

COVID-19 Guidance for *Legionella* and Building Water System Closures

The focus of this guidance is to reduce *Legionella* growth and other pathogen and corrosion concerns that occur when there is a large drop in building water use. The guidance focuses on potable water systems inside larger buildings with complex plumbing and the information is general in nature. Each building is different and will require different actions based on its plumbing systems, use patterns, and source of water supply.

Please see the department's [Guidance for Shutting Down and Reopening Water Recreation Facilities](#) for information about how to maintain and treat pools and spas. More information about cooling towers and HVAC systems are found on the [CDC website¹⁰](#). You may also want to make sure that the buildings p-traps do not dry out. You can do this by flushing water down all drains to prevent sewer gas intrusion into the building.

What is the problem and who does it apply to?

Many buildings are closed to the public or have limited access in order to help slow the spread of COVID-19. The resulting drop in building water use increases the risk for *Legionella* growth in building plumbing and associated equipment like cooling towers, pools, decorative fountains, hot tubs and other equipment. To prevent *Legionella* growth, these systems must be actively managed and maintained.

If *Legionella* grow during low use periods, building users have a higher risk of contracting Legionnaires' disease and Pontiac Fever during the shutdown and when full use resumes. While *Legionella* is a primary risk, other opportunistic pathogens (*Mycobacterium avium*) and corrosion concerns (lead scale) are increased by closure or reduced use situations.

Building closures and reduced occupancy affect all environmental systems operating inside buildings including 1) potable and non-potable water systems, 2) cooling towers and 3) heating, ventilation and air conditioning (HVAC) that regulate interior relative humidity and control mold. These systems must be actively managed and maintained to protect the health of building users. In addition to managing systems during shutdown periods, building owners and operators need to implement well thought out start up protocols to ensure public health protection. By implementing procedures now, you can protect the public and minimize the steps needed to safely re-open closed or partially closed facilities.

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Key points about *Legionella* risk and building water systems in Washington State

- Prior to the start of the COVID-19 pandemic, Legionnaires' disease sickened and killed more people in the United States than any other reportable waterborne disease.⁴
- *Legionella* transmission occurs primarily through breathing in contaminated aerosols into the respiratory system.
- *Legionella* will grow in water systems to infectious levels where the water temperature is between 77°F and 108°F. Even small areas of the piping system at this optimum growing temperature range allow bacteria to thrive and infect other parts of the water system.¹ To reduce bacteria growth, keep hot water systems above 110°F and cold water systems below 75°F. Above 120°F is the optimum temperature for reducing *Legionella* growth. Always follow plumbing and safety standards to prevent scalding at point of use.
- Loss of free and total chlorine residual in building plumbing as a result of stagnant or very low water use is a significant factor that allows *Legionella* bacteria to flourish.
- Nearly all large and medium sized municipal water systems in Washington State use free chlorine for both primary disinfection and for distribution disinfectant residual (secondary disinfection). The only exception uses chloramination for secondary disinfection, which is also very effective against *Legionella*. If you are not sure if your water system is disinfected, please contact your water utility.
- Microbial disinfection of water using free chlorine depends primarily upon the concentration of free chlorine and time. Temperature and pH also impact chlorine disinfection efficiency against microbes. 'CT' is the term used in the drinking water industry to quantify disinfection. C stands for 'concentration of free chlorine in mg/L units'. T stands for time in minutes. Example: Free chlorine residual of 50 mg/L held in piping for 120 minutes (2 hours) equals a CT of 6,000 mg-min/L.

Recommended Monitoring and Management of Building Water Systems

Monitoring building water quality

Because temperature and chlorine residual are primary factors affecting *Legionella* presence in building plumbing, DOH strongly recommends that temperature and chlorine residuals be accurately measured and used to manage building water age. All building water systems should have an accurate digital chlorine residual test kit that uses an EPA-approved test method for use in drinking water compliance.^{6,8} Test strips and color wheels are not accurate and not recommended testing methods for water systems. Thermometers should be accurate to within +/- 1 °C. Operators should measure daily chlorine residual and temperature of water entering the facility from the water utility supplier. Chlorine concentrations in building plumbing will be

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less than or equal to utility concentrations. Building cold water temperatures will be equal to or higher than utility temperatures.

Maintaining systems under low use conditions (but not closed)

1. Flush cold water systems to maintain temperature and chlorine residual.
2. Monitor and maintain temperatures in hot water systems at the farthest (distal) fixtures. Or turn off the heating system, drain and flush the hot water tank and refill with cold water. Then flush the hot water system with the cold water supply to maintain temperature and chlorine residual similar to the cold water system.
3. Measure and record temperature and chlorine residual of the supply water from utility every day. Use these values, not time, as your optimum target for flushing. Individual buildings have too much plumbing variability for time to be a useful flushing parameter.
4. Maintain cold water distribution free chlorine residuals at or above 0.2 mg/L. Measure it with an approved device. The supplying utility's chlorine levels may limit your ability to maintain this minimum plumbing distribution residual. Establish contact with your utility to better understand their operating parameters.
5. Restrict access to unused portions of the building or post signs to show the plumbing system is out of service.
6. Document all measurements and maintenance actions in a daily log.

Starting up building water systems after closures and sustained low use

To ensure you and your employee's safety from both chemical and biological exposure while disinfecting and flushing the building plumbing, appropriate training and PPE should be considered. You can find guidance on worker safety for *Legionella* control and prevention on the [OSHA website](#).

1. Flush the entire water system to replace all water. Use an approved chlorine testing device to measure residual chlorine, flush until measured levels are equal to or less than the supplying utility's chlorine residuals.
2. During flushing operate all valves in the fully open position so that any particulate matter can be flushed through. Pay close attention to float-operated or other restrictive valves which need to be manually opened to clear particulates and prevent fouling of the valves.
3. Remove all aerator screens before flushing. Clean or replace aerator screens once cleaned to get rid of scale deposits that may contain harmful metals (lead) or microbial biofilms. Disinfect, heat sterilize, or replace shower heads especially if vulnerable populations have access to the showers.
4. Adjust valves back to normal operating positions to ensure that the system is rebalanced.

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5. Return hot water systems to normal operating temperatures.
6. Document all start up actions in the daily maintenance log.
7. Evaluate the effectiveness of your startup procedures relative to *Legionella* by testing for *Legionella* using an approved culture method. Collect samples at least 48 hours after final flushing and return of normal operation of the water system. Samples collected too early may give false negative results¹. Collect samples from critical locations⁹. ([CDC toolkit](#)) The CDC maintains a [list of labs certified](#) for legionella testing. Only use certified labs for testing.
8. Since there are no *Legionella* drinking water standards in Washington State, you may use the European Union Action levels for *Legionella* in Potable Hot and Cold Water Systems⁵ to evaluate test results and identify additional steps needed. See Table 6 below.
9. If testing reveals widespread or high levels of *Legionella* in the water system, or you have other concerns, then shock disinfection may be needed. Fully disinfect the cold-water system by flushing water through all fixtures with chlorinated water achieving a CT of no less than 3,000 mg-min/L. The chlorine concentration used in calculating CT is the lowest free chlorine residual measured throughout the building at the end of the hold time using an approved measuring device. For high chlorine doses, the sampled water will have to be diluted to accurately measure the residual with typical approved devices. A CT target of 3,000 mg-min/L is a minimum recommendation. Systems with heavy biofilms or extensive *Legionella* colonization may need to use higher CT targets.

Using a high chlorine dose allows for shorter disinfection contact times. However, high doses (>5 mg/L) require strict access controls to avoid potential problems with inadvertent exposure to people in the building. High dose disinfection can be appropriate for unoccupied buildings where access is less of an issue.

For situations where access to the water system is less controlled, consider using a lower initial dose and a longer contact time. There is little concern with inadvertent contact with chlorine residuals less than 4 mg/L. For example, a building manager applies a free chlorine dose of 5 mg/L. After 24 hours she measures the free chlorine residual throughout the building and the lowest reading is 2.2 mg/L. The CT is $2.2 \times 1440 = 3,168$ mg-min/L. When finished, flush all of the plumbing following the same procedure as outlined in step #1 above.

After any shock treatment, it is important to sample again in accordance with Step 7 outlined above.

References:

1. European Society of Clinical Microbiology and Infectious Disease - [Guidance for Managing Legionella During the Coronavirus Pandemic 2020](#).
2. [Recovering from COVID-19 Building Closures](#). AIHA 2020 Guidance Document (Prepared by Indoor Environmental Quality Committee of the American industrial Hygiene Society).
3. [Safe Management of Water Systems in Buildings During the COVID-19 Outbreak, 25th March 2020](#), Legionella Control Association, Staffordshire, UK
4. National Academies of Sciences, Engineering and Medicine 2019. *Management of Legionella in Water Systems*. Washington, D.C. The National Academies Press. <https://doi.org/10.17226/25474>
5. [European Technical Guidelines for the Prevention, Control and Investigation, of Infections Caused by Legionella species](#). June 2017
6. Deem, S. & Feagin, N., 2016. "[Disinfection Data Integrity in Washington State](#)." Journal AWWA, 108:10:24.
7. Emergency Disinfection of Small Water Systems, Publication 331-242 revised 2/17/2020, Washington State Department of Health <https://www.doh.wa.gov/Portals/1/Documents/Pubs/331-242.pdf>
8. Measuring Free Chlorine, Publication 331-442 revised January 2020, Washington State Department of Health <https://www.doh.wa.gov/portals/1/Documents/pubs/331-442.pdf>
9. Developing a Water Management Program to Reduce *Legionella* Growth and Spread in Buildings: A Practical Guide to Implementing Industry Standards June 5, 2017. U.S. Department of Health and Human Services CDC <https://www.cdc.gov/legionella/wmp/toolkit/index.html>
10. CDC – Coronavirus Disease 2019 - Guidance for Building Water Systems <https://www.cdc.gov/coronavirus/2019-ncov/php/building-water-system.html>

Section 3.185 Table 6: European Union Action Levels for *Legionella* in Potable Hot and Cold Water Systems

Legionella CFU/mL	Action Required
Not Detected	Acceptable – continue monitoring
< / = 1.0	Refer to responsible person and assure water quality values are within target

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> 1.0 to 10	<ul style="list-style-type: none"> i) Resample if small percentage (10-20%) are positive; review control measures ii) If >20% positive may indicate low level colonization, disinfection of system, and risk assessment to determine additional actions
>10	Resample, immediate review of control measures, disinfection of whole system

Source: EU (2017).

The EU guidelines emphasize the goal to achieve no cultural *Legionella*, but acknowledge that occasional detection (<20%) of low levels of *Legionella* (< / = 1 CFU/mL) may be acceptable provided that other water quality values (e.g., temperature, disinfectant) and operational parameters are within the water management plan guidelines. Intermediate levels (>1-10 CFU/mL) and high levels (>10 CFU/mL) trigger a series of actions including resampling, disinfection, and overall review of the water management plan program.

More COVID-19 Information and Resources

Stay up-to-date on the [current COVID-19 situation in Washington](#), [Governor Inslee's proclamations](#), [symptoms](#), [how it spreads](#), and [how and when people should get tested](#). See our [Frequently Asked Questions](#) for more information.

The risk of COVID-19 is not connected to race, ethnicity or nationality. [Stigma will not help to fight the illness](#). Share accurate information with others to keep rumors and misinformation from spreading.

- [WA State Department of Health 2019 Novel Coronavirus Outbreak \(COVID-19\)](#)
- [WA State Coronavirus Response \(COVID-19\)](#)
- [Find Your Local Health Department or District](#)
- [CDC Coronavirus \(COVID-19\)](#)
- [Stigma Reduction Resources](#)

Have more questions about COVID-19? Call our hotline: **1-800-525-0127**. For interpretative services, **press #** when they answer and **say your language**. (Open from 6 a.m. to 10 p.m.) For questions about your own health, COVID-19 testing, or testing results, please contact your health care provider.

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