

Charles County COVID-19

Incident Action Plan



Operational Period

From		To
4/1/20		4/3/20
8:00	-	8:00

Changes in Yellow

This document is not Confidential but some of the information may be SENSITIVE

INCIDENT OBJECTIVES (ICS 202)

1. Incident Name Charles County COVID-19	2. Operational Period	Date From: 4/1/20 Time From: 8:00	Date To: 4/3/20 Time To: 8:00
3. Objectives			
A. Ensure the safety and overall health and well-being, including mental health of the residents, county employees, and responders, throughout this incident.			
B. Conduct surveillance of COVID-19 cases in collaboration with the health department, hospital, physicians, and other health care providers.			
C. Maintain timely, accurate and uniform communications with residents, employees and first responders as well as partners in the tri-County and National Capital Region and the state of Maryland.			
D. Prepare for and handle the human reaction crisis contingencies in long terms.			
E. Prepare for long term order maintenance.			
F. Prepare for and sustain our communities' hierarchy of needs throughout this incident.			
G. Determine trigger points for Continuity of Operations for all agencies, including government, public safety, schools, hospital, and other critical infrastructure systems.			
H. Ensure all practical steps to "Slow the Spread" of transmission of COVID-19.			
4. Operational Period Command Emphasis			
Branch Directors- Every policy needs to be in writing and vetted, tested and then communicated. The EOC NEEDS a copy of your written Policy if it crosses over into another Branch or Group.			
General Situational Awareness			
Wellness checks twice a day helps prevent the spread of COVID-19 today?			
5. Site Safety Plan Required? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Approved Site Safety Plan(s) Located at:			
6. Attachments (check if attached)			
<input checked="" type="checkbox"/> ICS 203 <input type="checkbox"/> ICS 207 <input type="checkbox"/> ICS 204 <input checked="" type="checkbox"/> ICS 208 <input type="checkbox"/> ICS 205 <input type="checkbox"/> Map/Chart <input checked="" type="checkbox"/> ICS 205A <input type="checkbox"/> Weather <input type="checkbox"/> ICS 206 <input type="checkbox"/> Forecast/Tides/Currents	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	ICS 214 _____ _____ _____ _____	
7. Prepared by: Name: <u>Joe Hoffmaster</u> Position/Title: <u>PSC</u> Signature: _____			
8. Approved by Incident Commander: Name: <u>Michelle Lilly</u> Signature: _____			
ICS 202	IAP Page <u>2</u>	Date/Time: <u>April 3, 2020 @ 09:45</u>	

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name <div style="display: flex; justify-content: space-between;"> Charles County COVID-19 </div>		2. Operational Period <div style="display: flex; justify-content: space-between;"> <div> Date From: 4/1/20 Time From: 8:00 </div> <div> Date to: 4/3/20 Time to: 8:00 </div> </div>																																							
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4. Agency Representative <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">Agency</th> <th style="width: 80%;">Name</th> </tr> </thead> <tbody> <tr><td>Intell officer Deputy</td><td>Mike Meiser</td></tr> <tr><td>Lifestyles</td><td>Sandy Washington</td></tr> <tr><td>Public Schools</td><td>Mike Meiser</td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>		Agency	Name	Intell officer Deputy	Mike Meiser	Lifestyles	Sandy Washington	Public Schools	Mike Meiser															<div style="display: flex;"> <div style="flex: 1;"> b. Branch II Branch Director Deputy DES EMS Vol EMS Vol Fire Logistics </div> <div style="flex: 1;"> Public Safety Mark Kaufmann Jr. Scott Herbert D J Mills Steve Finch Andrew Spalding Mitchell Lewis Scott Herbert Scott Herbert </div> </div>																	
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ICS 203		IAP Page <u>3</u>																																							
Date/Time: <u>April 3, 2020 @ 12:45</u>																																									

ORGANIZATION ASSIGNMENT LIST (ICS 203)

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3. Incident Commander and Staff		7. Operations Section	
UC	Dr. Lowry	Chief	
UC	Michelle Lilly	Deputy	
Deputy	Melanie Gardner		
Deputy	Tony Rose		
Safety Officer	John Filer	a. Branch V	Governance
Public Information Officer	Jennifer Harris Donna Fuqua		
Intell Officer	Jason Stoddard		
4. Agency Representative			
Agency	Name	Charles County Govern.	Michele Lilly
Intell officer Deputy	Mike Meiser	Town of LaPlata	Chris Becker
Lifestyles	Sandy Washington	Town of Indian Head	Ryan Hicks
CC Public Schools	Michael Meiser		
		b. Branch VI	Business
		Branch Director	Darre'll Brown
		Deputy	Marcia Keeth
		Economic Development	Darre'll Brown
		Chamber of Commerce	Bonnie Grady
5. Planning Section		c. Branch VII	
Chief	Joe Hoffmaster	Branch Director	
Deputy	Bill Smith	Deputy	
Resource Unit			
Situation Unit	need to fill		
Documentation Unit	need to fill		
Demobilization Unit			
Human Resources			
Technical Specialists (name / specialty)		d. Branch VIII	
		Branch Director	
		Deputy	
6. Logistics Section			
Chief	Nick Ellis		
Deputy	Lori Cherry	e. Branch IX	
Support Branch			
Donations	Ed Tucker		
Supply Unit			
Facilities Unit	Nick Ellis	10. Finance Section	
Ground Support Unit		Chief	Jen Adams
Service Branch		Deputy	need to fill
Service Branch Dir.		Time Unit	
Communications Unit		Procurement Unit	
Medical Unit		Comp/Claims Unit	
Security Unit		Cost Unit	
Food Unit			
9. Prepared by: Name: <u>Joe Hoffmaster</u> Position/Title: <u>PSC</u> Signature: _____			
ICS 203	IAP Page <u>4</u>	Date/Time: <u>April 3, 2020 @ 13:45</u>	

COMMUNICATIONS LIST (ICS 205A)

1. Incident Name Charles County COVID-19		2. Operational Period:		Date From: 4/1/20	Date to: 4/3/2020
				Time From: 8:00	Time to: 8:00
3. Basic Local Communications Information:					
Name - Last	Name-First	Representing	Email	Phone	
Adams	Jennifer	DES FSC	AdamsJen@Charlescountymd.gov	301-609-3430	
Baker	Cari	CCSO	bakerce@ccso.us	240-444-2564	
Becker	Chris	La Plata Police	cbecker@townoflaplata.org	301-399-1395	
Brown	Darrell	Business Director Econ Dev	Brownd@charlescountymd.gov	301-885-1346	
Cress	Lauri	Charles Regional Medical Center	lauri.cress@umm.edu		
Ellis	Nick	DES- Logistics	DESLogistics@charlescountymd.gov	240-416-8955	
Filer	John	DES- Liaison	FilerJ@charlescountymd.gov	301-399-1143	
Finch	Stephen	DES	FinchS@charlescountymd.gov	240-507-3113	
Fuqua	Donna	PIO	Fuquad@CharlesCountyMD.gov	301-752-1497	
Harris	Jennifer	PIO	HarrisJ@CharlesCountyMD.gov	240-435-0169	
Hoffmaster	Joe	Planning Section	DESPlanning@charlescountymd.gov HoffmasJ@CharlesCountyMD.gov	301-399-2600	
Kaufmann	Mark Jr	PS Branch Dir. Vol Fire Chief	markeng1trk@hotmail.com	240-299-1017	
Konschak	Matt	NSWC IHD	matthew.konschak@navy.mil	301-774-6504	
Lilly	Michelle	CCDES Director, Unified Command	LillyM@charlescountymd.gov	301-481-3485	
Lilly	Mary	C C Dept. of Health	Mary.Lilly@maryland.gov	240-435-0274, 301-609-6762	
Lowry	Susan	MDH	suzan.lowry@maryland.gov		
Mills	D.J.	Vol Fire- Special Operations Chief	djm31_9@hotmail.com		
O'Malley Simpson	Katie	CCBOE PIO	Komalley@ccboe.com		
Proctor	Destiny	DES	proctord@charlescountymd.gov		
Quade	Thomas	MSP	Thomas.Quade@maryland.gov	301-536-1742	
Rose	Tony	DES Deputy Director, Unified	RoseT@charlescountymd.gov	301-399-5068	
Russell	Cindy	DSS	cindy.russell@maryland.gov	301-392-6415	
Schmidt	Louis Chris III	CCSO	schmidtlo@ccso.us	240-419-1612	
Seaman	Kevin	CCEMS	seamank@chairescountymd.gov	240-776-2606	
Smith	Bill	CCVFA/CCAEMS	Smithb@ccvfireems.org	301-934-3581	
Spalding	Andrew	Volunteer EMS Chief	chiefems@ccvfireems.org	301-751-6154	
6. Prepared by: Name: _____ Joe Hoffmaster _____ Title: _____ PSC _____ Signature _____					
ICS 205A	IAP Page <u>5</u>	Date/Time: <u>April 4, 2020</u> @ <u>12:45</u>			

COMMUNICATIONS LIST (ICS 205A)

[illegible]

SAFETY MESSAGE/PLAN (ICS 208)

1. Incident Name Charles County COVID-19	2. Operational Period Date From: 4/1/20 Time From: 8:00	Date To: 4/3/20 Time To: 8:00
3. Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan:		
"Wellness checks twice a day prevents the spread of COVID-19 today!"		
1. Total identified PUI's transported to date: 101 Total # of patients testing positive : 18		
2. PPE stockpiles remain stable with an estimated supply range of 10+ days based on current call volumes.		
3. Revision to EMSOP Special Order 2020-01 Version 3.0 has been completed and disseminated to staff.		
4. As this is a rapidly changing landscape, leaders should review any changes with their personnel each morning.		
5. With the implementation of the most recent update of special Order 2020-01 V 3.0, personnel should continue		
6. Personnel who report having a fever, sore throat, cough or other respiratory related symptoms should stay at home and self-isolate until they are symptom free for a period of 72 hours.		
7. Personnel who have recently travelled to a suspected COVID-19 country or have taken a cruise which ported at a COVID-19 infected region should not report to work. Those personnel are being asked to self-isolate at home for a period of 14 days.		
8. Personnel with facial hair should be aware of the NIOSH requirements for properly fitting filtering facepiece respirators in relation to their specific facial hairstyles. A CDC infographic was disseminated to staff with compliance guidance. Those with facial hair not in compliance drastically increase their risk of exposure even when using an N95 mask.		
9. The County's Peer Support Team has been activated and will make weekly wellness checks with our County's first responders. We are working through the logistics but will provide an email address and phone number to contact the team. Will disseminate when we have the contact information.		
10. Please remember that PPE caches are for EVERYONE. We are all in this together so there is no longer career and volunteer PPE caches.		
11. Per Special Order 2020-01 Version 3.0, limit the number of first responders having patient contact. This means no more ride-alongs, no more students and no more 3rd's.		
12. Seal off the driver from the patient compartment area. (close door, or plastic with duct tape)		
13. We are starting to see a broad spectrum of calls for service that are turning out to have PUI's involved. Calls like MVC's, CVA's, Falls and even Fires. Please be aware and ask each patient or person you contact if they have a fever, cough or other related symptoms.		
Approved Site Safety Plan(s) Located At: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
5. Prepared by: Name: <u>John Filer</u> Title: <u>Safety Officer</u> Signature: _____		
ICS 208	IAP Page _____	Date/Time: <u>April 4, 2020</u> @ <u>15:00</u>

[illegible]

ACTIVITY LOG (ICS 214)

1. Incident Name Charles County COVID-19		2. Operational Period		Date From	4/1/2020	Date To:	4/3/2020
				Time From:	8:00	Time To:	8:00
3. Name:		4. ICS Position			5. Home Agency (and Unit):		
6. Resources Assigned							
Name		ICS Position			Home Agency (and Unit)		
7. Activity Log							
Date/Time		Notable Activities					
8. Prepared by: Name: _____ Position/Title: _____ Signature: _____							
ICS 214, Page 1		Date/Time: _____					

ACTIVITY LOG (ICS 214)

[illegible]

April 2, 2020

DAILY REPORT TO DES FROM CHARLES REGIONAL MEDICAL CENTER

- The trigger point for starting up the tent operations outside of the hospital has not yet been activated. Activation will be determined by both staffing levels and patient census presenting to the ED.
- The hospital census for today 4/2/2020 = 83
- Confirmed positive cases of COVID-19 patient admissions in-house 4/2/2020 = 19
- PUI's in-house 4/2/2020 = 2
- There was 1 patient that tested Positive for COVID-19 that was brought in by EMS on 4/01/2020
- There were 0 PUI brought in by EMS 4/01/2020 of which the test result has not yet been received
- CRMC developed a SOP for the ED staff so that all shifts and ED personnel have the defined procedure. Hopefully this will assist as we are working through this change. The SOP message was as follows:

Standard Operating Procedure as of April 1, 2020

- 1. EMS clinicians transporting a patient to CRMC will contact Charles County 911 Communications Center when they are approaching the CRMC ED (about 3 min. out).***
- 2. Communications Center will alert CRMC.***
- 3. CRMC ED will send staff out to meet the ambulance.***
- 4. Handover of patient care will occur in the Ambulance Bay.***

- a. CRMC ED RN will present to the Ambulance with stretcher or wheelchair as appropriate.*
 - b. Handover report should be concise so timely transition can occur.*
 - c. RN will use Radio to contact Resource RN to determine room placement.*
 - 5. Ambulance Decontamination and resupply procedures will be conducted outside of the ED.*
 - 6. EMS clinicians should not need to enter the ED while "curbside" ED services are in operation.*
- CRMC is dedicating one unit specifically to be for COVID-19 positive patients or for PUI's that have been admitted to the hospital. The dedicated COVID-19 unit will be 3 south until further notice. That process is underway and should be fully operational before end of day 4/2/2020.
 - Number of ICU beds in-house. Number of ICU beds available =
 - Number of ventilators owned by CRMC = 17. As of 4/2/2020 there are 7 patients on ventilators and of those 7, 2 of the patients are positive for COVID-19.



PUBLIC HEALTH BRANCH BRIEFING COVID-19 PANDEMIC RESPONSE

April 2, 2020

INFECTIOUS DISEASE

•CASE COUNT—CHARLES COUNTY

As of 4/1/2020, total case count for Charles County is 95. 1 more death.

Waiting on lab reports and line lists from MDH to update confirmed case count for Charles County.

•CALL CENTER UPDATE

Remote call operations went well.

Calls later in the evening hours were low.

•RESOURCE DISTRIBUTION

5 requests picked, filled as best as possible, contact notified

VOLUNTEERS

•MARYLAND MEDICAL RESERVE CORPS

3 new responders accepted into unit

TESTING

•VEIP TESTING SITE UPDATE

We have been advised that 25 kits will be on site tomorrow the day prior to testing

The number of kits may vary per operational period

Will begin to staff for enhanced operation that will run 2 stations per lane

PARTNER/STAKEHOLDER OUTREACH

•ALL PARTNER CALL

Call detail sent 03/31/2020

Questions to be submitted in advance by close of business the day before to amber.starn@maryland.gov.

Recap provided in Public Health Branch briefing every Friday.

•LTC/AL CALL

Call invite sent 03/31/2020. This is an open forum.

Recap provided in Public Health Branch briefing every Friday.

EPIDEMIOLOGY AND SURVEILLANCE

•SURVEILLANCE OF ED HOSPITAL DATA AND URGENT CARE THROUGH ESSENCE

ESSENCE data for urgent care utilization at Patient First in Waldorf saw a small decrease in patients from Tuesday, 3/31 to Wednesday, April 1. 31 patients presented for a multitude of symptoms. All were discharged to home for self-care. 15 presented with ILI. Diagnoses included allergies rhinitis, sinusitis, pharyngitis, acute bronchitis, influenza with no respiratory manifest, and unspecified viral infection.

ESSENCE ED visit data for the University of Maryland Charles Regional Medical Center also shows no high utilization alert or warning for 4/1. There were 63 ED patients on 4/1. This is a small decrease from the number reported for 3/31 (N=75). The epidemiologist read the reports on each case where the chief complaint included flu like or possible COVID-19 symptoms (N=19 for 4/1). COVID-19 case or COVID-19 PUI was listed in the provider diagnosis and notes for 7 cases. ESSENCE does not indicate any admissions; however, the discharge disposition was left as "none" for 15 people. No deaths reported for 4/1.

•SURVEILLANCE OF EMS CALL DATA AND ALERTS

The epidemiologist monitors the Charles County DES First Watch trigger alerts. There has been an increase in trigger alerts for COVID-19 persons under investigation.

3/28: 10 alerts

3/29: 13 alerts

3/30: 21 alerts

3/31: 25 alerts

4/1: 30 alerts

•EPI SURVEILLANCE PROFILE FOR STATE

Case Investigation, Surveillance, and Infectious Disease Response (Dr. David Blythe, MDH) from 4/2

- 1) Latest case counts: total cases (2331) (346 new), doubling since Saturday -higher % of new in Baltimore region
- 2) Of total cases –
 - a) Age distribution:
 - i) under 18 years -1%
 - ii) in 18-64 age range -79%
 - iii) in 65+ age range -20%
 - b) Geographic distribution (%) –
 - i) National Capital – 44%
 - ii) Baltimore Metro area – 48%
 - iii) Eastern Shore – 2 %
 - iv) Southern – 5%
 - v) Western – 1%
- Of cases -
 - c) Current Hospitalizations – 582 ever hospitalized, 340 currently hospitalized
 - d) Deaths – 36 deaths (1.5%)
 - e) 81 released from isolation (3%)

• CRISP COVID-19 (Maryland Health Information Exchange)

Chesapeake Regional Information Sharing for our Patients or CRISP is the health information exchange for the state of Maryland. All hospitals communicate in this system. It is also used by primary care providers, urgent care centers, and local health departments to monitor patient utilization and to obtain more information about clinical presentation and treatment. CRISP reports can be pulled by condition and by facility. There are 3 new reports specific to COVID-19.

Map of COVID-19 confirmed cases in MD by zip code is attached.

Graph with Maryland hospital and UMMS CRMC specific hospital volume summary also attached.

CRMC Hospital data in CRISP for 3/31 indicated:

- 3 ventilators available
- They had not expanded into non-traditional space.
- All 12 Adult ICU beds were occupied. No pediatric ICU at facility.
- 74 of adult acute care beds occupied (68 out of 92)
- 4 pediatric acute care beds. None are currently occupied.

MEDIA, SOCIAL MEDIA AND WEBSITE

•MEDIA/SOCIAL MEDIA/WEBSITE

Linda Warren and Edie Kratzer went on Radio Poder 1030 to share information on COVID-19.

Links to stories that news stations reported yesterday about the testing site in Waldorf are below.

NBC4

[Charles County Opens New Drive-Thru Testing Site](#)

Fox5DC

[Maryland using emission inspection sites as drive-thru COVID-19 testing locations](#)

WJLA7

[COVID-19 testing station in Waldorf tests people quickly & safely, Maryland officials say](#)

WUSA9

[A behind the scenes look at coronavirus testing site in Waldor](#)

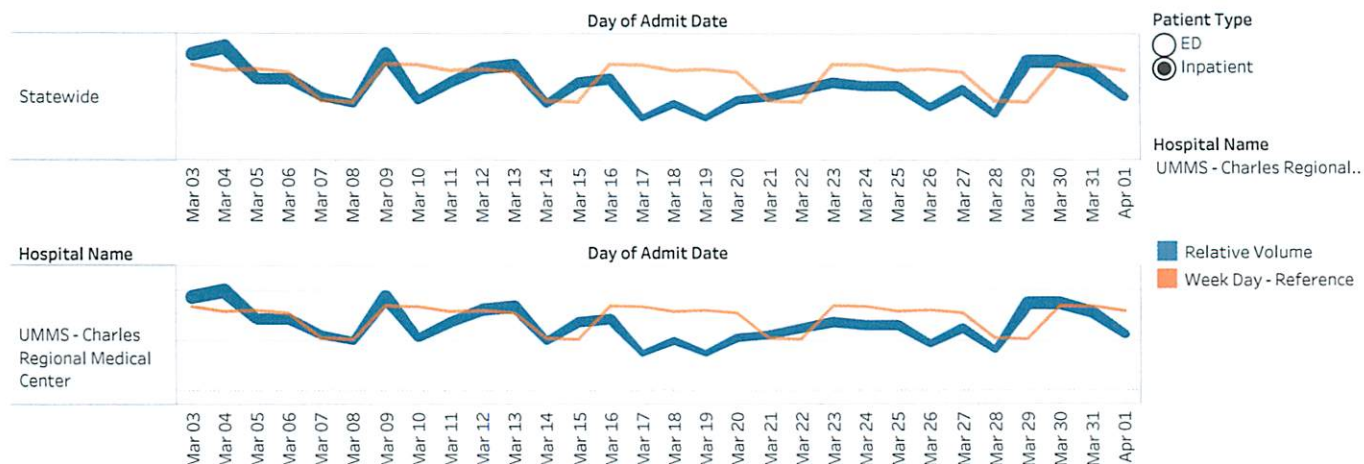
MISCELLANEOUS

Respectfully submitted by Mary Lilly

Maryland Hospital Volume Trend Lines

These volume data are derived from real-time Admission/Discharge/Transfer feeds sent to CRISP. The thickness of the line is a measure of volume. These volume counts are imprecise for reasons such as differences in how feeds are implemented among hospitals. However, the trendlines provide utility in understanding directional volume change over time.

The orange reference line shows the statewide average relative volume by the day of the week, using all ADT data from January 1, 2020 to present.



Data shown between
3/3/2020 and 4/1/2020

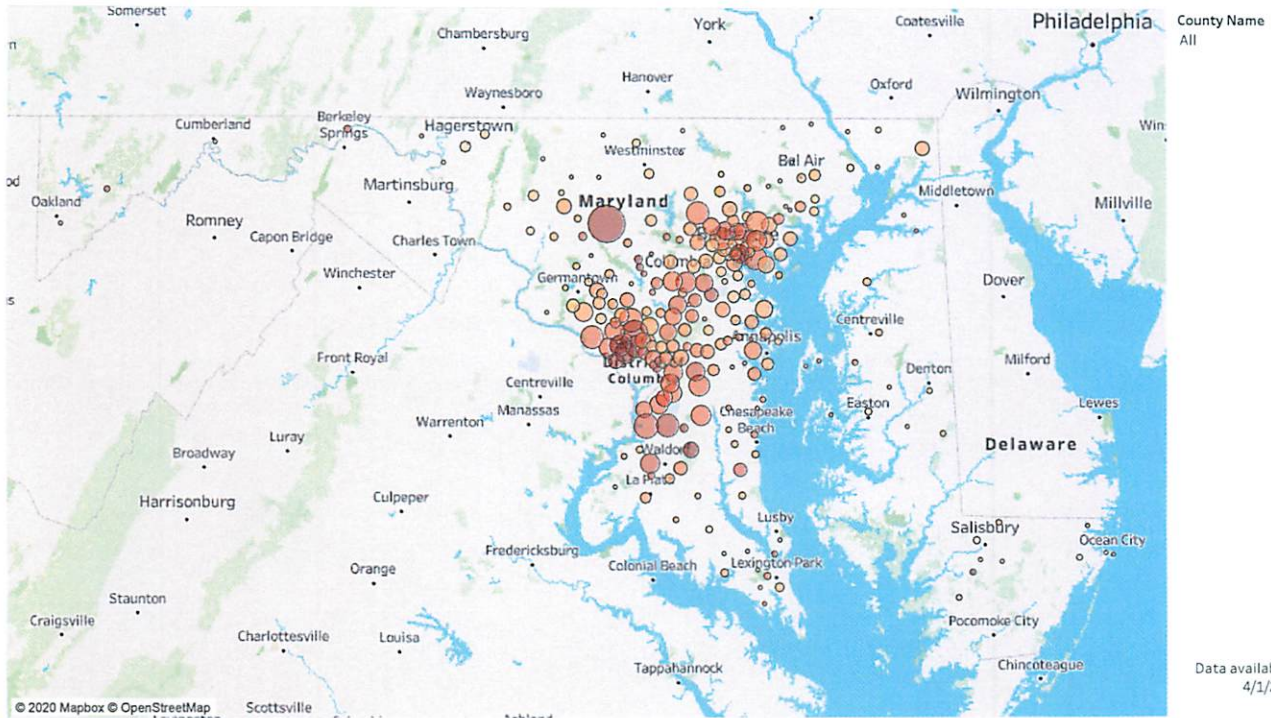
Data Extracted on
4/2/2020 10:59:59

Confirmed COVID-19 Cases

Please note: The numbers in this dashboard are pending validation from MDH.

Statewide Number of Cases: 2,119

Cases for Selected Area: 2,119



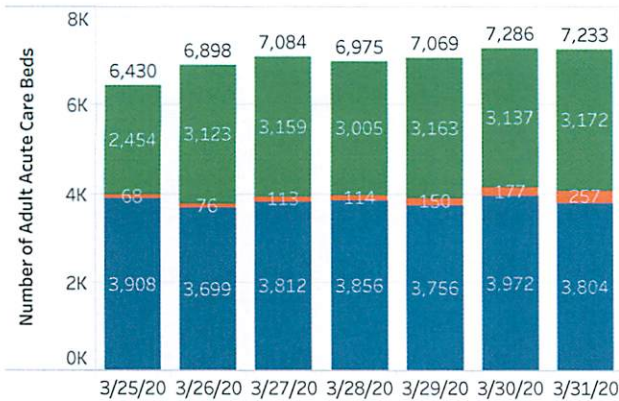
MIEMSS Survey Data

Available Beds

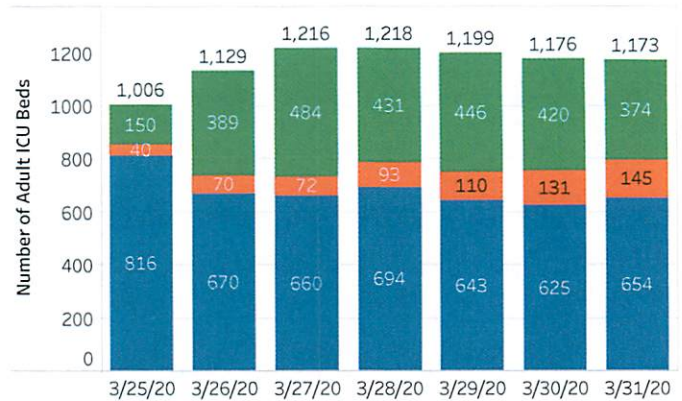
Occupied Confirmed COVID-19 Patient

Occupied Non-COVID

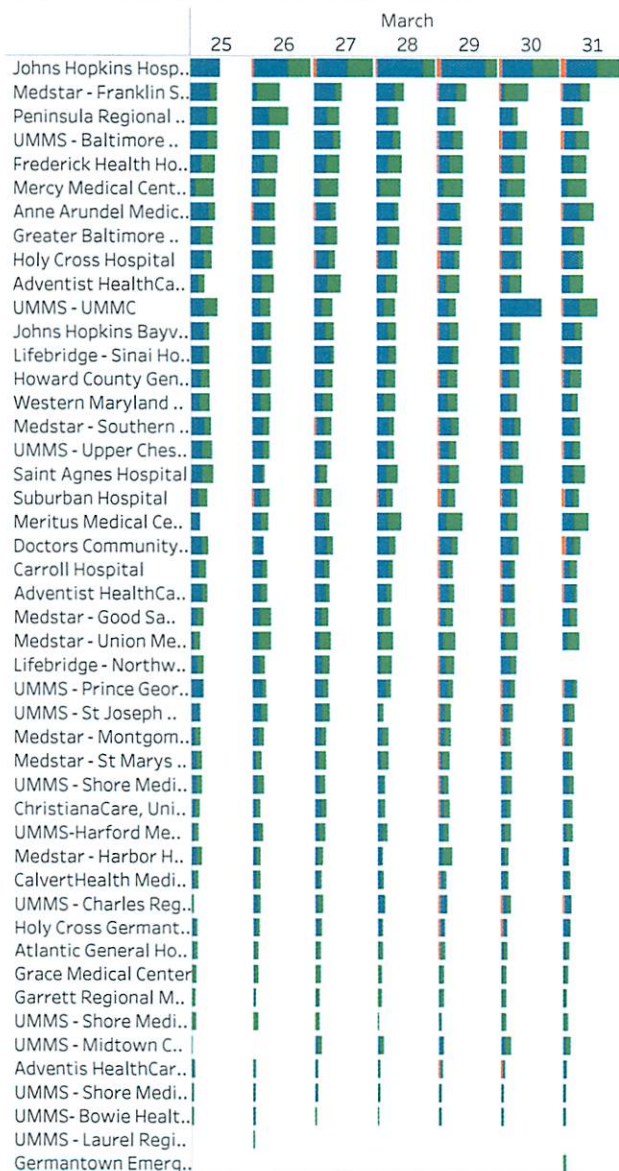
Adult Acute Care Beds - Statewide



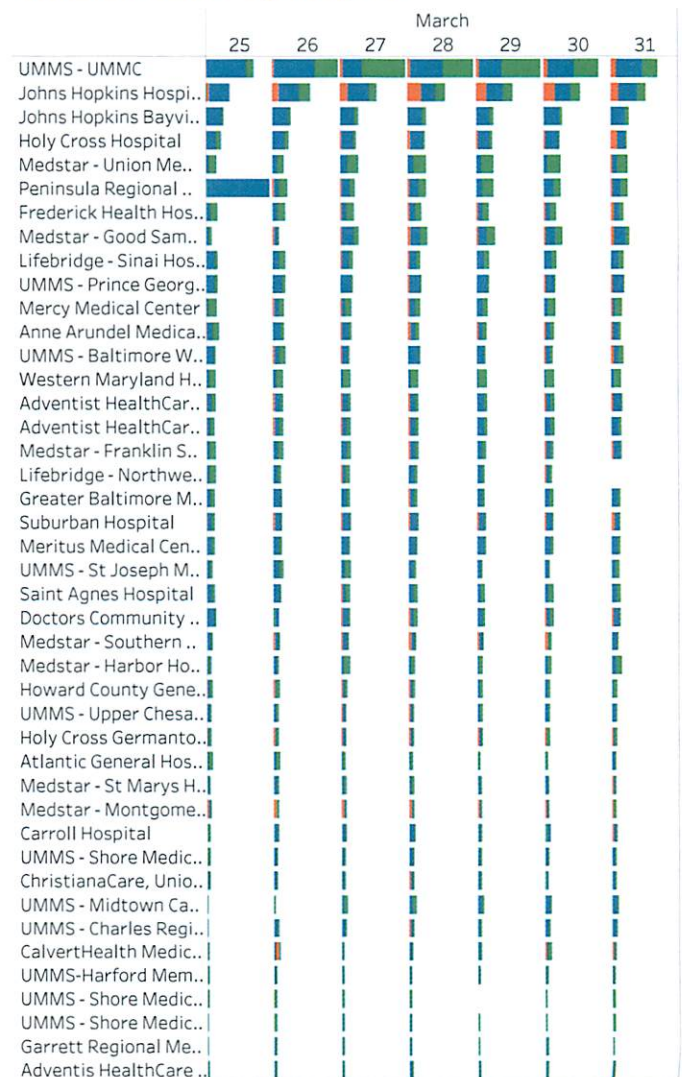
Adult ICU Beds - Statewide



Adult Acute Care Beds - by Hospital



Adult ICU Beds - by Hospital



Intelligence Briefing 4-2-2020
COVID Charles County

Updated Infection Numbers: As of 1051 hrs.

Total worldwide: 965,246 +79,559 since the 4-1-20 brief.

Worldwide increase of confirmed cases by 24hour period over the last 6 days

3-24/25	3-25/26	3-26/27	3-27/28	3-28/29	3-29/30	3-30/31	3-30/4-1	4-1/4-2
+43,102	+56,337	+119,753	+59,541	126,150	56,378	68,578	76,079	79,559

Total fatalities worldwide: 49,236 +5,020 since the 4-1-20 brief

Total confirmed cases in the US: 217,263 +27,174 since the 4-1-20 brief

US increase of confirmed cases by 24 hours period over the last 6 days

3-24/25	3-25/26	3-26/27	3-27/28	3-28/29	3-29/30	3-30/31	3-31/4-1	4-1/4-2
8758	14,441	30,769	18,853	19,898	18,769	41,111	24,215	27,174

Analysis note: While number continue to rise, positive tests being recorded today were sampled up to 10 days ago. In essence, the data we are recording today could be as much as 10 days old. This must be kept in mind as we determine the scope and magnitude of the today's situation.

Total fatalities in US: 5,151 +1,049 since the 4-1-20 brief

Maryland Numbers: As of 1000 hrs. via <https://coronavirus.maryland.gov/>

Total confirmed cases in State in of MD: 2331 +346 since the 4-1-20 brief

Total tested in the State of MD: 18,890 +1,657 over 4-1-20

Percent of those test that test positive: 12.3%

Total Fatalities in State of MD: 36 +5 change since the 4-1-20 brief

Total Hospitalizations: 582 Increase of 60 from 4-1-2020

First Responder Numbers in Charles County:

12 Self-isolation: responder is sick or test positive.

39 Quarantine: the responder has been exposed and they can't come to work.

Analysis note: It was reported the COG Fire Chiefs recently changed the definitions of quarantine and self-isolation. Charles County is attempting remain consistent with the direction from the COG Fire Chiefs.

Weather:

Friday 60-44 sun, Sat, 62-46 Sun, Sunday 69-49 sun

Analysis note: Warm weather will likely mean more people outside, increasing the probability of gatherings. Rainy weather will drive people into their residences. The potential for increased calls for police service exists.

Local:

No stores were visited this AM, however there were lines as several “big box” stores prior to 0800.

Testing center opened today at the VEIP Center

Maryland Update:

Montgomery County is reporting a critical need for responder PPE

Authorized “essential personnel” child care list continues to grow. There are 130+ providers in Maryland.

https://earlychildhood.marylandpublicschools.org/system/files/filedepot/2/approved_sites_for_epcc_epsa_-_master_list.pdf

About 15,000 Maryland state employees who are required to come into work began receiving increased wages Wednesday, albeit at a lower rate than a previous hazard pay incentive.

Region:

Over 2,224 cases in the NCR as of 0511 4-1-2020

4,690 cases in Maryland, DC, and Virginia as of 1100 on 4-1-2020

National:

FDNY reports 6,527 medical calls were run on 4-1-2020

6.6 million Americans filed for unemployment last week

President announced new counter-narcotics operates

The terrorism threat to the US is increased due to diverted attention to COVID emergency

CDC published new recommendation for re-using PPE

Reports of “Zoom Bombing” (hackers entering into video teleconferences to steal information) has increased.

Models predict a death toll of 83 to 214,000 in the US.

Local critical infrastructure:

No outages or disruptions are reported or are appear to be likely as of today.

Predications/ Analysis:

- Due to diverted attention, the international and domestic terrorism threat is rapidly increasing. Responders should be reminded to remain vigilant and of the DHS guidelines for spotting suspicion activities and terrorism indicators.
- As we enter into the reported peak of this situation communication, along with sharing of individual branch capability and capacity is more important now than ever. "We don't know what we are going to need to know until we need to know it."
- First responder organizations should begin surveying members for pre-existing conditions and other complicating medical conditions. Responders found to have pre-existing conditions should be placed in limited citizen contact roles.
- A review of the 179 countries that report COVID-19 cases, only two (South Korea and China) have somewhat "flattened the curve" of NEW infections. Both showed flattening roughly 30 to 45 days after the initial spikes. The initial spike in the US began around 3-18-2020.
- Reduced stability in the supply chain along with increased fear and anxiety can be expected with today's "stay at home order."
- After 3 weeks of social distancing and schools being closed non-english speaking communities within Charles County are likely feeling further isolated due to a lack of language specific communications. Direct and increased messaging to Spanish speakers is likely necessary.
- As mass transit continues to shrink in availability, plans should be made to ensure those who rely on it for essential supplies and trips have delivery resources.
- LE and EMS screening protocols should include questions about recent travel to NY, NJ, CT, and FL.
- Immediate attention is needed to direct companies and organization on the proper processes and appropriate contact to use (Donation Manager at the EOC) to donate PPE and cleaning materials to essential personnel
- The next 7 days will likely see a stabilization of a majority of the grocery supply chain. However, the potential for disruption moving forward continues to remain high.
- FOIA and PIA request from media and citizens groups will likely begin to increase the longer this event lasts. "New normal" processes need to be established as soon as possible.
- Lack of child care options will likely add to family stress. Additional resources, activity and options are needed.
- JIC staff should substantially amplify community resource communications
- As we enter the 2nd week of social distancing stress, anxiety, and fear will likely increase. Continuous reminders of patience and focusing on kindness will become increasingly important.
- Many stores restock overnight. Seniors and the vulnerable populations should be strongly encouraged to shop during the early morning hours when supplies are likely to be at their highest.

- As testing increased the confirmed cases in MD will increase. This will likely cause additional life restrictions.
- Supply chain issues will continue and likely increase as further life interruptions and travel restrictions are ordered. The possibility of violence increases as stress increases, especially at grocery stores.
- Commanders of responders and essential staff should have robust plans for potential quarantines and updated continuity of operations including plans for diminished manpower. Further, responder organizations should begin reviewing existing integration plans with the National Guard.
- Obtaining medical supplies and PPE will continue to be an issue for the foreseeable future. All services should use the command ordering process so orders can be tracked.
- The community of Charles County is showing increased signs of pulling together and assisting one another. The JIC should continue to encourage civility and increase positive press of good news stories occurring throughout our community.

Respectfully submitted by Jason Stoddard

Law Enforcement Branch Briefing

COVID-19 Charles County IMT

April 1st, 2020

Buildings:

Charles County Sheriff's Office: District 1 Lobby is closed for scheduled remodeling. The District 1 clerks have moved the CCDC Annex building in the same parking area and that lobby is open as normal. All other buildings have normal public access.

Maryland State Police: Restricted to public

Maryland Transportation Authority: Closed to Public

La Plata Police Department: Closed to the public

Natural Resources Police: Building Closed

Operations:

Charles County Sheriff's Office: Operations have gone to emergency schedule in accordance with a CCSO level 3 All-Hazards activation. Patrol operational periods are 12 hours from 0700-1900 and 1900-0700. All other operations sections running with normal services being provided from modified locations. Services provided have not been reduced or augmented as of now.

Maryland State Police: Operations as normal

Maryland Transportation Authority: Operations as normal

La Plata Police Department: Operations as normal

Natural Resources Police: Operations as normal

PUI:

Charles County Sheriff's Office:

- 1 officer quarantined (positive test); 1 CO positive test (quarantined)
- 7 officers isolated (no test pending)
- 1 CO isolated (test pending)
- 7 civilians isolated (2 test pending)
- 17 Recruits isolated (one out of county test pending)

Maryland State Police: None local

Maryland Transportation Authority: None local

La Plata Police Department: None local

Natural Resources Police: None local

Crime Stats:

All crime trends are down.

TRU:

Charles County Sheriff's Office: Open and working; triage site for COVID-19 calls for service.

Maryland State Police: Open and working

Maryland Transportation Authority: Open and working

La Plata Police Department: Open and working

Natural Resources Police: Open and working

Call Restrictions:

Charles County Sheriff's Office: None

Maryland State Police: None

Maryland Transportation Authority: None

La Plata Police Department: None

Natural Resources Police: None

Governor's Order Violations

Violation sustained calls for service: 15

Warnings: 14

Charges later: 0

On-scene arrest: 1

PUI Intake at CCDC: 2

Items of Note: (Not for redistribution)

None

***CHANGES IN RED**

Charles County Public Schools Briefing 4-2-2020
COVID Charles County

48-hour Priorities:

- Establishing instructional continuity
- Expanding and maintaining food service
- Maintaining tech support for digital learning
- Maintaining open communication with all stakeholders

Meals:

On 4/1/20 CCPS served 5445 meals. This total is up +33 from 3/31/20.

Sheetz has announced they are providing free food to needy children at participating stores.

- Sheetz is providing Kidz Meal Bagz program which will provide free food to help children and families in need as a result of the COVID-19 pandemic. Meal Bagz will be available all day starting Thursday, April 2 and will include a turkey sandwich, chips and a drink.
- Families interested in taking advantage of the free Kidz Meal Bagz program should go to participating Sheetz locations and ask an employee at the register for a meal. Families will be offered one bag per child and meals will be available daily while supplies last.
- The Kidz Meal Bagz program will be available at 293 stores across Pennsylvania, Maryland, Ohio, North Carolina, Virginia and West Virginia. The program will start April 2, 2020 and be available for a period of two weeks at which time it will be reevaluated based on community need.

Closure:

School closure through at least 4-24-20.

CCPS has sent out a survey to all stakeholders to get feedback regarding "Spring/Easter Break". Stakeholders were to choose one of the four options below prior to 12:00 PM April 2, 2020:

- Eliminate April 10, 13 and 14 as closure dates and require distance learning to continue. This option would allow CCPS to count these dates as three days of instructional learning.
- Shorten the break/option1 – CCPS would close on Friday, April 10 and open for distance learning on Monday, April 13 and Tuesday, April 14. This option would allow school to end earlier in the summer. Travel restrictions may be lifted by June.
- Shorten the break/option 2 – CCPS would close on Friday, April 10 and on Monday, April 13. Distance learning and work hours would resume Tuesday, April 14. This option would allow school to end earlier in the summer. Travel restrictions may be lifted by June.
- Keep it as scheduled – schools and offices closed on April 10, 13 and 14. No distance learning will take place - staff are off.

In addition, Dr. Hill sent a video update to all stakeholders to keep all informed. The link is attached: <https://www.ccboe.com/ccboetv/?videos=distance-learning-update>

Instruction:

Today all teachers are reaching out to their class rosters with communications and to inform them of their launch of distance learning beginning Friday. Tomorrow, April 3rd, all CCPS will begin to use the distance learning and teachers will be available for students and parents via email for office hours.

Community Wifi:

Henson's WiFi van has been moved to the rear parking lot due to impending construction to take place at Henson MS.

Misc:

Yesterday and today CCPS has donated 19 digital temporal thermometers to the DES for distribution according to need.

Respectfully submitted by Jason Stoddard and Michael Meiser

Potential for Terrorists to Exploit Challenges Associated with COVID-19

Pandemics and other national crises create unprecedented challenges that terrorists could exploit to conduct attacks against an already stressed society, and strained government and public safety systems. Violent extremists—irrespective of affiliation, grievance or ideology—may try to capitalize on the current global health crisis by exploiting conspiracy theories and online discussions about how to take advantage of the spread of COVID-19 to carry out attacks. While most citizens isolate in their homes, public safety personnel, hospitals and establishments, such as supermarkets and pharmacies, serve the largest number of co-located individuals, making them potentially attractive attack targets.

SCOPE: This product highlights the potential for terrorists to take advantage of the challenges associated with a National crisis such as COVID-19, and provides general considerations and resources for public safety personnel.

On 24 March, law enforcement authorities attempted to make a probable cause arrest on a suspect in the Kansas City area. The suspect planned to use a vehicle-borne improvised explosive device to cause severe harm and mass casualties during the COVID-19 pandemic at a local hospital. During the attempted arrest, the suspect was killed.

CONSIDERATIONS:

- Ensure communications mechanisms to disseminate emergency public safety information.
- Prevent tunnel vision and aid in robust and rapid response in the event of a terrorist incident during a crisis through well-synchronized and ongoing information sharing efforts among federal, state, local, tribal and territorial government personnel.
- Continuously evaluate response staffing and plans to ensure adequate resources are available in the event of an attack coincidental to other crises.
- Ensure Unified Incident Command Systems are flexible enough to expand and contract based on the crisis and the current terrorist threat environment.
- Maintain awareness of evolving public safety responsibilities which may place officers in non-traditional roles such as corpse retrieval, providing medical aid, or hospital transport, and that could potentially further stress the public safety system.

RESOURCES:

- Centers for Disease Control and Prevention (CDC) - What Law Enforcement Personnel Need to Know About Coronavirus Disease 2019 (COVID-19) <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-law-enforcement.html>
- Federal Emergency Management Agency (FEMA) - Information for First Responders on Maintaining Operational Capabilities During a Pandemic – Revised March 2020 https://www.usfa.fema.gov/downloads/pdf/publications/first_responder_pandemic_operational_capabilities.pdf



1 APRIL 2020
AUTHORED BY NCTC, DHS, FBI

NOTICE: This is a Joint Counterterrorism Assessment Team (JCAT) publication. JCAT is a collaboration by the NCTC, DHS and FBI to improve information sharing among federal, state, local, tribal, territorial governments and private sector partners, in the interest of enhancing public safety. This product is **NOT** in response to a specific threat against the United States. It provides general awareness of, considerations for, and additional resources related to terrorist tactics, techniques and procedures, whether domestic or overseas. Consider the enclosed information within existing laws, regulations, authorities, agreements, policies or procedures. For additional information, contact us at JCAT@NCTC.GOV.

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(U//FOUO) Outlook: Violent extremist calls to intentionally (and almost certainly criminally) transmit the SARS-CoV-2 virus, while crudely viable, are highly unlikely to result in measurable spread of the virus but likely to continue.

(U//FOUO) Crude Viability, Measurement Difficulties and Mitigation: Transmitting the SARS-CoV-2 virus is relatively effortless, based on known transmission routes and survivability of the virus outside a host; SARS-CoV-2 virus spreads through close contact and droplets. Fomite transmission (i.e., viral particles left on surfaces and close-contact aerosol) is also plausible, but present gaps in knowledge preclude tangible estimates.⁶ However, doing so purposefully with measurable success is encumbered by an array of presently unknown virus characteristics as well as transmission mitigation measures currently in place. Violent extremist attempts are unlikely to result in high incidents of intentional self-exposure and resulting transmission.

- » (U) SARS-CoV-2 virus replicates in the throat, and infectious virus is detectable in throat and lung tissue for at least 8 days before symptom onset. The number of viable viral particles potentially deposited on surfaces depends on several factors (i.e., type and amount of bodily fluid, changes in viral load linked to disease progression, etc.). Additionally, the human infectious dose of SARS-CoV-2 virus remains to be quantified.⁷
- » (U) While initial data on SARS-CoV-2 virus environmental stability suggests persistence on stainless steel or plastic surfaces for at least three days (at 21-23 degrees Celsius with 40 percent relative humidity [RH]), studies of other coronaviruses suggest survival on non-porous materials up to 9 to 10 days, and 3 to 5 days on porous surfaces in air-conditioned environments (20-25 °C, 40-50 percent RH).⁸
- » (U//FOUO) Along with exposure to environmental conditions, non-pharmaceutical interventions (i.e., school closures, isolation, handwashing), currently in effect nationwide, constrain willful spread of the virus.

(U//FOUO) Threat Forecast: Whether violent extremists are willing to risk personal health without measurable success is unknown. The lack of quantifiable success and possible violent extremist actors' concerns for their own health may feed into the decision calculus to seek out exposure to infect others. As many COVID-19 cases are asymptomatic, violent extremist actors would not necessarily know whether or not they carry the virus.

- » (U//FOUO) Even if foreign terrorist leaders were to promote illicit procurement of the virus, the inherent technical challenges related to virus identification, extraction, and scaling almost certainly exceed the expertise of all but the most sophisticated actors.
- » (U//FOUO) To date, there are no corroborated US reports of violent extremists' intentional self-infection for the purpose of bio attack. While a 24 March Department of Justice memo and subsequent news media reports cautioned that intentional spread could be prosecuted as a terrorist act, violent extremist rhetoric, hoaxes and other incidents related to intentional spread are likely to continue.⁹ Law enforcement and other first responders should exercise caution when interacting with persons claiming to be infected.

(U) Report Suspicious Activity

(U) To report suspicious activity, law enforcement, Fire-EMS, private security personnel, and emergency managers should follow established protocols; all other personnel should call 911 or contact local law enforcement. Suspicious activity reports (SARs) will be forwarded to the appropriate fusion center and FBI Joint Terrorism Task Force for further action. For more information on the Nationwide SAR Initiative, visit <http://nsi.ncirc.gov/resources.aspx>.

(U) Tracked by: HSEC-6.1, HSEC-6.2, HSEC-8.1, HSEC-8.2, HSEC-8.3, HSEC-8.5, HSEC-8.6, HSEC-8.8.

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Charles County Volunteer Firemen's Association, Inc.

Post Office Box #21, La Plata, Maryland 20646

April 2nd, 2020

Re: Volunteer Fire/EMS Brief

Items Being Worked On:

- Reduction of Force Policy
- Station Health Screening Policy
- Distribution of Hand Sanitizer occurring today and tomorrow.

Stations/Apparatus:

- No Fire or EMS Stations with any contamination issues.
- No Apparatus with any contamination issues.
- No Service Deliverability Issues with Apparatus O.O.S.

Personnel (14 Members / 6 Stations):

- Station 1 - 1 Member --- Due to possible work exposure. Effective March 30th
- Station 2 - 3 Members --- Due to Domestic Travel to New York. Effective March 25th
- Station 7 - 2 Members --- In County EMS Call. 14 days ends this Saturday. No Issues reported so far.
- Station 8 - 1 Member ---- Due to Family Member with Positive Test. Effective April 1st.
- Station 11 - 5 Members --- (1-DC FF, 2- Due to Family Members being Quarantined, 1-DES/Hospital Employee, 1-Hospitalized at John Hopkins expected to be released today.)
- Station 12 - 2 Members --- In County EMS Call. Effective March 30th

Incidents/Call Volume:

- No Major Incidents to Report
- Overall Call Volume is Below Average
- April 1st – 47 EMS Related Responses / 12 Fire Related Responses

Respectfully Submitted,

Mark A. Kaufmann, Jr
County Fire Chief
Charles County Maryland



Charles County Volunteer Firemen's Association, Inc.

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