from person to person.

Persons at risk:

- Most healthy people do not get LD after being exposed to *Legionella*.
- Being 50 years or older or having certain risk factors such as being a current or former smoker, having chronic lung disease, having a weakened immune system, or taking medication that weakens your immune system can increase the chances of getting LD.

Signs, symptoms, and treatment:

- The symptoms of LD include cough, muscle aches, fever, shortness of breath, and headache.
- Symptoms usually start 2 to 14 days after breathing in mist or water droplets that contain *Legionella*.
- Symptoms of LD may be similar to those of other respiratory diseases, such as COVID-19. It is important that people discuss the potential for LD with their doctors because the treatment for LD is different than for COVID-19.
- LD can be treated with antibiotics; however, it can cause severe illness requiring hospitalization and sometimes results in lung failure or death.

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Community Settings–Messaging for Media and the Public

Messaging Purpose: Press release/alert about LD case(s)/ outbreak in a community setting (*continued*)

Action requested:

- The [state/local public health agency] recommends that people who are at increased risk for severe disease from *Legionella* consider postponing their visit to the [facility AND/OR location/area].
- [Add one or more quotes from PH agency staff:]
 - *Sample quote from PH official:* [“Legionnaires’ disease is a serious infection. We want to make sure the public is aware of the potential risk of this disease so that each person can make a decision for themselves about visiting the [facility AND/OR location] in the best interests of their health.”]
- If an individual visited [facility AND/OR location] and develops symptoms within 14 days of their stay, they should contact their healthcare provider and seek medical attention right away.
- Members of the public may also see CDC materials about preventing waterborne disease at home: <https://www.cdc.gov/healthywater/drinking/preventing-waterborne-germs-at-home.html>.

Contact information:

- If you have information or questions about this outbreak, please contact [name, phone number, and email address of person/office] at the [state/local health agency].
- [A public inquiry phone line is available to answer questions [hour] AM – [hour] PM, [including over the weekend], by calling [phone number].
- For further information on Legionnaires’ disease, please visit the [state health agency website and/or] CDC webpage at www.cdc.gov/legionella/.

Templates & Samples

See additional samples and templates in the *LDRC Toolkit Appendix*