

Charles County COVID-19

Incident Action Plan



Operational Period

From

4/30/20
8:00

To

5/2/20
8:00



INCIDENT OBJECTIVES (ICS 202)

1. Incident Name Charles County COVID-19	2. Operational Period	Date From: 4/30/20 Date To: 5/2/20	Time From: 8:00 Time To: 8:00																				
3. Objectives																							
<p>A. Maximize the safety and overall health and well-being, including mental health of the residents, county employees, and responders, throughout this incident.</p> <p>B. Conduct surveillance of COVID-19 cases in collaboration with the health department, hospital, physicians, and other health care providers.</p> <p>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.</p> <p>D. Prepare for and handle the human reaction crisis contingencies in long terms.</p> <p>E. Prepare for long term order maintenance.</p> <p>F. Prepare for and sustain our communities' hierarchy of needs throughout this incident.</p> <p>G. Determine trigger points for Continuity of Operations for all agencies, including government, public safety, schools, hospital, and other critical infrastructure systems.</p> <p>H. Ensure all practical steps to "Slow the Spread" of transmission of COVID-19.</p>																							
4. Operational Period Command Emphasis																							
<p>General Situational Awareness</p> <p>" Complacency Kills! Check yourself, check your partner, when in doubt, refer back to the Special Orders or SOP's."</p>																							
<p>5. Site Safety Plan Required? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Approved Site Safety Plan(s) Located at:</p>																							
<p>6. Attachments (check if attached)</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 2px;"><input checked="" type="checkbox"/> ICS 203</td> <td style="width: 30%; padding: 2px;"><input type="checkbox"/> ICS 207</td> <td style="width: 10%; padding: 2px; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 30%; padding: 2px; text-align: center;">ICS 214</td> </tr> <tr> <td><input type="checkbox"/> ICS 204</td> <td><input checked="" type="checkbox"/> ICS 208</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">_____</td> </tr> <tr> <td><input type="checkbox"/> ICS 205</td> <td><input type="checkbox"/> Map/Chart</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">_____</td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 205A</td> <td><input type="checkbox"/> Weather</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">_____</td> </tr> <tr> <td><input type="checkbox"/> ICS 206</td> <td><input type="checkbox"/> Forcast/Tides/Currents</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;">_____</td> </tr> </table>				<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 207	<input checked="" type="checkbox"/>	ICS 214	<input type="checkbox"/> ICS 204	<input checked="" type="checkbox"/> ICS 208	<input type="checkbox"/>	_____	<input type="checkbox"/> ICS 205	<input type="checkbox"/> Map/Chart	<input type="checkbox"/>	_____	<input checked="" type="checkbox"/> ICS 205A	<input type="checkbox"/> Weather	<input type="checkbox"/>	_____	<input type="checkbox"/> ICS 206	<input type="checkbox"/> Forcast/Tides/Currents	<input type="checkbox"/>	_____
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<p>7. Prepared by: Name: <u>Joe Hoffmaster</u> Position/Title: <u>PSC</u> Signature: _____</p>																							
<p>8. Approved by Incident Commander: Name: <u>Michelle Lilly</u> Signature: _____</p>																							
ICS 202	IAP Page <u>2</u>	Date/Time: <u>April 29, 2020 @15:00</u>																					

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name Charles County COVID-19		2. Operational Period Date From: 4/30/20 Date to: 5/2/20 Time From: 8:00 Time to: 8:00		
3. Incident Commander and Staff		7. Operations Section		
UC	Dr. Howard Haft	Chief		
UC	Michelle Lilly	Deputy		
Deputy	Melanie Gardiner			
Deputy	Tony Rose			
Safety Officer	John Filer	a. Branch I	Public Health	
Public Information Office	Jennifer Harris	Branch Director	Ranston Harvey	
Intell Officer	Jason Stoddard	Deputy	Mary Lilly	
4. Agency Representative		DSS		
Agency	Name	Liaison Officer	Tom Brown	Robbie Jones
Intell officer Deputy	Mike Meiser	Hospital	Bill Grimes	John Filer
Lifestyles	Sandy Washington	Nursing Homes	Tiffany Brown	
Public Schools	Mike Meiser	Health Care Providers	Melanie Gardiner	
		Rehab Centers	Eddie Kratzer	
		Assisted Living	Rosalinda Horton	
		Funeral Services	Cataria Patterson	
		b. Branch II	Public Safety	
		Branch Director	Mark Kaufmann Jr.	
		Deputy	Scott Herbert	D J Mills
		DES EMS	Steve Finch	
		Vol EMS	Andrew Spalding	Mitchell Lewis
		Vol Fire	Scott Herbert	
		Logistics	Scott Herbert	
5. Planning Section		c. Branch III	Law Enforcement	
Chief	Joe Hoffmaster	Branch Director, CCSO	Chris Schmidt	
Deputy	Bill Smith	Deputy, CCSO	Cari Baker	
Resource Unit		La Plata Police	Chris Becker	
Situation Unit	Jen Adams	MD State Police	Thomas Quade	
Documentation Unit	Bill Smith	DNR	Catherine Meddelin	
Demobilization Unit		MdTA	Brian Lawrence	
Human Resources				
Technical Specialists	(name / specialty)	d. Branch IV	Infrastructure	
		Branch Director		
		Deputy		
		SMECO	Jennifer Raley	
		Grocery		
6. Logistics Section		Propane		
Chief	Nick Ellis	Natural Gas		
Deputy	need to fill			
Support Branch				
Donations	Ed Tucker			
Supply Unit				
Facilities Unit	Nick Ellis	10. Finance Section		
Ground Support Unit		Chief	Jennifer Adams	
Service Branch		Deputy		
Service Branch Dir.		Time Unit		
Communications Unit	Jeffrey Clements	Procurement Unit		
Medical Unit		Comp/Claims Unit		
Security Unit		Cost Unit		
Food Unit				
9. Prepared by: Name: Joe Hoffmaster		Position>Title: PSC	Signature	
ICS 203	IAP Page 3	Date/Time: April 29, 2020 @ 14:00		

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name Charles County COVID-19		2. Operational Period Date From: 4/30/20 Date to: 5/2/20 Time From: 8:00 Time to: 8:00		
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UC	Dr. Howard Haft	Chief		
UC	Michelle Lilly	Deputy		
Deputy	Melanie Gardiner			
Deputy	Tony Rose			
Safety Officer	John Filer	a. Branch V	Governance	
Public Information Office	Jennifer Harris	Donna Fuqua	Linda Warner	
Intell Officer	Jason Stoddard			
4. Agency Representative		Charles County Govern.	Michele Lilly	
Agency	Name	Town of LaPlata	Chris Becker	
Intell officer Deputy	Mike Meiser	Town of Indian Head	Ryan Hicks	
Lifestyles	Sandy Washington			
CC Public Schools	Michael Meiser			
		b. Branch VI	Business	
		Branch Director	Darrell Brown	
		Deputy	Marcia Keeth	
		Economic Development	Darrell Brown	
		Chamber of Commerce	Bonnie Grady	
5. Planning Section		c. Group	Peer Support	
Chief	Joe Hoffmaster	Group Supervisor	Courtney Shannon	
Deputy	Bill Smith	Deputy	Pam Gant	
Resource Unit			Debbie Gianinni	
Situation Unit	Jen Adams			
Documentation Unit	Bill Smith			
Demobilization Unit				
Human Resources				
Technical Specialists	(name / specialty)	d. Branch VIII		
		Branch Director		
		Deputy		
6. Logistics Section				
Chief	Nick Ellis			
Deputy	need to fill	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	Jeffrey Clements	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:	April 29, 2020 @ 14:00	

COMMUNICATIONS LIST (ICS 205A)

1. Incident Name Charles County	2. Operational Period: COVID-19	Date From: Time From:	4/30/20 8:00	Date to: Time to:	5/1/2020 8:00
3. Basic Local Communications Information:					
Name - Last	Name-First	Representing	Email	Phone	
Adams	Jennifer	DES FSC	AdamsJen@Charlescountymd.gov		
Baker	Cari	CCSO	bakerce@ccso.us		
Becker	Chris	La Plata Police	cbecker@townoflaplata.org		
Brown	Darrell	Business Director Econ Dev	Brownd@charlescountymd.gov		
Cress	Lauri	Charles Regional Medical Center	lauri.cress@umm.edu		
Ellis	Nick	DES- Logistics	DESLogistics@charlescountymd.gov		
Filer	John	DES- Liaison	FilerJ@charlescountymd.gov		
Finch	Stephen	DES	FinchS@charlescountymd.gov		
Fuqua	Donna	PIO	Fuquad@CharlesCountyMD.gov		
Harris	Jennifer	PIO	HarrisJ@CharlesCountyMD.gov		
Hoffmaster	Joe	Planning Section	DESPlanning@charlescountymd.gov HoffmasJ@CharlesCountyMD.gov		
Kaufmann	Mark Jr	PS Branch Dir. Vol Fire Chief	markeng1trk@hotmail.com		
Konschak	Matt	NSWC IHD	matthew.konschak@navy.mil		
Lilly	Michelle	CCDES Director, Unified Command	LillyM@charlescountymd.gov		
Lilly	Mary	C C Dept. of Health	Mary.Lilly@maryland.gov		
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		
Rose	Tony	DES Deputy Director, Unified	RoseT@charlescountymd.gov		
Russell	Cindy	DSS	cindy.russell@maryland.gov		
Schmidt	Louis Chris III	CCSO	schmidtlo@ccso.us		
Seaman	Kevin	CCEMS	seamank@charlescountymd.gov		
Smith	Bill	CCVFA/CCAEMS	Smithb@ccvfireems.org		
Spalding	Andrew	Volunteer EMS Chief	chiefems@ccvfireems.org		
6. Prepared by: Name: <u>Joe Hoffmaster</u> Title: <u>PSC</u> Signature: _____					
ICS 205A	IAP Page <u>5</u>	Date/Time: <u>April 29, 2020</u> @ <u>15:00</u>			

COMMUNICATIONS LIST (ICS 205A)

1. Incident Name Charles County	2. Operational Period: COVID-19	Date From: Time From:	4/30/20 8:00	Date to: Time to:	5/1/2020 8:00
3. Basic Local Communications Information:					
Name - Last	Name-First	Representing	Email	Phone	
Stoddard	Jason	Intell	jstoddard@ccboe.com		
Ranston	Harvey	CCDOH	Ranston.harvey@maryland.gov		
Laschatt	Lisa	CCDOH	lisa.laschatt@maryland.gov		
Meiser	Michael	CCPS	mlmeiser@ccboe.com		
EOC- CC		CCEOCC	DESEOC@charlescountymd.gov		
Cherry	Lori	LOGS- Deputy	Cherry@charlescountymd.gov		
Herbert	Scott	PS LOGS	sherbert@hvdems.org		
Haft	Howard	CCDH	Howard.haft@maryland.gov		
Raley	Jennifer	SMECO	Jennifer.Raley@SMECO.Coop		
Farr	Courtney	SMECO	Courtney.Farr@SMECO.Coop		
Law	Natasha	SMECO	Natsha.Law@SMECO.Coop		
Teleconference #			1-872-240-3212		
Tucker	Ed	Donations	DESDonations@Charlescountymd.gov Etucker@Charlescountymd.gov		
Barnes	Raena	DH-Liaison	raena.barnes@maryland.gov		
Wolf	Theresa	PH-DSS	Therese.Wolf@maryland.gov		
Higgins	David	Safety Officer-Assistant	HigginsD@charlescountymd.gov		
Jones	Robbie	HD-Liaison	JonesRob@Charlescountymd.gov		
Hicks	Ryan	Indian Head	ryan@townofindianhead.org		
Lewis	Mitchell	Volunteer EMS Chief, Assistant	mlewis@WaldorfVFD.com		
Mott	Robert (Bob)	VEIP Manager Document Facil.	capt302a@gmail.com		
Rands	Ray	VEIP Manager	raymond.rands@maryland.gov		
Edge	Bill	CCSO-Safety			
Peer	Support	Peer Support Team	DESPeersupport@charlescountymd.gov		
Courtney	Shannon	Peer Support Team Leader	Shannonc@charlescountymd.gov		

SAFETY MESSAGE/PLAN (ICS 208)

1. Incident Name Charles County COVID-19	2. Operational Period	Date From: 4/30/20	Date To: 5/2/20
		Time From: 8:00	Time To: 8:00
3. Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan: <p style="text-align: center;">"Complacency Kills! Check yourself, check your partner, when in doubt, refer back to the Special Orders of SOP's."</p>			
<p>1. Total identified PUI's transported as of 4/29: 500 Total # of patients testing positive : 98</p> <p>2. PPE stockpiles remain stable with an estimated supply range of 10+ days based on current call volumes.</p> <p>3. Revision to EMSOP Special Order 2020-01 Version 4.0 has been completed and disseminated to staff.</p> <p>4. As this is a rapidly changing landscape, leaders should review any changes with their personnel each morning.</p> <p>5. Speical Order 2020-04 Version 1.0 was released today. New guidelines for personnel at the beginning of their shift, end of their shift and at the station.</p> <p>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.</p> <p>7. The County's Peer Support Team has been activated and will make weekly wellness checks with our County's first responders.</p> <p>8. Please remember that PPE caches are for EVERYONE. We are all in this TOGETHER so there is NO career and volunteer PPE caches.</p> <p>9. Under the approval of the EOC and to keep congruent with the CDC and Governor Hogan's reccomendations, Safety has approved the use of simple face masks (commercial or crafted) in the public arena. Per SOP, N95's are to be used for all patient contacts with reuse guidelines in place per the CDC recomendations.</p> <p>10. The Viral Pandemic Triage Protocol (SO 2020-02) starts today for all EMS clinicans. Please make sure you document accordingly in ELITE.</p>			
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 29, 2020</u> @ 14:00	

ACTIVITY LOG (ICS 214)

ACTIVITY LOG (ICS 214)

EOC Operational Period Meeting Schedule

Time	<u>Meeting Schedule</u>	<u>Attendees and Mission</u>	<u>Deliverables</u>
7:30	Hospital Liaison	Attended by Hospital Liaison Officer to communicate patient count numbers, PUI's, PUI's transported by EMS	PUI's transported by EMS. Follow up information passed to Infection Control Officers.
8:00	EOC UC Objectives Meeting	Attended by Unified Command and Planning Section to adjust the objectives and voice concerns for the upcoming operational period.	Post Objectives Changes to Command and General Staff
9:30	Strategy Meeting (C&GS) modified	Attended by Unified Command and General Staff to adjust the objectives and voice concerns for the upcoming operational period.	Post Strategy Changes to Branch Directors
After 09:30	BRANCH Tactics Meeting	Attended at Branch level, Branch Directors, PSC, LSC, SOF for the upcoming operational period.	Post unfilled needs outside of Branch Level to LOGS, PSC
After 09:30	Planning Meeting	Immediately following the Tactics meeting. Attended by Command Staff to support the IAP.	Open Action Items
10:00	State EMS Conference Call	EMS Chief conferences with MD State EMS Officials to share information and discuss	
13:00	Coordination Briefing	Attended by all Operations personnel especially Branch Directors and DIVS.	
15:00	IAP Deliverables Brief Deliverables	Following the Tactics meeting, all deliverables need to be sent to the Planning Section.	All Branch Directors will submit daily briefs and information bulletins to DESPlanning
15:00	MEMA Conference Call	Emergency Manager conference call with State Emergency Managers to discuss State Situational Updates	
16:00	IAP and Briefs Delivered	No Meeting	
16:15	Health Dept, EOC, Hospital	Conference call to discuss situational updates	
as needed	Critical Exchange	Branch Director, Section Chief, report up the chain	Written report up the chain as necessary to follow up after critical moment is being handled.



Safety Officer's Report

Charles County EOC

04-29-20

John Filer
Chief of EMS and SOD
Charles County Department of
Emergency Services

Today's Safety Message: "Complacency Kills! Check yourself, check your partner, when in doubt, refer back to the Special Orders or SOP's."

Total number of PUI's transported to date: 500

Total number of patients transported by EMS testing + for COVID: 98

Total number of first responders on self-isolation: 2

Total number of first responders on quarantine: 18

Total number of first responders + for COVID-19: 9

Total number of first responders out for COVID related mental health: 0

Total number of fire stations sanitized: 6

Daily Estimated PPE Burn Rate: 30 sets/day



10425 Audie Lane
La Plata, MD 20646



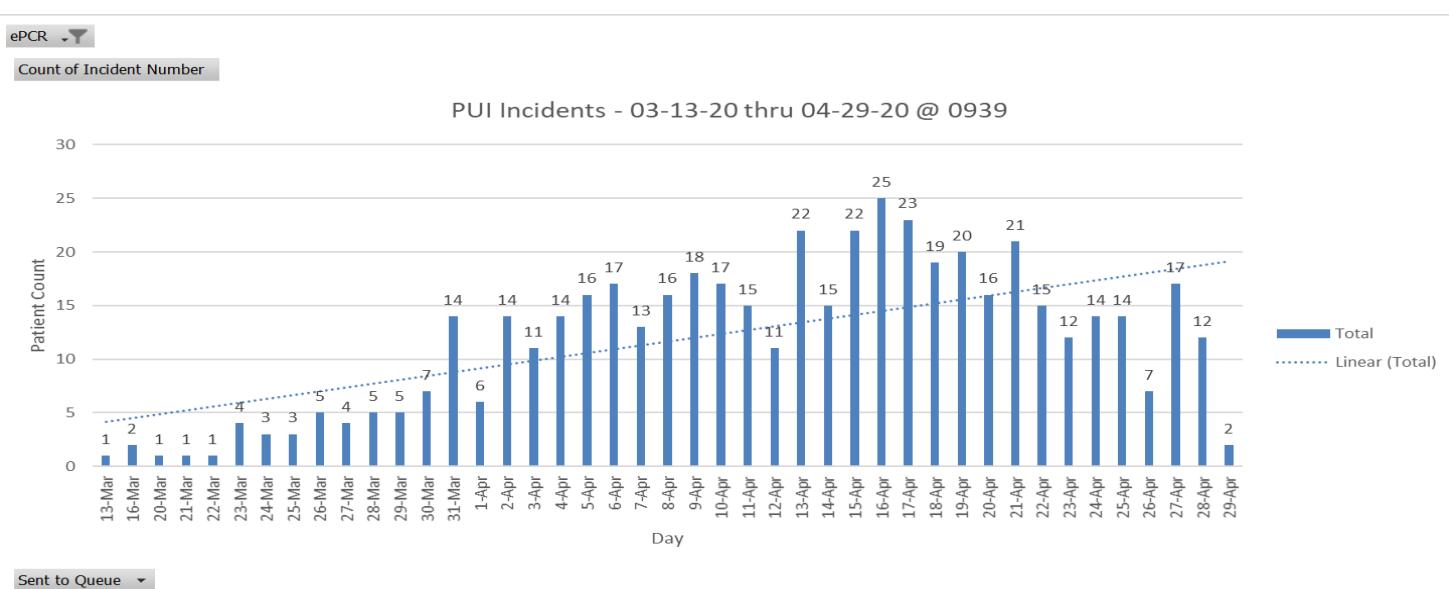
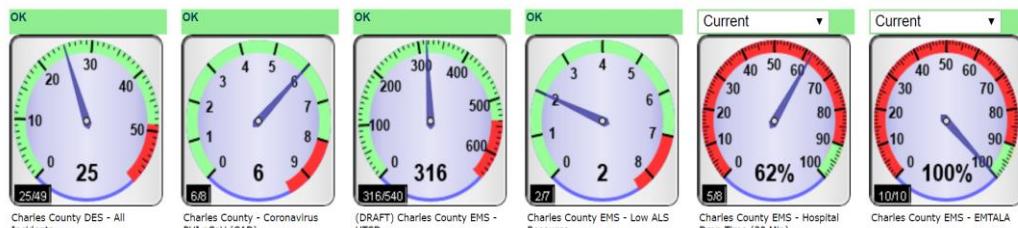
301-399-1143



DESSafety@charlescountymd.gov



www.charlescountymd.gov





COMPLACENCY

**COMPLACENCY
KILLS!**

Check yourself, check your partner, when in doubt, refer back to the Special Orders or Standard Operating Procedures.



PUBLIC HEALTH BRANCH BRIEFING COVID-19 PANDEMIC RESPONSE

April 29, 2020

GENERAL REPORTING INFORMATION

INFECTIOUS DISEASE

CASE COUNT—CHARLES COUNTY

As of 4/29/2020, total case count for Charles County is 557.

- *The line list with confirmed case counts for Charles County is continuously updated as lab reports are received from MDH, hospitals, and commercial laboratories.*
- *Contact tracing efforts are continuous with a focus on healthcare workers, EMS, and police.*

CALL CENTER UPDATE

- Operation time: 0800 to 2200.
- The numbers to call remain the same: 301.609.6717 or 301.609.6777
- Volume for new system is approximately 60 call per day.

MEDIA, SOCIAL MEDIA AND WEBSITE

- The MDH coronavirus website has been updated with nursing homes with COVID-19 cases.
<https://coronavirus.maryland.gov/pages/hcf-resources>

PARTNER/STAKEHOLDER OUTREACH

LTC/AL

- The Long-Term Care and Assisted Living call will be held Thursday, April 30 at 3 p.m. by CCDOH nurse liaisons.

ALL-PARTNER

- The all-partner call will be held Thursday, April 30 at 4 p.m. by CCDOH nurse liaisons.

EMPLOYEE SCREENING FORM

- Shared from MDH Office of Preparedness and Response

EPI SURVEILLANCE PROFILE FOR STATE

Case Investigation, Surveillance, and Infectious Disease Response (D, Blythe)

- 1) Latest case counts – total: 20,849 (90,080 negative)
- 2) New cases: 736

a) **Age distribution:**

- i) under 18 years - 2 %
- ii) in 19-64 age range 74%
- iii) in 65+ age range 24%

b) **Geographic distribution:**

- i) National Capital 53%

- ii) Baltimore Metro area 41%
- iii) Eastern Shore 3%
- iv) Southern 2%
- v) Western 1%
- c) Of cases, 53% female; 47% male
- d) Hospitalizations 117 new; total 4,402
- e) Deaths -- Total 985 (56) in Last 24hrs)
- f) Release from isolation – 1,361

CONFIDENTIAL – (INFORMATION BELOW IS FOR CORE PLANNING GROUP ONLY)

RESOURCE DISTRIBUTION

- 2 requests received 04/27/2020
- 2 orders fulfilled and facilities contacted
- Nurse liaisons will be also assessing LTC/AL needs and encouraging them to enter proper PPE requests and encourage pick up.

VOLUNTEERS

MARYLAND MEDICAL RESERVE CORPS

- 1 responder accepted into unit 04/27/2020

TESTING

VEIP TESTING SITE UPDATE

- Tested to Date as of April 23 (TTD): 557
- Appointment slots were adjusted to 120 appointments and were made available for Tuesday, April 28, 2020. 102/108 appointments were tested. (3 No shows; others 3 previously tested by other means.)
- There were no issues with the increase in test numbers, and more can be safely facilitated. Most patients show up well before scheduled appointment times.

EPIDEMIOLOGY AND SURVEILLANCE

Charles County

- As of 4/29 at 800 am, total case count for Charles County was 553 cases.
- There have been 41 confirmed deaths associated with COVID-19 (7.4%). Majority of deaths are associated with outbreaks in skilled nursing facilities.
- Average age of fatalities: 78.2 years
- Gender breakdown among confirmed fatalities: 71% Female, 29% Male
- Racial breakdown among confirmed fatalities:
- 61.9% Non-Hispanic White
- 35.7% Non-Hispanic Black
- 2.4% Hispanic
- Number of negative lab results: 2353
- Positivity Rate: 19% (similar to state positivity rate of 18.8%)

- Recovered and released from isolation: 133
- Partially recovered with improved symptoms: 39
- 127 or 23% required hospitalization
- Among confirmed cases, 330 (59.7%) Female; 223 (40.3%) Male
- 17% Healthcare Workers
- 2% First Responders: EMS, Fire, Law Enforcement
- 32% have underlying health conditions
- Age range of positive COVID-19 cases: 3 months-100 years

Age Distribution for Charles County cases:

- Under 18 years: 12 (2.1%)
- 18-64 years: 408 (73.8%)
- 65+ years: 133 (24.1%)

ESSENCE data for urgent care utilization at Patient First in Waldorf had no data warnings or alerts for Tuesday, April 28th. Patient volume was 27 patients. This is a small increase from Monday where they saw 19 patients. All were discharged to home for self-care. 8 patients presented with ILI or COVID-19 like symptoms on Tuesday. Diagnoses for ILI patients on Tuesday included shortness of breath, unspecified fever, acute maxillary sinusitis, contact and exposure to other viral communicable diseases, unspecified viral infection, other fatigue, cough, influenza due to other identified influenza virus with other respiratory manifestation. There was one CDC Classifier tag for Visit of Interest due to COVID19 exposure. There was another case with a CDC Classifier tag for Influenza. There were 4 cases with a chief complaint listed as “COVID 19 test.” Upon further review of the Patient First Waldorf website, they have begun drive up testing at their facility. Individuals call to make an appointment for testing. They are providing testing 7 days a week from 9 am to 1 pm and 2 pm to 6 pm. Here is the link to more information about the COVID19 drive up testing being offered at Patient First in Waldorf. <https://www.patientfirst.com/covid-19/covid-19-testing>

Surveillance of EMS call data and alerts

The epidemiologist monitors the Charles County DES First Watch trigger alerts. The number of daily trigger alerts for COVID-19 cases or COVID-19 persons under investigation was 19 on 4/27. EMS indicates that PUI's appear to be declining.

- 4/25: 16
- 4/26: 8
- 4/27: 19
- 4/28: 12

Racial breakdown: The data is now being captured in the MDH line lists of confirmed cases in REDCap. Data was accessed on 4/28 at 8:00 am. Please be cognizant that data may differ from numbers pulled later in the morning since new positive lab results are being received by the health department and entered into NEDSS throughout the work day. This explains any discrepancies in the total count or denominator being used to calculate each data measure.

Total: 541 cases on 4/28 at 8:00 am MDH line list assessed through REDCap:

Data on race and ethnicity changes daily as case investigations are completed and more information on demographics is updated in the electronic reporting disease system. Additionally, when there is an influx of new cases in electronic reporting disease system, data on race and ethnicity may not be available immediately for new cases since race information is not typically captured on a lab report and must be obtained during the investigation.

(Case counts with less than 7 cases should not be shared publicly. This data is confidential.)

Race Breakdown

- Asian: 11 (2.0%)
- Black/African American: 225 (40.7%)
- White: 121 (21.9%)
- Other or 2+ races: 20 (3.6%)
- Data not available: 176 (31.8%)

Ethnicity Breakdown

- Hispanic 12 (2.2%)
- Non-Hispanic 343 (62.0%)
- Declined to answer 38 (6.9%)
- Data not available 160 (28.9%)

Epidemiologist's note: Please use caution when drawing any conclusions regarding race or ethnicity. There is still a percentage where race data is not available, and information regarding this missing population cannot be assumed. Additionally, it should be noted that the greatest number of cases (58%) are the Waldorf zip codes of 20601, 20602, and 20603. Over half of the county population lives in those zip codes. Additionally, those zip codes have a very diverse population with minority populations comprising the majority of the zip code level population and with African Americans being the largest racial group in those zip codes.

Zip Code level data was also analyzed using the MDH line lists of confirmed cases in REDCap. Data was accessed on 4/29 at 8:00 am. *(Zip code level data with counts less than 7 cases cannot be shared publicly and must remain confidential.)*

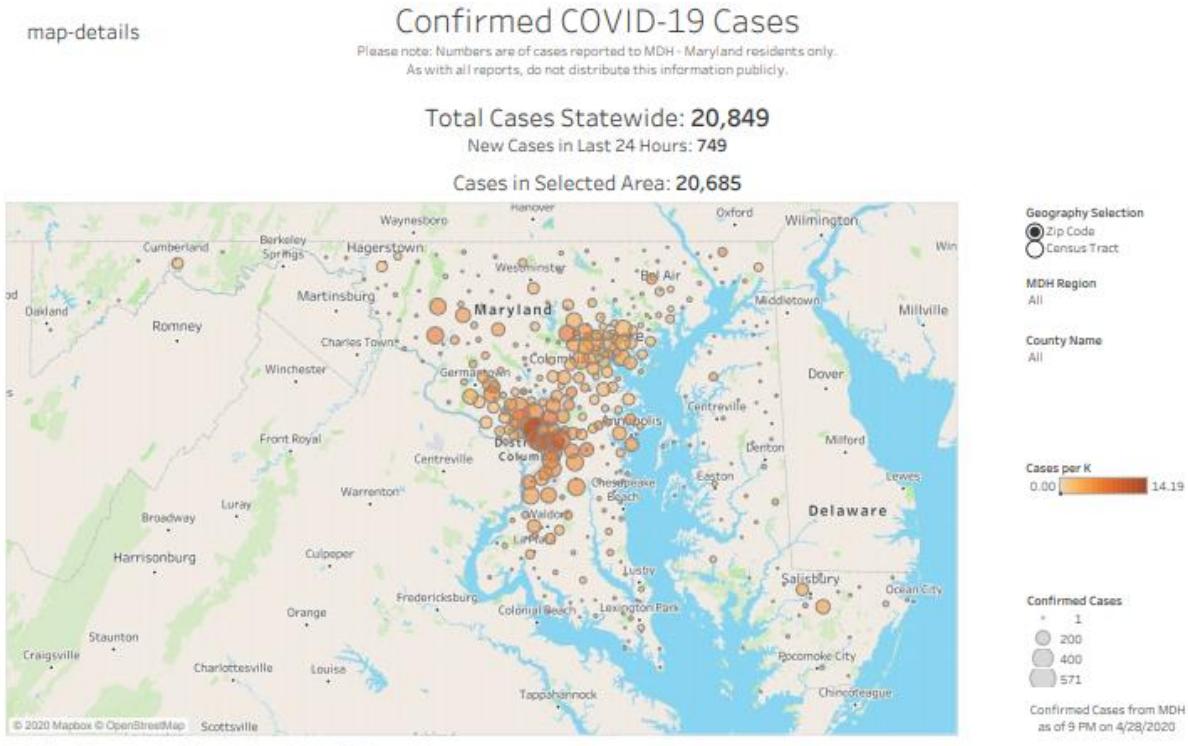
Confirmed cases by zip code:

Zip code:	4/28	4/29	Change from 4/28 to 4/29
20601	75	79	+4
20602	92	94	+2
20603	145	148	+3
20604	2	2	0
20607	10	10	0
20611	3	3	0
20613	19	20	+1
20616	15	16	+1
20622	3	3	0

20632	2	2	0
20637	15	15	0
20640	20	20	0
20645	1	1	0
20646	65	67	+2
20658	3	3	0
20662	8	9	+1
20664	5	5	0
20675	6	6	0
20677	5	5	0
20693	2	2	0
20695	36	36	0

ADDITIONAL INFORMATION: *This includes the following:*

- **Heat map of COVID cases in Maryland by zip code – provided through the Chesapeake Regional Information System for our Patients (CRISP)**



- Heat Map of Southern Maryland

[map-details](#)

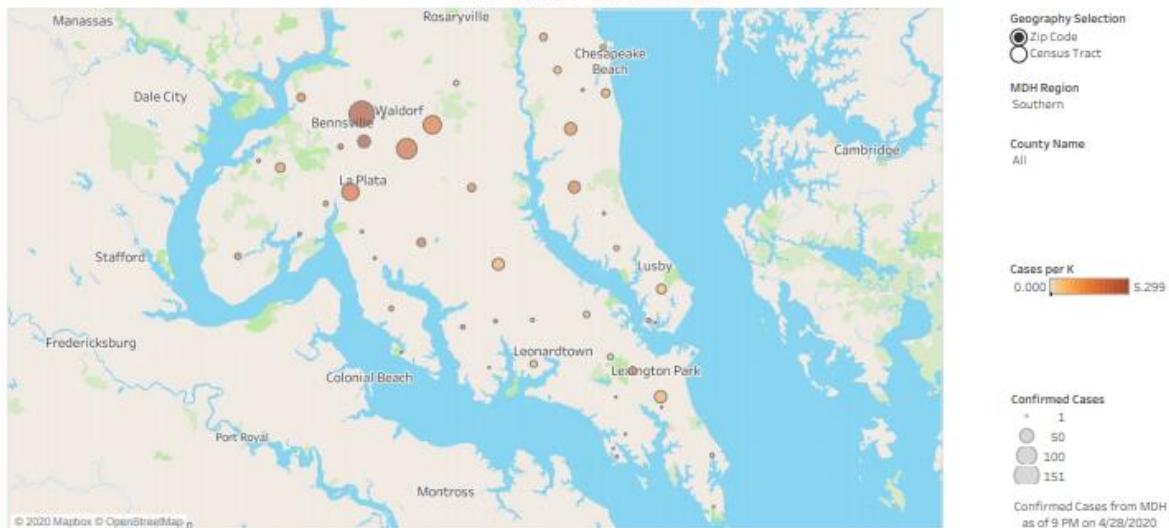
Confirmed COVID-19 Cases

Please note: Numbers are of cases reported to MDH - Maryland residents only.
As with all reports, do not distribute this information publicly.

Total Cases Statewide: 20,849

New Cases in Last 24 Hours: 749

Cases in Selected Area: 822



- Heat Map of Charles County

[map-details](#)

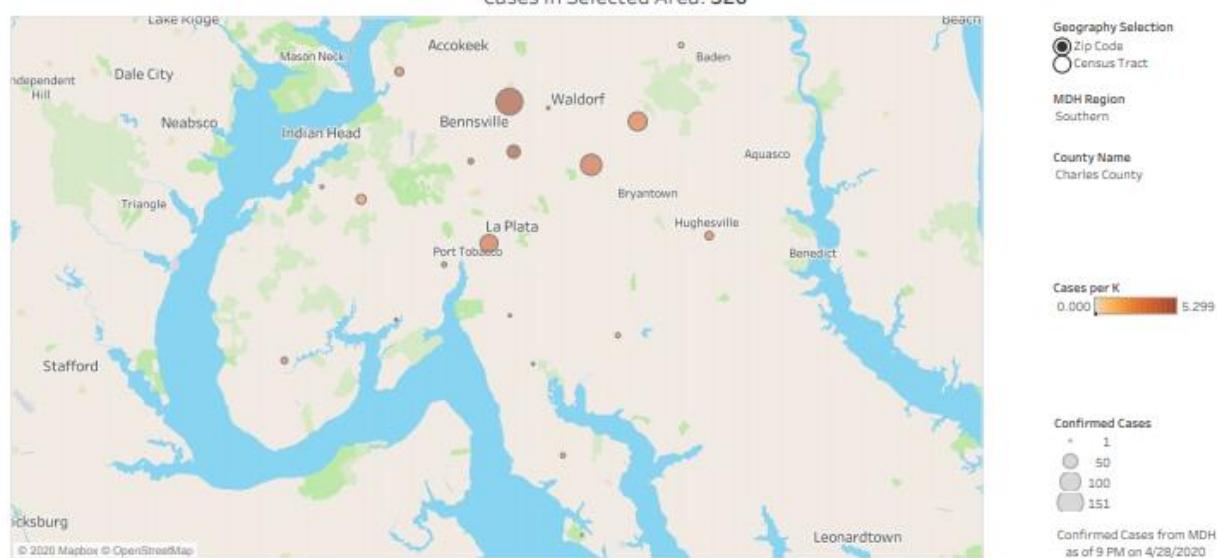
Confirmed COVID-19 Cases

Please note: Numbers are of cases reported to MDH - Maryland residents only.
As with all reports, do not distribute this information publicly.

Total Cases Statewide: 20,849

New Cases in Last 24 Hours: 749

Cases in Selected Area: 526



• Maryland Case Map

[map-details](#)

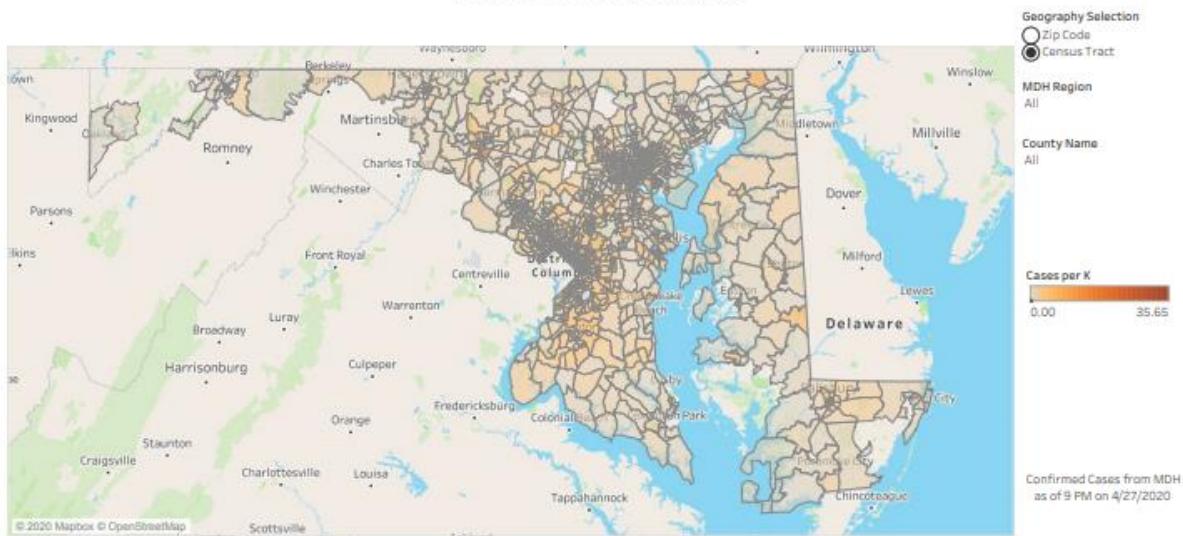
Confirmed COVID-19 Cases

Please note: Numbers are of cases reported to MDH - Maryland residents only.
As with all reports, do not distribute this information publicly.

Total Cases Statewide: 20,113

New Cases in Last 24 Hours: 636

Cases in Selected Area: 19,962



Zip Code and Census Tract population totals according to 2010 Census data.

• Southern Maryland Case Map

[map-details](#)

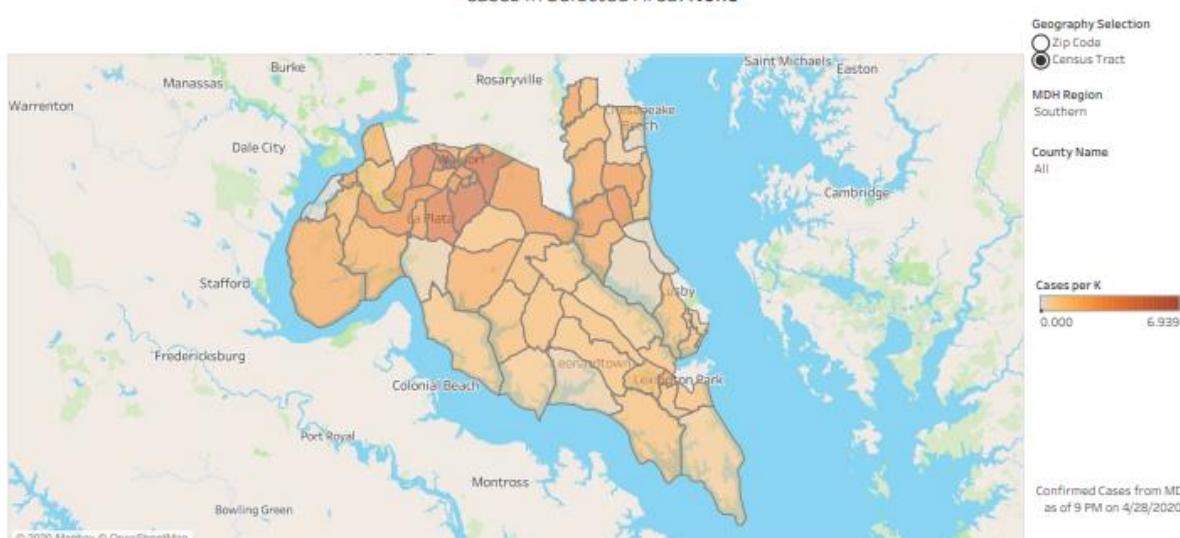
Confirmed COVID-19 Cases

Please note: Numbers are of cases reported to MDH - Maryland residents only.
As with all reports, do not distribute this information publicly.

Total Cases Statewide: 20,849

New Cases in Last 24 Hours: 749

Cases in Selected Area: None



Zip Code and Census Tract population totals according to 2010 Census data.

- Charles County Case Map

map-details

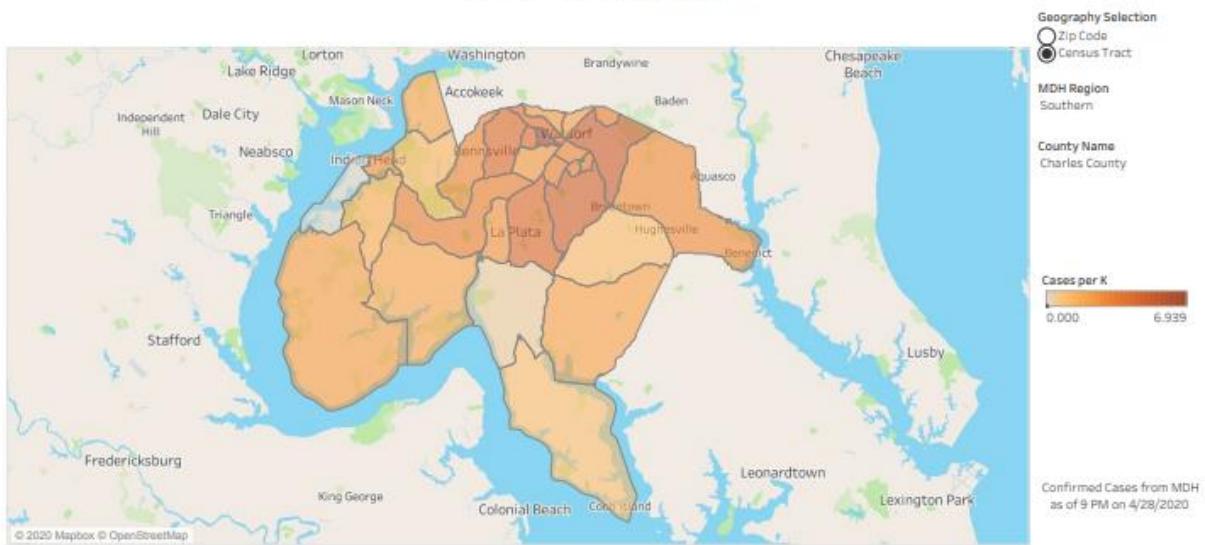
Confirmed COVID-19 Cases

Please note: Numbers are of cases reported to MDH - Maryland residents only.
As with all reports, do not distribute this information publicly.

Total Cases Statewide: 20,849

New Cases in Last 24 Hours: 749

Cases in Selected Area: None

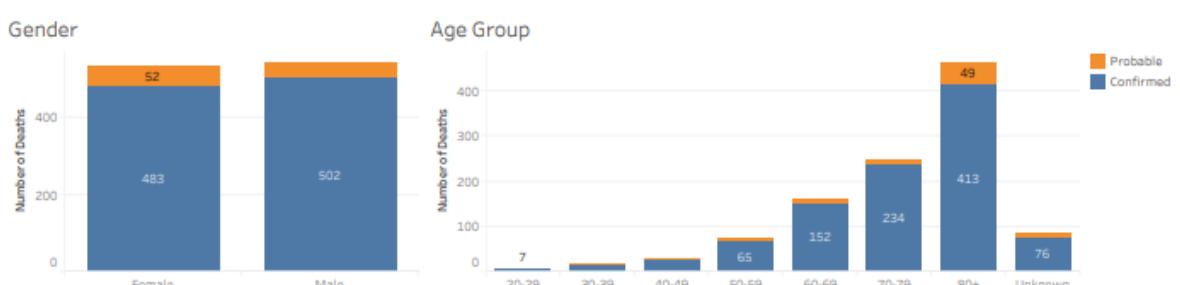


- Gender, Age, Region (Fatalities)

COVID-19 Fatalities

Please note: Numbers are of deaths reported by the Maryland Vital Statistics Administration - Maryland residents only.
As with all reports, do not distribute this information publicly.

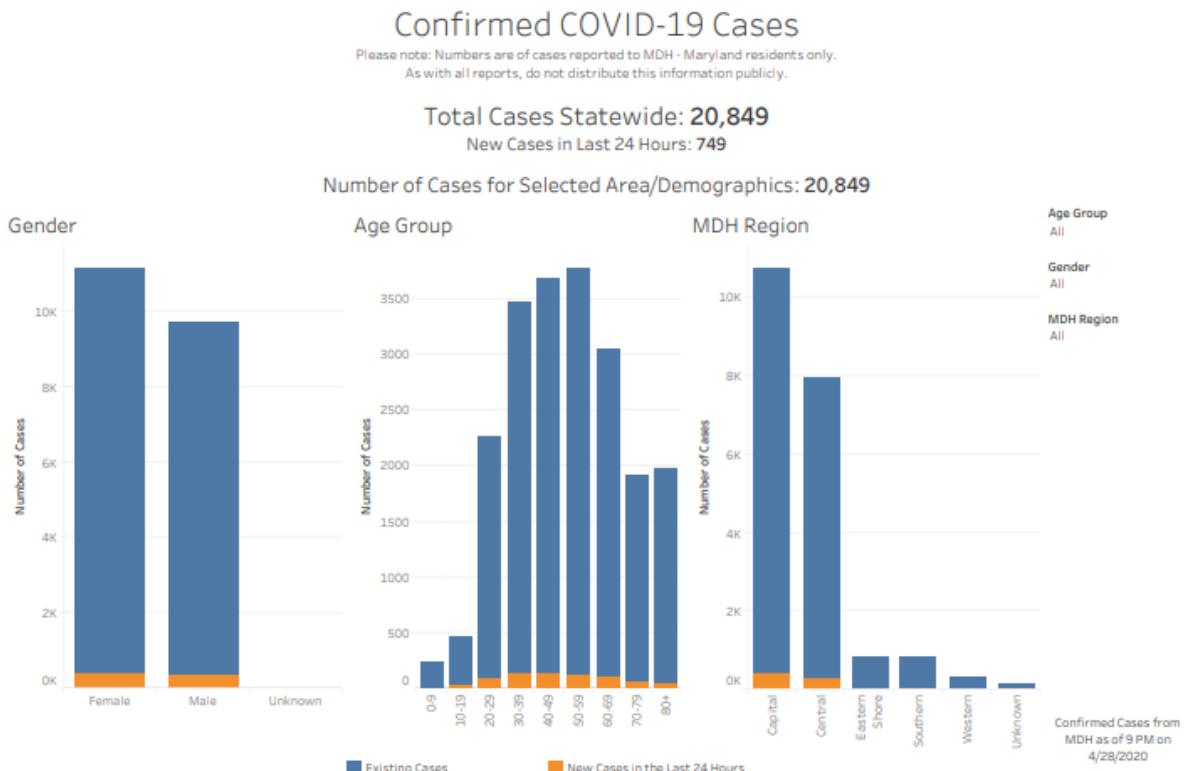
Total Deaths In Maryland: 1,078

Case Type
 All

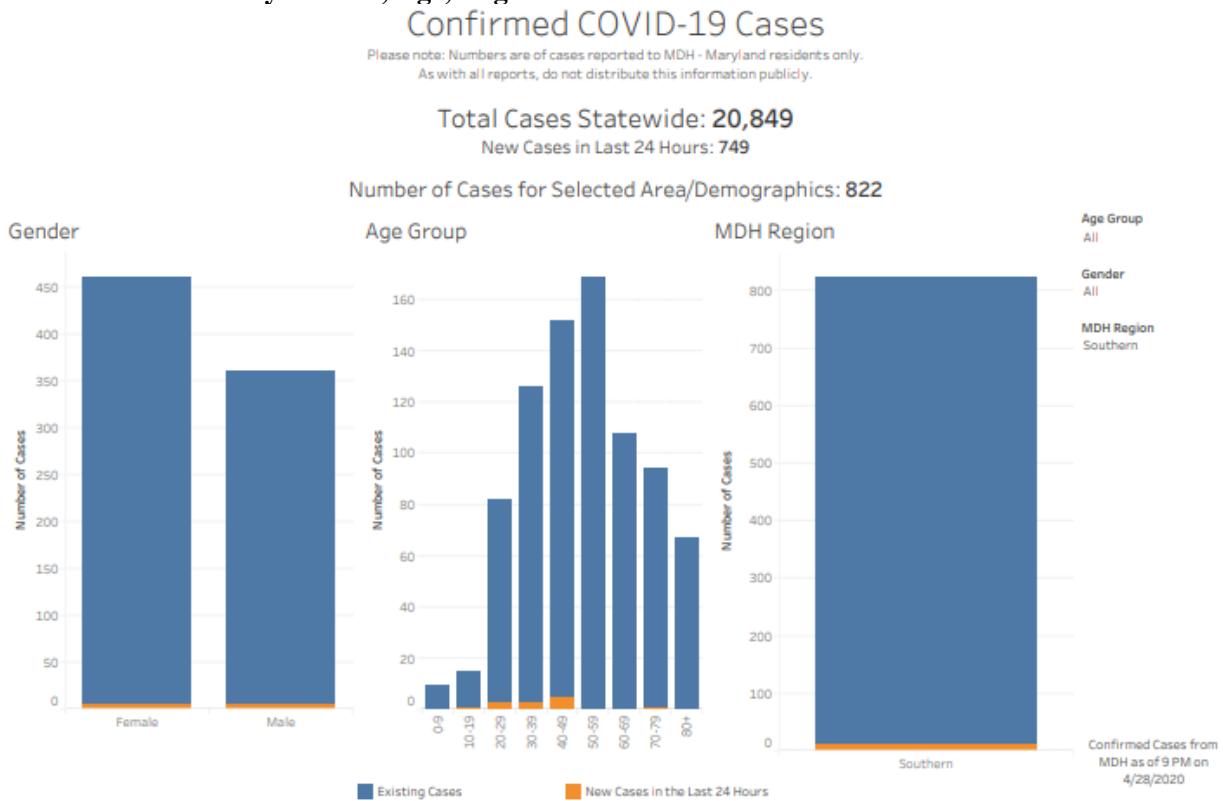
Confirmed death: Laboratory-confirmed positive COVID-19 test result
 Probable death: Death certificate lists COVID-19 as the cause of death but not yet confirmed by a laboratory test

Death Data
 available through
 4/29/2020

- **Gender, Age, Region (All)**



- **Charles County Gender, Age, Region**



- **Statewide Cases by Date**

Confirmed COVID-19 Cases

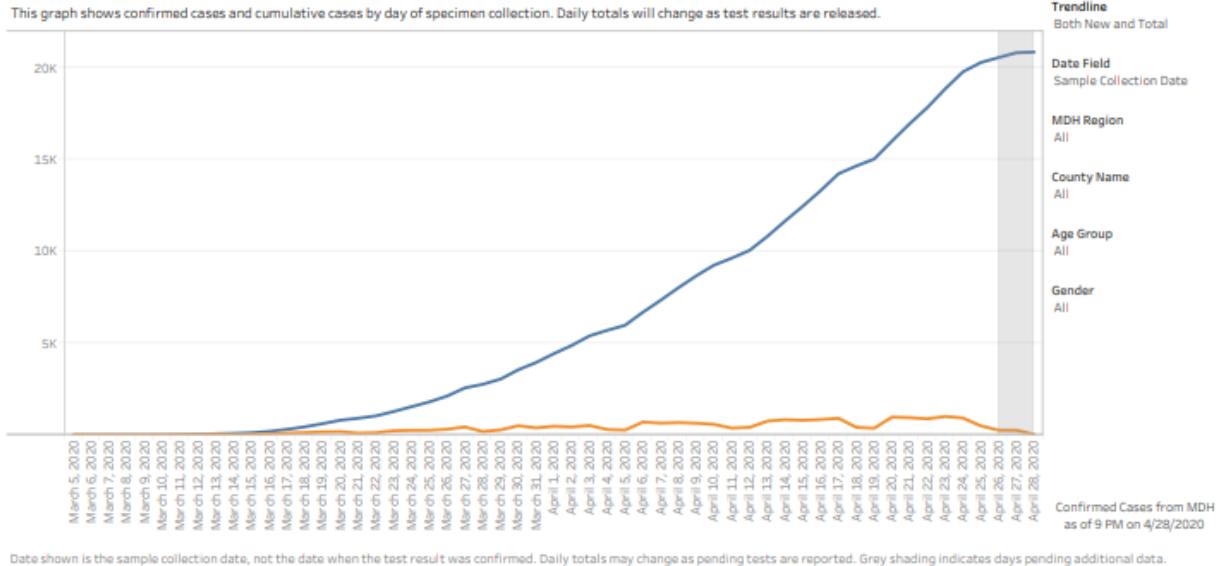
Please note: Numbers are of cases reported to MDH - Maryland residents only.
As with all reports, do not distribute this information publicly.

Total Cases Statewide: 20,849

New Cases in Last 24 Hours: 749

Number of Cases for Selected Area/Demographics: 20,849

This graph:



- **Southern Maryland Cases by Date**

Confirmed COVID-19 Cases

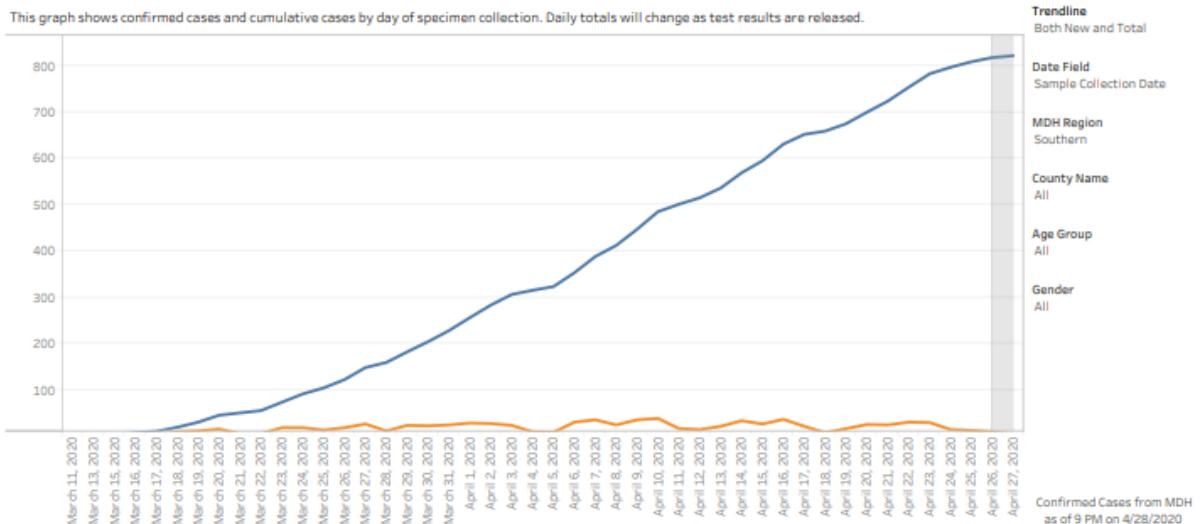
Please note: Numbers are of cases reported to MDH - Maryland residents only.
As with all reports, do not distribute this information publicly.

Total Cases Statewide: 20,849

New Cases in Last 24 Hours: 749

Number of Cases for Selected Area/Demographics: 822

This graph:



- Charles County Cases by Date

Confirmed COVID-19 Cases

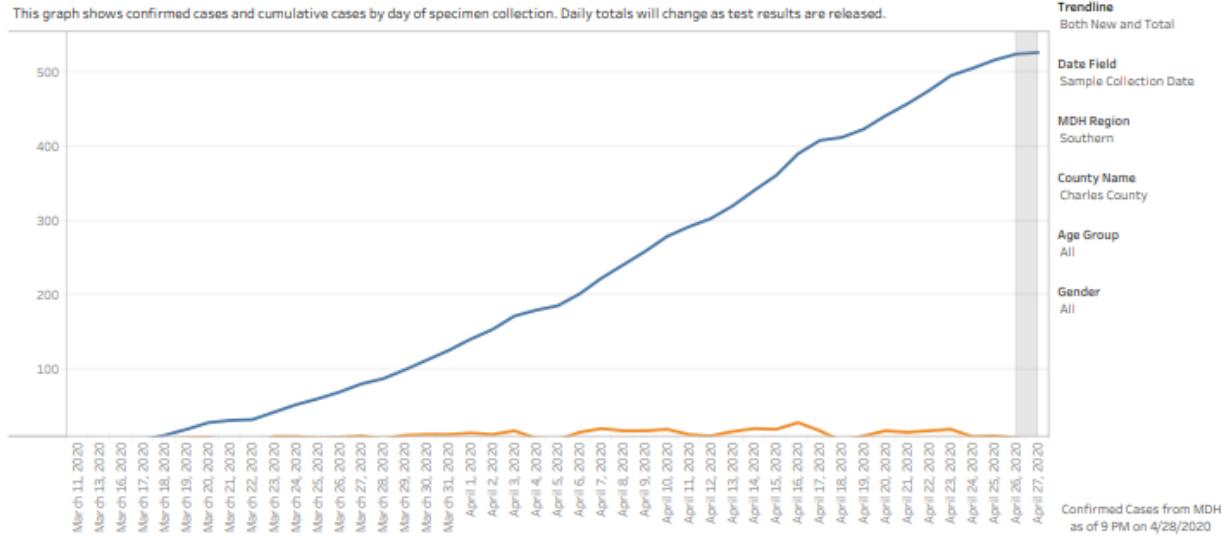
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Total Cases Statewide: 20,849

New Cases in Last 24 Hours: 749

Number of Cases for Selected Area/Demographics: 526

This graph:



Date shown is the sample collection date, not the date when the test result was confirmed. Daily totals may change as pending tests are reported. Grey shading indicates days pending additional data.

Confirmed COVID-19 Cases

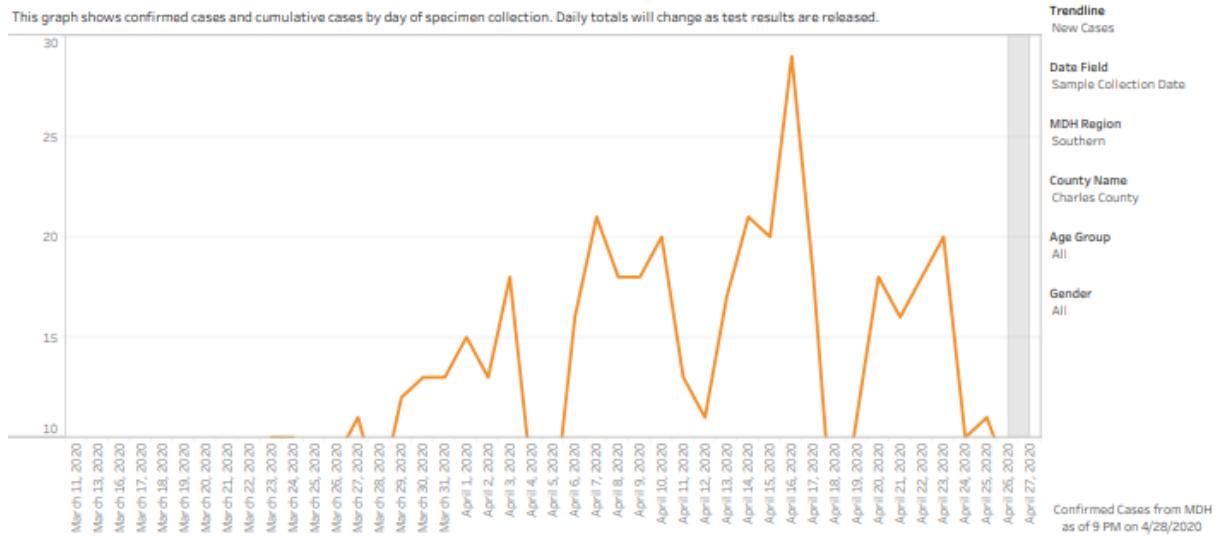
Please note: Numbers are of cases reported to MDH - Maryland residents only.
As with all reports, do not distribute this information publicly.

Total Cases Statewide: 20,849

New Cases in Last 24 Hours: 749

Number of Cases for Selected Area/Demographics: 526

This graph:



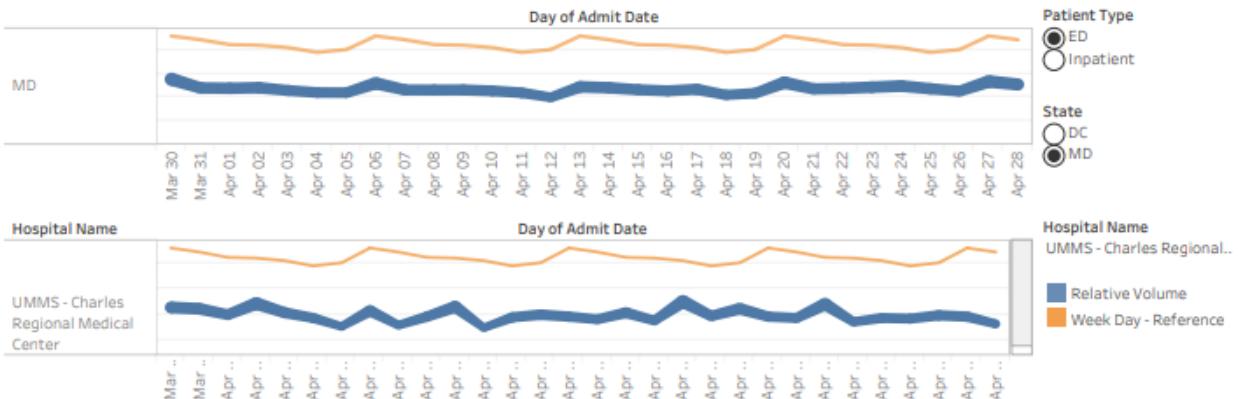
Date shown is the sample collection date, not the date when the test result was confirmed. Daily totals may change as pending tests are reported. Grey shading indicates days pending additional data.

• Hospital Volume Trends ED

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 February 29, 2020.

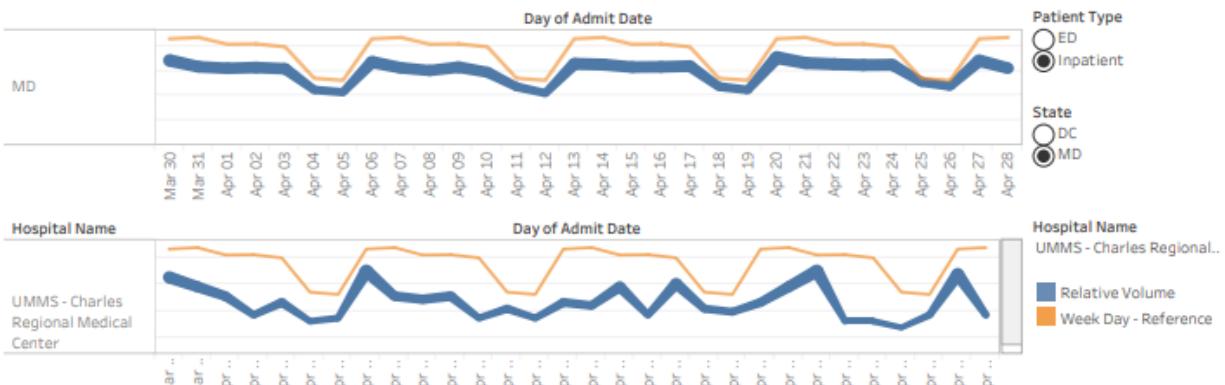


• Hospital Volume Trends Inpatient

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 February 29, 2020.

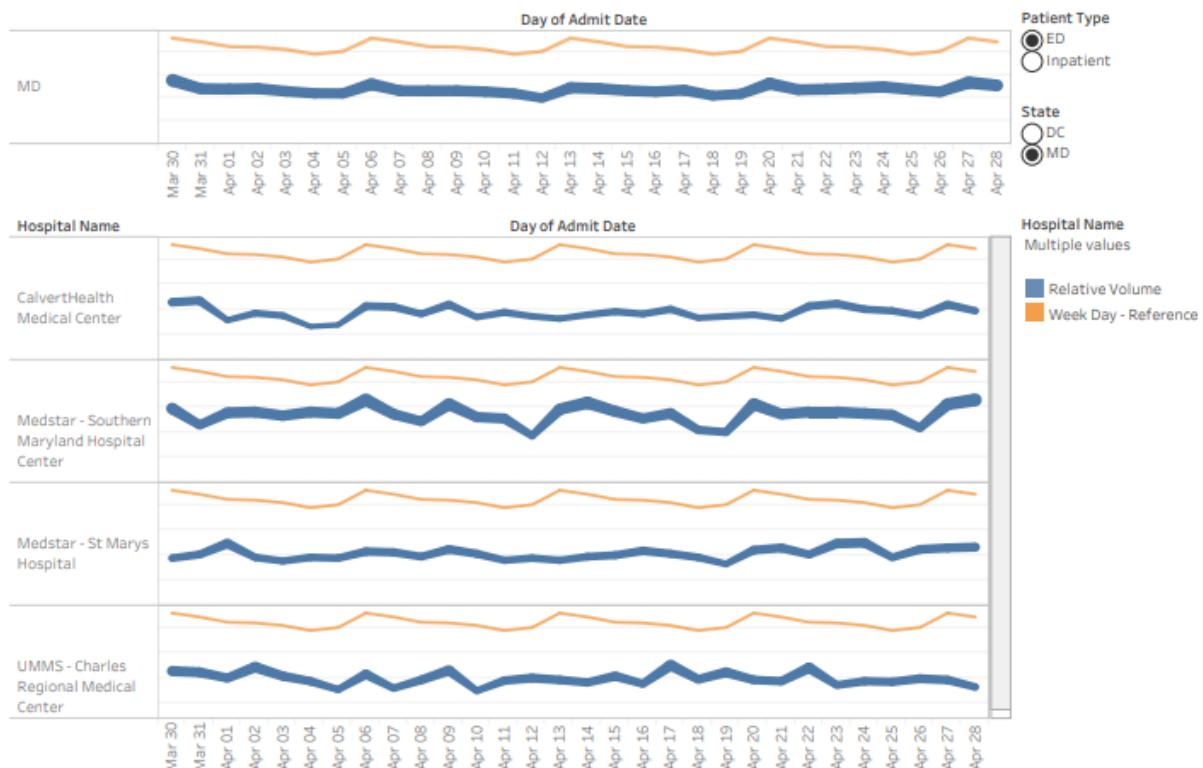


- **Regional Hospital Volume Trends ED**

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 February 29, 2020.



Data shown between
3/30/2020 and 4/28/2020

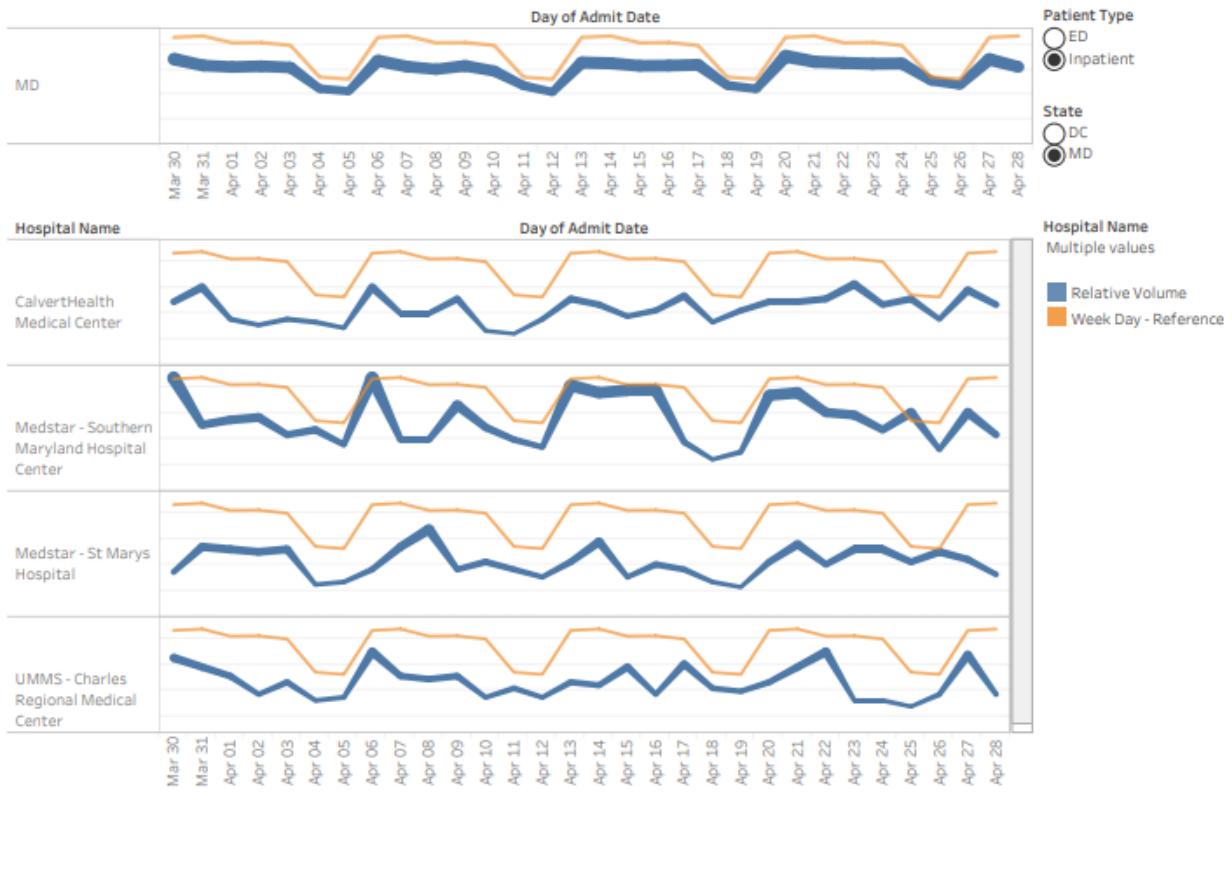
Data Extracted on
4/29/2020 06:59:43

- **Regional Hospital Volume Trends Inpatient**

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 February 29, 2020.



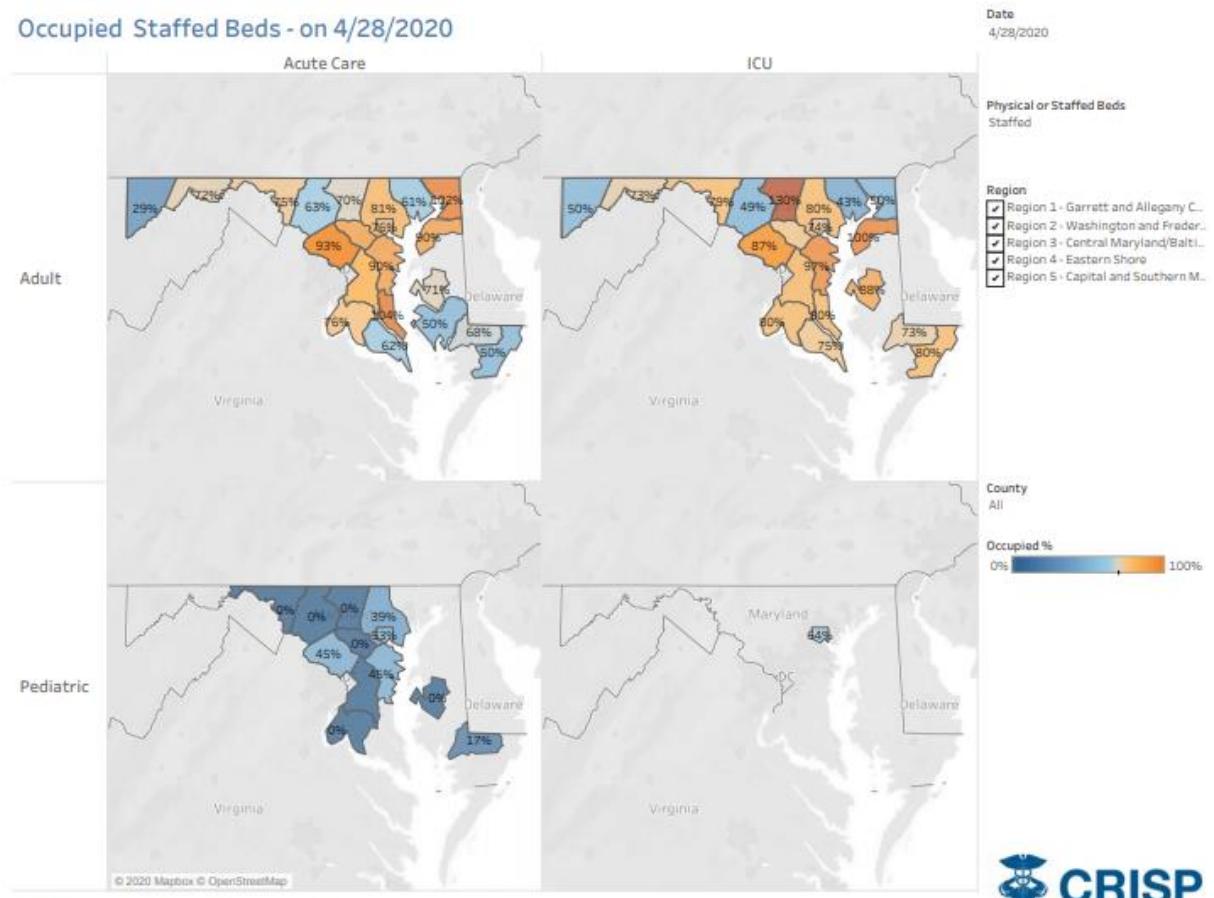
Data shown between
3/30/2020 and 4/28/2020

Data Extracted on
4/29/2020 06:59:43

- Maryland Occupied Staffed Beds

MIEMSS Facility Resources Emergency Database (FRED)
Data as of 4/28/2020

Occupied Staffed Beds - on 4/28/2020



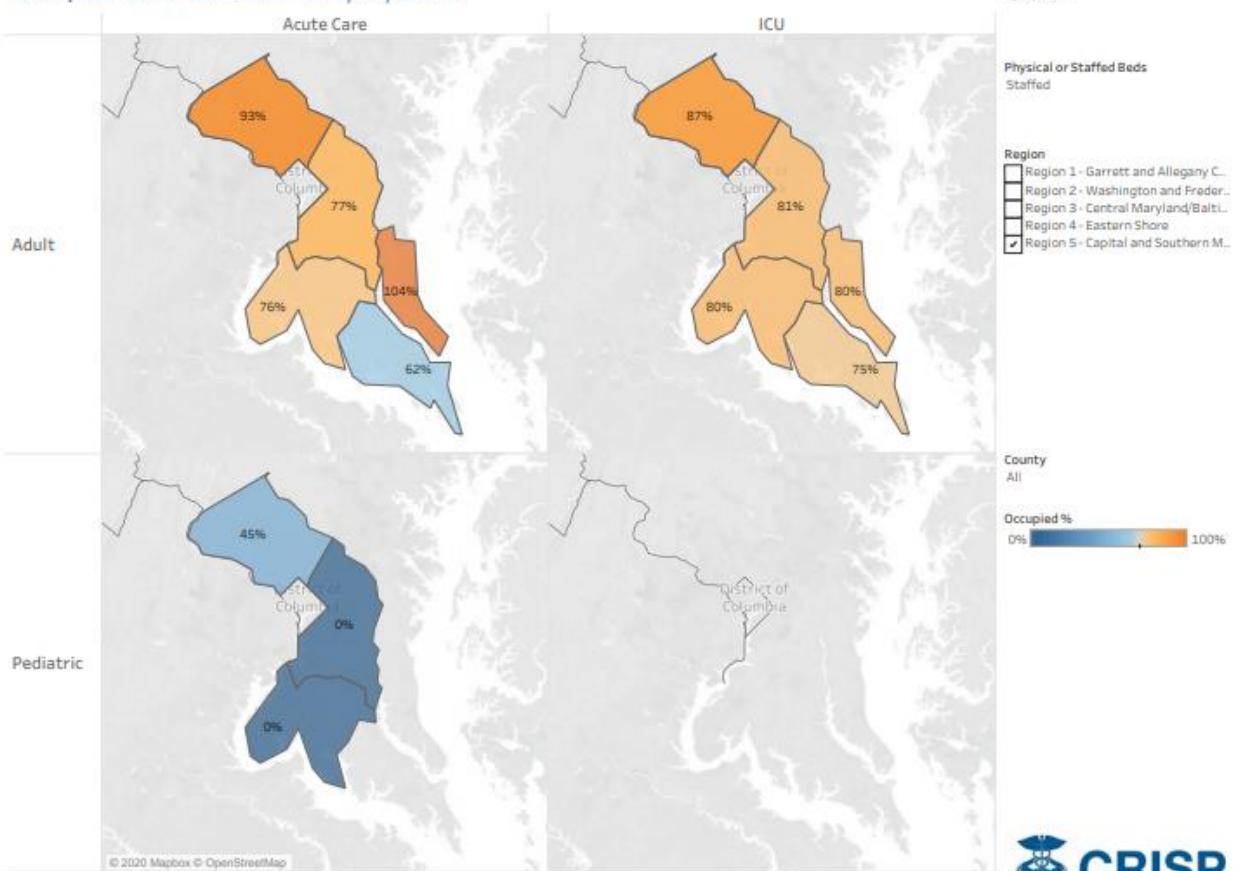
- **Regional Occupied Staffed Beds**

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 4/28/2020

The data in this report is self-reported daily by hospitals to Maryland Institute for Emergency Medical Services Systems (MIEMSS). The data in this report reflect point in time counts. Please note data is presented as reported and is not edited or validated by CRISP.

Occupied Staffed Beds - on 4/28/2020



Source: CRISP, 2020. CRISP MIEMSS FRED SmartSheet Download.

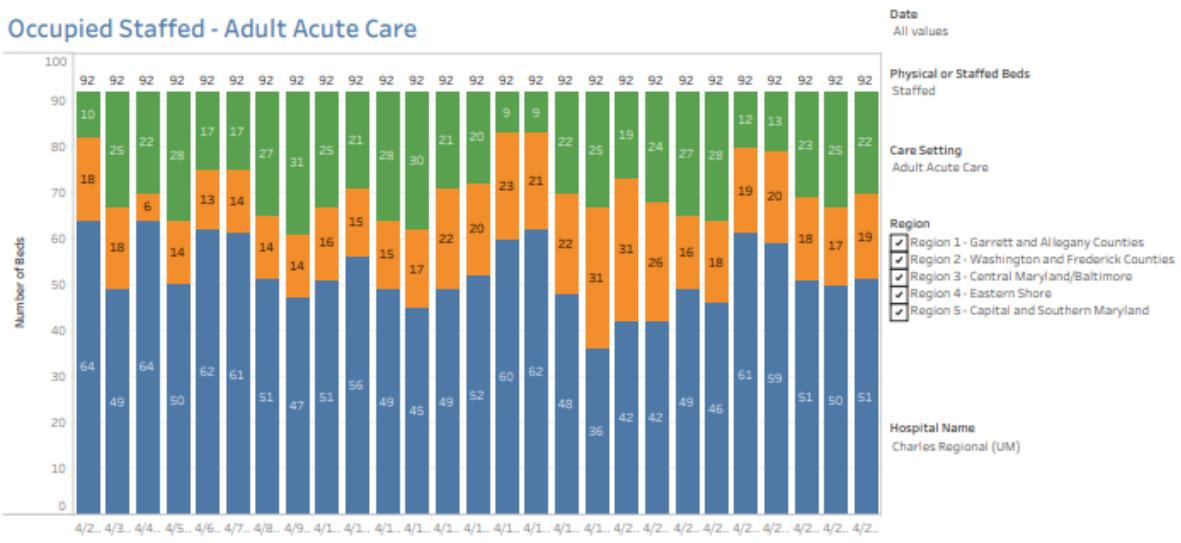


• Maryland Occupied Staff Acute Care

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 4/28/2020

Occupied Staffed - Adult Acute Care



Occupied Staffed by Hospital - Adult Acute Care

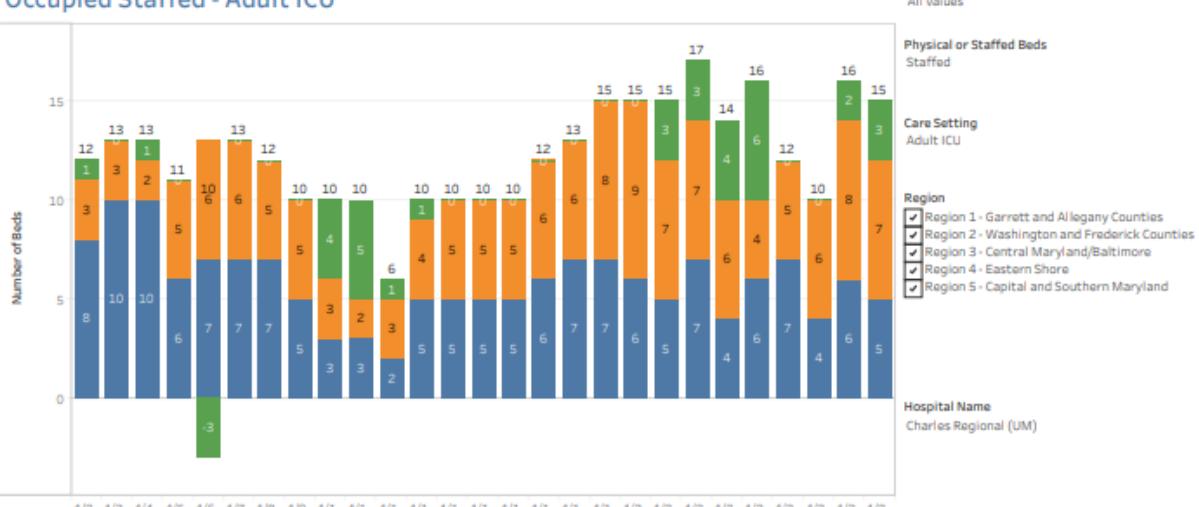


• Maryland Occupied Staff ICU

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 4/28/2020

Occupied Staffed - Adult ICU



Occupied Staffed by Hospital - Adult ICU



• Maryland Occupied Staffed Beds Acute Care

MIEMSS Facility Resources Emergency Database (FRED)

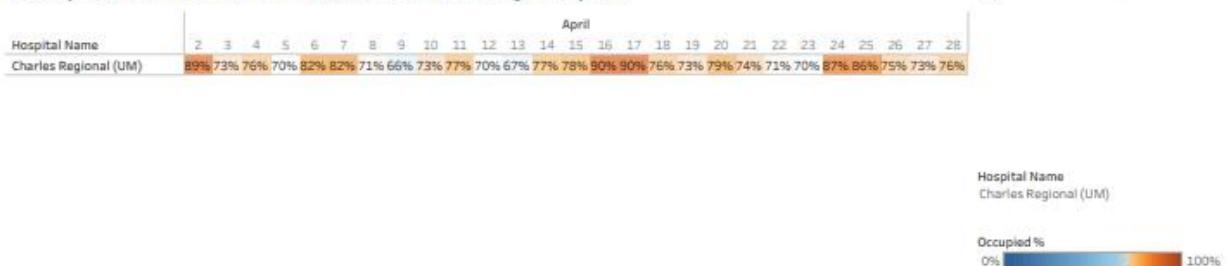
Data as of 4/28/2020

The data in this report is self-reported daily by hospitals to Maryland Institute for Emergency Medical Services Systems (MIEMSS). The data in this report reflect point in time counts. Please note data is presented as reported and is not edited or validated by CRI\$P.

Occupied Staffed Beds - Adult Acute Care



Occupied Staffed Beds - Adult Acute Care by Hospital



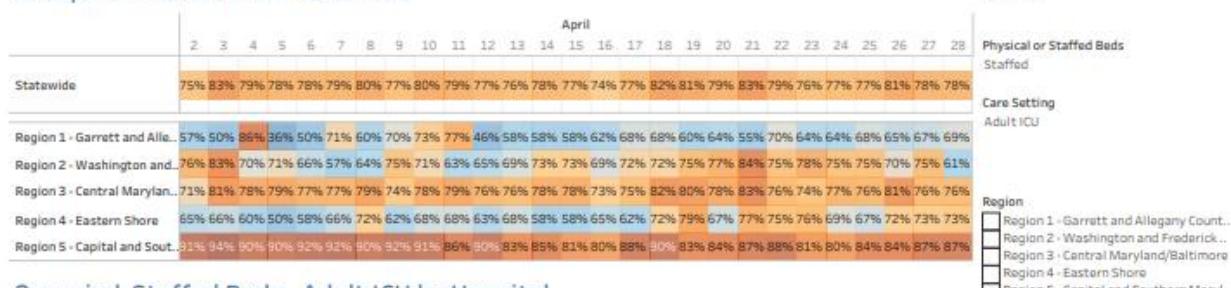
• Maryland Occupied Staffed Beds ICU

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 4/28/2020

The data in this report is self-reported daily by hospitals to Maryland Institute for Emergency Medical Services Systems (MIEMSS). The data in this report reflect point in time counts. Please note data is presented as reported and is not edited or validated by CRI\$P.

Occupied Staffed Beds - Adult ICU



Occupied Staffed Beds - Adult ICU by Hospital



• Statewide Capacity Overview

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 4/28/2020

The data in this report is self-reported daily by hospitals to Maryland Institute for Emergency Medical Services Systems (MIEMSS). The data in this report reflect point in time counts. Please note data is presented as reported and is not edited or validated by CRISP.

Statewide Capacity Overview

Available Acute Care and ICU Staffed Beds (Adult):

1,665

(1665/7707) = 22%

Ventilators Available:

1,392

(1392/2065) = 67%

Patients in the Emergency Department:

710

(710/2181) = 33%

Change from day before:

-79 beds

Change from day before:

-32 vents

Change from day before:

-6 patients

Hospitalized Confirmed COVID-19 Patients

Staffed Acute Care Beds Occupied by COVID-19 Patients:

1,024

(1024/6177) = 17%

Staffed ICU Beds Occupied by COVID-19 Patients:

586

(586/1530) = 38%

Change from day before:

+47 patients

Change from day before:

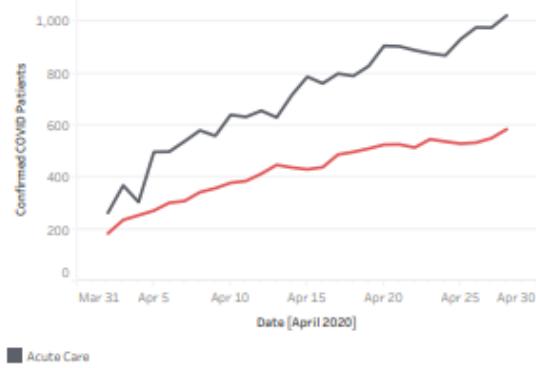
+35 patients

Bed Summary

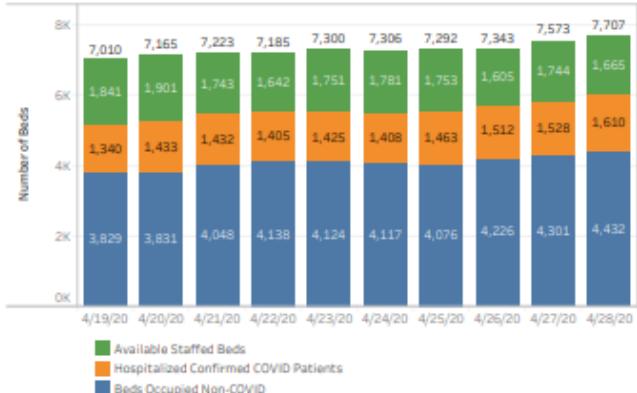
	Physical Beds	Staffed Beds	Occupied Beds	% Occupied Physical Bed	% Occupied Staffed Bed
Adult Acute Care	7,579	6,177	4,852	64%	79%
Adult ICU	1,813	1,530	1,190	66%	78%
Pediatric Acute Care	318	236	101	32%	43%
Pediatric ICU	45	45	29	64%	64%

Hospitalized COVID-19 Patients

Number of COVID-19 Positive Patients in Acute Care and ICU



Statewide Occupied Staffed - Adult Acute Care and ICU - Lasts 10 Days



Source: CRISP, 2020. CRISP MIEMSS FRED SmartSheet Download.

- **NCR Case Projections**

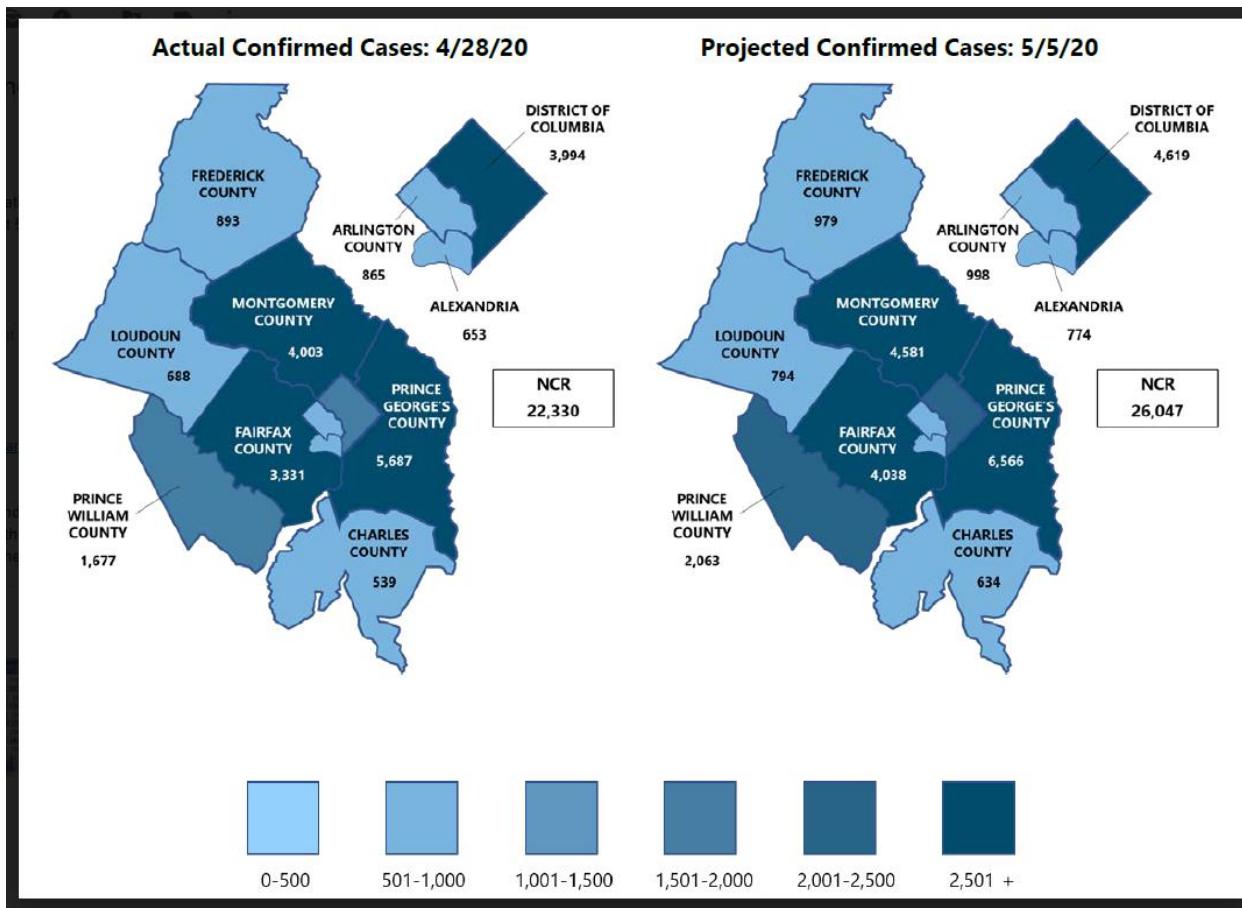
	Actual Confirmed Cases On:			Projected Cases For:								
	4/26	4/27	4/28	4/29	4/30	5/1	5/2	5/3	5/4	5/5	5/12	5/19
Washington DC	3,841	3,892	3,994	4,101	4,203	4,298	4,387	4,471	4,548	4,619	4,977	5,152
Charles Co., MD	504	529	539	555	570	585	598	611	623	634	693	723
Frederick Co., MD	848	865	893	921	932	942	952	961	970	979	1,027	1,059
Montgomery Co., MD	3,645	3,843	4,003	4,204	4,278	4,348	4,412	4,472	4,528	4,581	4,865	5,045
Prince George's Co., MD	5,170	5,451	5,687	5,898	6,030	6,152	6,266	6,373	6,472	6,566	7,077	7,406
Arlington Co., VA	790	836	865	895	914	932	950	967	983	998	1,092	1,163
Fairfax Co., VA	2,941	3,055	3,331	3,584	3,677	3,762	3,840	3,912	3,978	4,038	4,350	4,531
Loudoun Co., VA	596	628	688	747	756	764	772	780	787	794	833	861
Prince William Co., VA	1,468	1,568	1,677	1,782	1,836	1,886	1,934	1,979	2,022	2,063	2,300	2,472
Alexandria, VA	591	627	653	682	700	717	733	748	761	774	844	888
NCR	20,394	21,294	22,330	23,369	23,895	24,387	24,845	25,273	25,673	26,047	28,057	29,301

- **NCR Medical Demand Projections**

Medical Demand Projections:

	Actual Confirmed Cases On:			Projected Cases (Hospitalized) [ICU] {Ventilator} For:		
	4/26	4/27	4/28	5/5	5/12	5/19
Washington DC	3,841	3,892	3,994	4,619 (924) [222] {111}	4,977 (995) [239] {119}	5,152 (1,030) [247] {124}
Charles Co., MD	504	529	539	634 (127) [30] {15}	693 (139) [33] {17}	723 (145) [35] {17}
Frederick Co., MD	848	865	893	979 (196) [47] {23}	1,027 (205) [49] {25}	1,059 (212) [51] {25}
Montgomery Co., MD	3,645	3,843	4,003	4,581 (916) [220] {110}	4,865 (973) [234] {117}	5,045 (1,009) [242] {121}
Prince George's Co., MD	5,170	5,451	5,687	6,566 (1,313) [315] {158}	7,077 (1,415) [340] {170}	7,406 (1,481) [355] {178}
Arlington Co., VA	790	836	865	998 (200) [48] {24}	1,092 (218) [52] {26}	1,163 (233) [56] {28}
Fairfax Co., VA	2,941	3,055	3,331	4,038 (808) [194] {97}	4,350 (870) [209] {104}	4,531 (906) [218] {109}
Loudoun Co., VA	596	628	688	794 (159) [38] {19}	833 (167) [40] {20}	861 (172) [41] {21}
Prince William Co., VA	1,468	1,568	1,677	2,063 (413) [99] {50}	2,300 (460) [110] {55}	2,472 (494) [119] {59}
Alexandria, VA	591	627	653	774 (155) [37] {19}	844 (169) [41] {20}	888 (178) [43] {21}
NCR	20,394	21,294	22,330	23,895 (4,779) [1,147] {573}	24,845 (4,969) [1,193] {596}	25,673 (5,135) [1,232] {616}

- Maryland Case Projection Map



MISCELLANEOUS

See attachment – Employee Screening Form

Respectfully submitted by Charles County PHEP



HOSPITAL BRIEF 4-29-2020

- 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.
- Hospital Bed Capacity = 166. Census = 81
- Hospital ICU Census = 10
- Hospital ICU is now a dedicated COVID-19 Unit, and 3 East is for ICU overflow.
- Isolation Room Capacity = 12
- Isolation Rooms Occupied = 8
- Confirmed positive cases of COVID-19 patient admissions = 25
 - Of the total 25 COVID-19 positive patients, seven (7) of the patients are located in the ICU. Eighteen (18) are located in the 3 South dedicated COVID-19 unit
- PUI admissions = 6
- Ventilated COVID-19 positive patients = 3
- Ventilators not in use = 17
- COVID-19 related deaths = 28 (Total to Date)
- CRMC has implemented a policy that requires ALL staff, visitors (which would be very limited), and contractors of any kind to wear a mask while in the hospital at all times.
- The 3 South patient unit at CRMC is dedicated to COVID-19 positive patients only.
- On 4/28/2020 EMS transported to CRMC 2 PUI's that tested positive, and 2 patients that were known COVID-19 positive patient.

Intelligence Briefing 4-29-2020
COVID Charles County
Week 7

Updated Infection Numbers: As of 0932 hrs.

Total worldwide: 3,139,415 **+79,263** since the 4-28-20 brief.

Worldwide increase of confirmed cases by 24-hour period over the last 10 days

4-19/20	4-20/21	4-21/22	4-22/23	4-23/24	4-24/25	4-25/26	4-26/27	4-27/28	4-28/29
74,806	80,717	93,568	54,956	87,299	91,793	88,301	164,198	67,182	79,263

Total fatalities worldwide: 218,456 **+6,400** since the 4-28-20 brief

Analysis note: The wild swings in worldwide confirmed case numbers and fatality numbers continue to illustrate the lack of consistent reporting channels. These number should not solely be used to gauge the scope and magnitude of the current situation.

Total confirmed cases in the US: 1,013,168 **+24,699** since the 4-28-20 brief

US increase of confirmed cases by 24-hours period over the last 10 days

4-19/20	4-20/21	4-21/22	4-22/23	4-23/24	4-24/25	4-25/26	4-26/27	4-27/28	4-28/29
24,499	29,134	37,328	16,376	27,844	34,896	33,885	28,336	20,884	24,699

Analysis note: The US case number increases have remained relatively unchanged for the last 10 days. However, this is likely not an indication of “flattening the curve.” As the data is reviewed, keep in mind we are reporting an additional 28 to 33,000 NEW cases each day. We have yet to see any dramatic decreases in diagnoses new cases.

Total fatalities in US: 58,368 **+2115** since 4-28-2020

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

Total confirmed cases in State in of MD: 20,849 **+736** since the 4-28-20 brief

Total tested in the State of MD: 90,080 **+2,408** over 4-28-20

Percent of those test that test positive: **22.7%**

Analysis note: Maryland percentage of positive test is now on par with PA, MA, IL, MI, CA and LA.

Total Fatalities in State of MD: 985 **+56** change since the 4-28-20 brief

Number of probable deaths: 93

Total Ever Hospitalized: 4,402 **Increase of 134** from 4-28-2020

Persons currently hospitalized: **1645 +117** since 4-28-2020

First Responder Numbers in Charles County: NUMBERS AS OF 4-28-2020 @1230

50 Quarantine: means exposed and they can't come to work. **-1 since the last report**

4 Self Isolation: means sick or tested positive **-6 since the last reported**

Weather:

Thursday 66-51 rain, Friday 64-49 rain, Sat 69-49 sun,

Local:

Visited several stores this am. Inventory at some stores appeared high. Inventory at other stores was spotty. Hard to find items, remain sparse.

Analysis note: More meat and poultry plants are closing. The cascading effects will continue to be felt for several weeks until adjustments are made to the supply chain or the factories re-open. Supply chain experts are indicating some stabilization is possible in the come days.

"In some regions of the U.S., capacity to store poultry is not available or is limited. Processors are adjusting to meet market demands and reduce the oversupply of poultry; nearly 2 million chickens will still need to be destroyed instead of processed for consumption. Similar action is being considered for pig and beef cattle as the surplus becomes too large for processing plants and too expensive for livestock farmers to maintain.

National Business Emergency Operations Center (NBEOC) Report, April 26

- Due to pork processing closures, approximately 30% of U.S. pork capacity is off-line; hog prices are low leaving farmers struggling while the demand for pork continues to be elevated. ESF-14 Update, April 27
- Tyson Foods released a statement indicating that "millions of pounds of meat" will disappear from the supply chain as the COVID-19 pandemic pushes food processing plants to close. [Tyson Foods](#) "(NCR COVID 19 #104)

Nursing home numbers have been released. One local home ranks 2nd state with cases and 1st in deaths.

18th anniversary of the LaPlata tornado

Nursing home and assisted living patients and staff make-up over 38% of the total number of positive cases reported in Charles County.

Maryland Update:

Gov. press conf 1500

New guidance from Gov. on releasing nursing home data

Additional testing centers are being planned for Calvert and Washington counties

Region:

Over 22,330 cases in the NCR as of 0500 4-29-2020,
38,446 cases in Maryland, DC, and Virginia as of 1100 on 4-28-2020.
Fairfax County Fire reports 12 members have test positive
VA experience hotspot of infections on eastern shore poultry plants

National:

Johns Hopkins release paper on phased reopening guidance (see attached)
DHS HIS releases bulletin on COVID Fraud (see attached)
DHS Science and Tech releases Master Question List for COVID 19 (see attached)

Local critical infrastructure:

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

Predications/ Analysis:

- The change at the Gov. Office re: to releasing nursing home case counts and fatalities this week is likely to create more questions than answers. In addition, it is likely to create a public uproar and increase anger.
- The length and scope of this situation have exposed large cracks in food supply chains, medical supply chains, fossil fuel industries, and other major portions of everyday life. Local leaders should begin a gap analysis and start the after-action process so they can create and modernize resiliency plans, local stockpiles, and coming up with other forward leaning solutions so when the next disaster occurs they are more self-sufficient and better prepared.
- While we have concentrated our efforts on peer support and helping our responders, a proactive approach to including families of first responders is quickly emerging. The command structure should consider a Family Support liaison or expand the Peer support branch.
- The increased discussions about opening the economy, added with the on-going conversation about health care in-equity and racial disproportionality of infections is causing increased polarization, angry, and hate. Social media is rampant with spirited discussions. It is only a matter of time before we begin to see emotions spill over into the public. The small protest we have witnessed thus far could pale in comparison to what is to come. LE should be reviewing plans, manpower, and boosting intelligence gathering to better prepare for potential situations.
- Protests over the continuing of stay at home orders, and business closures are becoming more prevalent and boisterous. Law enforcement should begin to make plans on how to track these groups and respond to events.
- First responder staffing and exposure issues will likely continue to increase. Priority messaging about PPE, manpower reduction strategies, and outside the box thinking should be continued and solutions expedited.

- FOIA and PIA requests for detailed records on infections in assisted living and nursing homes will increase as investigative reporting on this issue increases.
- Grocery stores could become a hotbed of fear and anxiety due to limiting numbers of patrons, assigning shopping days, mask requirements, and now limited meat supplies.
- As critical case in Charles County remain low (outside of nursing homes and assisted living homes), needs in other local jurisdictions are growing. Resources should be prioritized and plans should be made to share/deploy critical resources, personnel, and/or facility space to meet the needs regionally.
- The longer this crisis continues the more likely we are to experience critical events that may not be related to the COVID crisis (incidents within the incident). Those in leadership positions need to be prepared to step into dual leadership/managerial roles at a moment's notice. This requires taking care of yourself and staying up on the latest tactics, strategies and knowledge.
- Planning for crisis recovery starts as soon as the crisis begins. Monday marks the 8th weeks of this crisis, 6th week of schools being closed. Partners and stakeholders should begin planning for what the return to the “new normal” looks like in their organization. Sharing of these plans will help each organization build more comprehensive processes.
- Over the weekend the US will likely eclipse 500,000 cases and 15,000 deaths. Md numbers will likely pass 5000 and 150 fatalities by Friday. These numbers will cause increased pressure to ratchet up rhetoric re: “stay at home orders” and could result in further sanctions and restrictions.
- As the confirmed case numbers continue to rapidly ascend the likelihood of jurisdictions issuing “travel bans” increases. Law enforcement should begin researching the constitutionality of these potential edicts and have plans in place for implantation and begin to develop a public communication strategy. Standardizing local “travel authorization documentation” should be explored by the lead jurisdiction having authority.
- 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.

“The most effective leaders in crises ensure that someone else is managing the present well, while focusing their attention on leading beyond the crisis toward a more promising future”

Respectfully submitted by Jason Stoddard

Law Enforcement Branch Briefing

COVID-19 Charles County IMT

April 29th, 2020

Buildings:

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

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; Doing screening in and screening out

Natural Resources Police: Operations as normal

Internal COVID-19:

Charles County Sheriff's Office:

- 7 sworn officer quarantined
- **0 officers isolated**
- 25 correctional officer quarantined
- 1 correctional officers isolated (exposed outside of CCDC, has been out of work since October)
- 0 civilian quarantined
- 1 civilians isolated

Maryland State Police: None local

Maryland Transportation Authority: None local

La Plata Police Department: None

Natural Resources Police: None

Crime Stats:

Crime continues to be down in all aspects.

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 since Emergency Orders Issued:

Violation sustained calls for service: 46

Warnings: 43

Charges later: 2

On-scene arrest: 1

Health Department Order Violations (Between 04/16/20 and 04/18/20):

Calls for Service

Founded: 5

Unfounded: 10

Dispositions

Warnings: 5 issued

Items of Note: (Not for redistribution)

- Distribution of relief checks to start; postal inspector is worried about fraud and theft.

- Attacks against 5G towers, based on online conspiracy of a connection between China, the technology, and the spread of COVID-19.

***CHANGES IN RED**

Charles County Public Schools Briefing 4-29-2020
COVID Charles County

48-hour Priorities:

- Maintaining instructional continuity
- Expanding and maintaining food service
- Expanding and maintaining WiFi service

Meals:

On Monday, 4/28/20, CCPS served 4,779 meals at the 11 meal distribution sites.

Closure:

Charles County Public Schools (CCPS) now remains closed through May 15. All schools, buildings and centers will remain closed to the public.

Instruction:

CCPS is in stage three, and final stage, of its distance learning and continuity of learning.

Community Wifi:

All four sites are up and running and seeing use. CCPS in process of 3 other additional WiFi sites.

Misc:

Dr. Salmon misquoted recently. Currently no plans to return to school for $\frac{1}{2}$ days.

Respectfully submitted by Jason Stoddard and Michael Meiser



Charles County Volunteer Firemen's Association, Inc.

Post Office Box #21, La Plata, Maryland 20646

April 29th, 2020

Re: Volunteer Fire/EMS Brief

Items Being Worked On:

- Reduction of Force Policy – *Information gathering occurring.*

Stations/Apparatus:

- No Station's with contamination issues.
- No Apparatus with any contamination issues.
- No Service Deliverability Issues with Apparatus O.O.S.

Personnel – 6 Members across 3 Stations (2 Positive / 4 No Test):

- Fire Station 3 – 1 Member in 14 Day Isolation – Tested Positive 4/16/2020. (No Symptoms)
- EMS Station 3 – 2 Members in Quarantine
- Fire / EMS Station 12 – 1 member (Still Symptomatic)
- Fire Station 4 – 2 Family Members Quarantined due to a Family Member testing positive.

Incidents/Call Volume:

- No Major Incidents to Report related to COVID-19
- Yesterday's EMS Call Volume was average, and Fire Call Volume was below average
48 Ems Related Incidents ----- 7 Fire Related Incidents

Other Information:

- Continue to push out information about Social Distancing in the Stations.
- Continue to push out Peer Support Information.

Respectfully Submitted,

A handwritten signature in black ink, appearing to read "Mark A. Kaufmann, Jr".

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