[**This template is intended to be used to inform a DNR employee of direction to self-quarantine when they have had close contact with someone with a confirmed case of COVID-19. The communication should not identify the individual who has tested positive for COVID-19. ]**

Dear [Employee’s Name],

I have determined that you have been in close contact with someone with a confirmed case of Novel Coronavirus (COVID-19).

To ensure employee safety, you are asked to continue to monitor yourself for COVID-19 symptoms and wear a mask when not work alone for the next 10 calendar days from your last close contact on [Add Date] with the person who has a confirmed case.

If you develop symptoms during this time, you will be assigned to telework and assigned a self-quarantine period. If you are required to self-quarantine, you will not be permitted to perform field work or go to the office. If you are not able to telework during this time, contact your supervisor to discuss options.

**When you return to the workplace:**

Your health and wellbeing are of the utmost importance to DNR. We are following guidelines set forward by the [Center for Disease Control](https://www.cdc.gov/coronavirus/2019-nCoV/index.html) and the state Department of Health. They recommend that each of us take the following steps regardless of where you report to work:

* Frequently wash your hands with soap and warm water for at least 20 seconds and use alcohol-based sanitizer.
* Avoid touching your mouth, nose and eyes at all times, but especially if your hands have not been washed.
* Cover your coughs and sneezes by coughing into your elbow or a tissue, then throw away the tissue immediately.
* Stay home when you are sick – this is very important for all illnesses, but especially for the duration of a respiratory illness.
* At work, adhere to DNR’s COVID-19 Safety Protocols.
* Frequently clean and disinfect high-touch and common surfaces with bleach or anti-bacterial wipes.
* To the extent you can, stay away from people who are sick.
* If you have coronavirus symptoms – fever, cough and shortness of breath – contact your health care provider about what your next steps may be. Please also notify your supervisor so the agency can take any necessary steps.

**Additional Details and Resources**

Your mental health is just as important as your physical health. If this is a stressful time for you, remember that the [Washington State Employee Assistance Program (EAP)](https://des.wa.gov/services/hr-finance/washington-state-employee-assistance-program-eap) is available as a resource. It is free and it is confidential.

A risk of COVID-19 infection remains. Please be precautious and take good care of yourselves. You are welcome to contact your supervisor, Human Resources, or the DNR Safety Office at any time if you have questions, concerns, or suggestions.

Sincerely,

[Appointing Authority’s Name]
[Appointing Authority’s Title]