Re: Identification of Essential Employee

To Whom it May Concern:

[PROVIDER NAME] is a provider of supported living services and supports to individuals with developmental disabilities in home-based and/or residential settings under the Ohio Department of Developmental Disabilities (ODODD). [PROVIDER NAME] must ensure the continuous availability of trained and qualified direct service professionals to individuals receiving these services and supports.

Further, according to the Ohio Department of Health Directors Stay at Home Order, issued on March 22, 2020 and effective at 11:59 p.m. on March 23, 2020, individuals are permitted to leave their residences to work for “Essential Businesses,” which include “Human Services Operations.” Human Services Operations include any provider funded by ODODD and specifically include the following:

- Residential settings for people with developmental disabilities and intellectual disabilities; and
- Home-based settings to provide services to individuals with physical, intellectual, and/or developmental disabilities.

This letter serves as confirmation that [NAME] is one of [PROVIDER NAME]’s employees and is essential to ensuring the continuity of services and supports to our individuals served. This individual, therefore, will need to travel to and from work.

If you have any questions or concerns, please do not hesitate to contact me at any time using the phone number below.

Sincerely,

[NAME]

[TITLE]

[PHONE NUMBER]