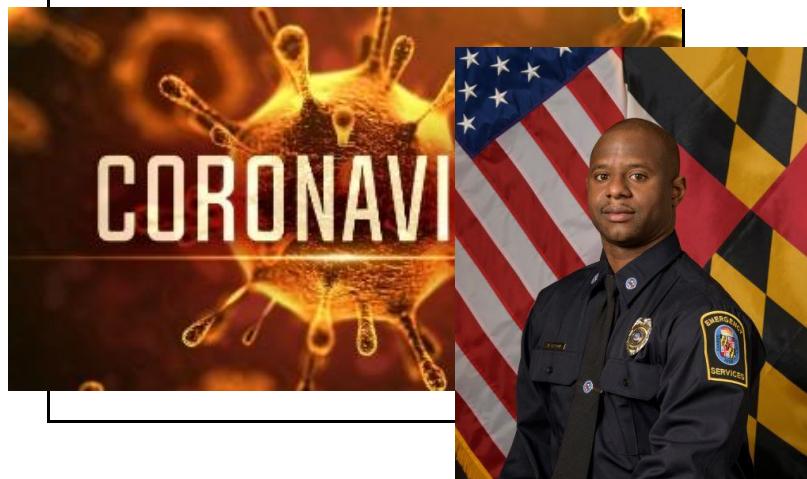


Charles County COVID-19

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>Please keep the immediate and extended families of Marcus Paxton in your thoughts. The procession should pass through Charles County between 11:00 to 12:00.</p>																	
General Situational Awareness <p>" There are better ways to cope... excessive drinking may lead to alcoholism as well as health and other social problems!"</p>																	
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) <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; padding: 2px;"><input checked="" type="checkbox"/> ICS 203</td> <td style="width: 33%; padding: 2px;"><input type="checkbox"/> ICS 207</td> <td style="width: 33%; padding: 2px; text-align: right;">ICS 214</td> </tr> <tr> <td><input type="checkbox"/> ICS 204</td> <td><input checked="" type="checkbox"/> ICS 208</td> <td style="text-align: right;"><hr/></td> </tr> <tr> <td><input type="checkbox"/> ICS 205</td> <td><input type="checkbox"/> Map/Chart</td> <td style="text-align: right;"><hr/></td> </tr> <tr> <td><input checked="" type="checkbox"/> ICS 205A</td> <td><input type="checkbox"/> Weather</td> <td style="text-align: right;"><hr/></td> </tr> <tr> <td><input type="checkbox"/> ICS 206</td> <td><input type="checkbox"/> Forcast/Tides/Currents</td> <td style="text-align: right;"><hr/></td> </tr> </table>			<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 207	ICS 214	<input type="checkbox"/> ICS 204	<input checked="" type="checkbox"/> ICS 208	<hr/>	<input type="checkbox"/> ICS 205	<input type="checkbox"/> Map/Chart	<hr/>	<input checked="" type="checkbox"/> ICS 205A	<input type="checkbox"/> Weather	<hr/>	<input type="checkbox"/> ICS 206	<input type="checkbox"/> Forcast/Tides/Currents	<hr/>
<input checked="" type="checkbox"/> ICS 203	<input type="checkbox"/> ICS 207	ICS 214															
<input type="checkbox"/> ICS 204	<input checked="" type="checkbox"/> ICS 208	<hr/>															
<input type="checkbox"/> ICS 205	<input type="checkbox"/> Map/Chart	<hr/>															
<input checked="" type="checkbox"/> ICS 205A	<input type="checkbox"/> Weather	<hr/>															
<input type="checkbox"/> ICS 206	<input type="checkbox"/> Forcast/Tides/Currents	<hr/>															
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>May 1, 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				
		Liaison Officer	Tom Brown	Robbie Jones		
Agency	Name	Hospital	Bill Grimes	John Filer		
Intell officer Deputy	Mike Meiser	Nursing Homes	Tiffany Brown			
Lifestyles	Sandy Washington	Health Care Providers	Melanie Gardiner			
Public Schools	Mike Meiser	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: May 1, 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		
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 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: <u>May 1, 2020 @ 14:00</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	
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>May 1, 2020 @ 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="background-color: yellow; padding: 5px;">"There are better ways to cope... excessive drinking may lead to alcoholism as well as health and other social problems!"</p> <p>1. Total identified PUI's transported as of 5/1: 530 Total # of patients testing positive : 99</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. Special Order 2020-04 Version 1.0 was released on 04-20-2020. 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 recommendations, 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 recommendations.</p> <p>10. The Viral Pandemic Triage Protocol (SO 2020-02) started on 04-27-2020 for all EMS clinicians. 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 <u>7</u>	Date/Time: <u>May 1, 2020 @ 14:00</u>	

ACTIVITY LOG (ICS 214)

ACTIVITY LOG (ICS 214)



PUBLIC HEALTH BRANCH BRIEFING COVID-19 PANDEMIC RESPONSE

May 1, 2020

GENERAL REPORTING INFORMATION

INFECTIOUS DISEASE

CASE COUNT—CHARLES COUNTY

As of 5/1/2020, total case count for Charles County is 615.

- *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

- Linked the MDH coronavirus website has been updated with nursing homes with COVID-19 cases to CCDOH COVID site.

PARTNER/STAKEHOLDER OUTREACH

LTC/AL

- The Long-Term Care and Assisted Living call was held April 30 at 3 p.m. by CCDOH nurse liaisons. Good information sharing. Positive feedback.

ALL-PARTNER

- The all-partner call April 30 at 4 p.m. by CCDOH nurse liaisons.

EPI SURVEILLANCE PROFILE FOR STATE

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

- 1) Latest case counts – total: 23,472 (97,511 negative)
- 2) New cases: 1,730

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 43 new; total 4,718
- e) Deaths -- Total 1,098 (54) in Last 24hrs)
- f) Release from isolation – 1,517

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

RESOURCE DISTRIBUTION

- 4 requests received 04/30/2020
- 4 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

No responders accepted on April 30.

CAREGIVER SERVICES CORPS

This is an initiative of the Maryland Department of Aging. The goal of the program is to enable older adults to remain safely in their homes and give them peace of mind that they have support systems in place to do so.

MDH is seeking MD MRC volunteers to assist with medical services.

Will keep you updated on this program as details become available

TESTING

VEIP TESTING SITE UPDATE

- Tested to Date as of April 23 (TTD): 651
- VEIP testing occurred April 30 with 94 tests were conducted out of 108 available appointments.

EPIDEMIOLOGY AND SURVEILLANCE

Charles County

As of 5/1 at 900 am, total case count for Charles County was 615 cases.

There have been 44 confirmed deaths associated with COVID-19 (7.2%). Majority of deaths are associated with outbreaks in skilled nursing facilities. There were 2 probable COVID-19 deaths. COVID-19 is listed as the cause of death, but laboratory testing has not yet confirmed.

- Average age of fatalities: 78.4 years
- Gender breakdown among confirmed fatalities: 69.6% Female, 30.4% Male

Racial breakdown among confirmed fatalities:

- 56.5% Non-Hispanic White
- 41.3% Non-Hispanic Black
- 2.2% Hispanic
- Number of negative lab results: 2542
- Positivity Rate: 24% This is a large one day jump from 18.7% reported yesterday. This may be due to increased volume of testing in the county at the VEIP testing site and at Patient First.
- Recovered and released from isolation: 140
- Partially recovered with improved symptoms: 42
- 132 or 21.5% required hospitalization
- Among confirmed cases, 358 (58.2%) Female; 257 (41.8%) 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: 13 (2.1%)
- 18-64 years: 462 (75.1%)
- 65+ years: 140 (22.8%)

ESSENCE data for urgent care utilization at Patient First in Waldorf had no data warnings or alerts for Thursday, April 30th. Patient volume was 36 patients. This is similar to Wednesday where they saw 39 patients. All were discharged to home for self-care. 6 patients presented with ILI or COVID-19 like symptoms on Thursday. Diagnoses for ILI patients on Thursday streptococcus acute tonsillitis due to other bacterial agent, unspecified viral infection, acute maxillary sinusitis, bronchitis, post nasal drip, and COPD exacerbation. There were no CDC Classifier tags for 4/30.

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 12 on 4/30. EMS indicates that PUI's appear to be declining.

- 4/25: 16
- 4/26: 8
- 4/27: 19
- 4/28: 12
- 4/29: 18
- 4/30: 12

Race breakdown: The data is now being captured in the MDH line lists of confirmed cases in REDCap. Data was accessed on 5/1 at 9:00 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: 615 cases on 5/1 at 900 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.

Race Breakdown

Asian: 12 (1.9%)
 Black/African American: 221 (35.9%)
 White: 123 (20%)
 Other or 2+ races: 20 (3.3%)
 Data not available: 239 (38.9%)

Ethnicity Breakdown

Hispanic 11 (1.7%)
 Non-Hispanic 338 (55%)
 Declined to answer 38 (6.2%)
 Data not available 228 (37.1%)

Nursing Home Outbreak Data (Confidential: Not for public dissemination)

- Positive resident cases in Skilled Nursing Facilities/Assisted Living Facilities: 137
- Positive staff cases in Skilled Nursing Facilities/Assisted Living Facilities: 52
- Among those 137 resident cases, 106 are in skilled nursing facilities and 31 are in assisted living facilities.
- Current resident or staff who are Persons Under Investigation (PUI) in Skilled Nursing Facilities/Assisted Living Facilities: 11
- Total currently hospitalized: 5
- Deaths: 41

Charles County Efforts to Address the Governor's Executive Order regarding testing in Skilled Nursing Facilities

All 4 skilled nursing facilities in Charles County received testing kits for their residents yesterday and will be completing testing by the close of business today. Dr Haft held a call on 4/30 to discuss the laboratory testing form and to answer any questions from the facilities. A follow up call will be conducted 5/1 at 3:30 p.m.

Epidemiologist 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 (59%) 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 5/1 at 9:00 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:	4/30	5/1	Change from 4/30 to 5/1
20601	80	93	+13
20602	98	108	+10
20603	151	161	+10
20604	2	2	0
20611	3	3	0
20613	20	20	0
20616	16	18	+2
20622	3	3	0
20632	2	2	0
20637	15	17	+2
20640	21	26	+5
20645	1	1	0
20646	70	79	+9
20658	3	3	0
20662	9	9	0
20664	5	6	+1
20675	6	7	+1
20677	5	6	+1
20693	2	3	+1
20695	37	39	+2

COVID-19 Positive Case rate per 1,000 residents as of April 30, 2020

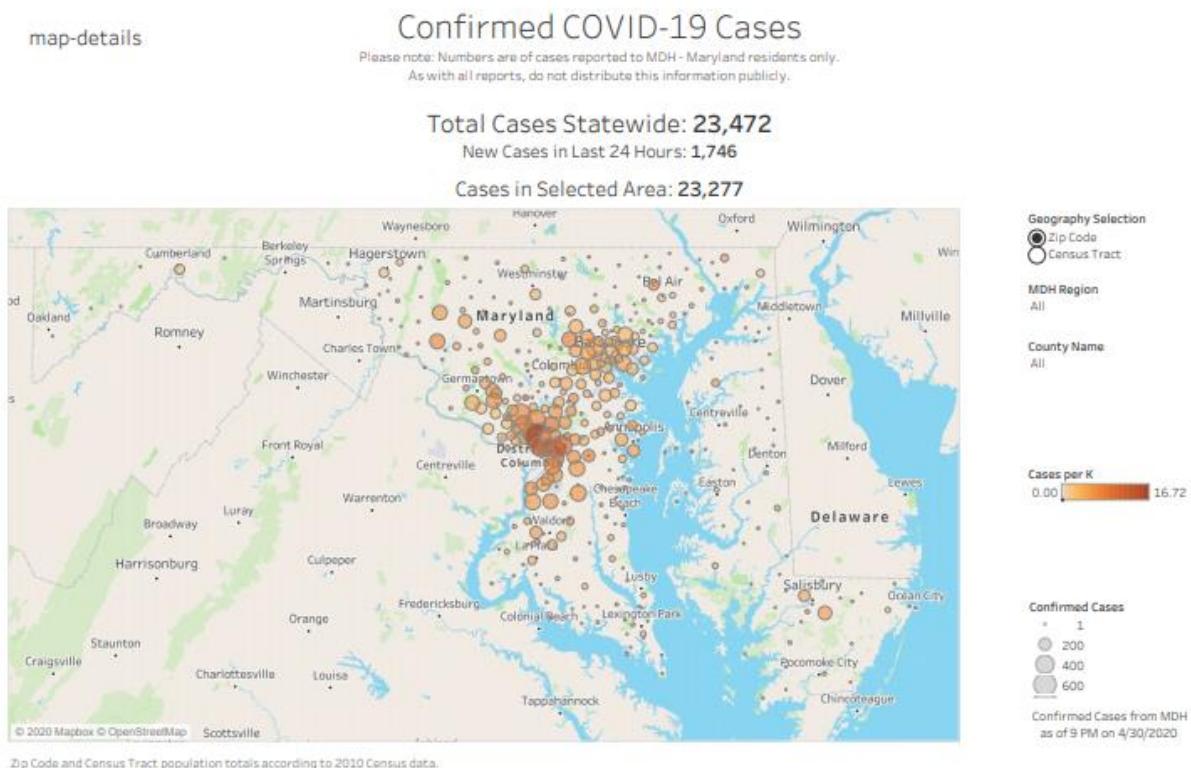
Case rates are only calculated for zip codes with 5 or more confirmed COVID-19 Cases.

Zip Code of Residence:	COVID-19 positive case rate per 1000 residents:
20601	3.188
20602	3.967
20603	5.316
20613 (Charles Co residents only from this zip code)	0.506
20616	2.732
20637	2.766
20640	2.108
20646	3.759
20662	3.067
20664	1.674
20675	3.591
20677	2.153
20695	5.446

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)

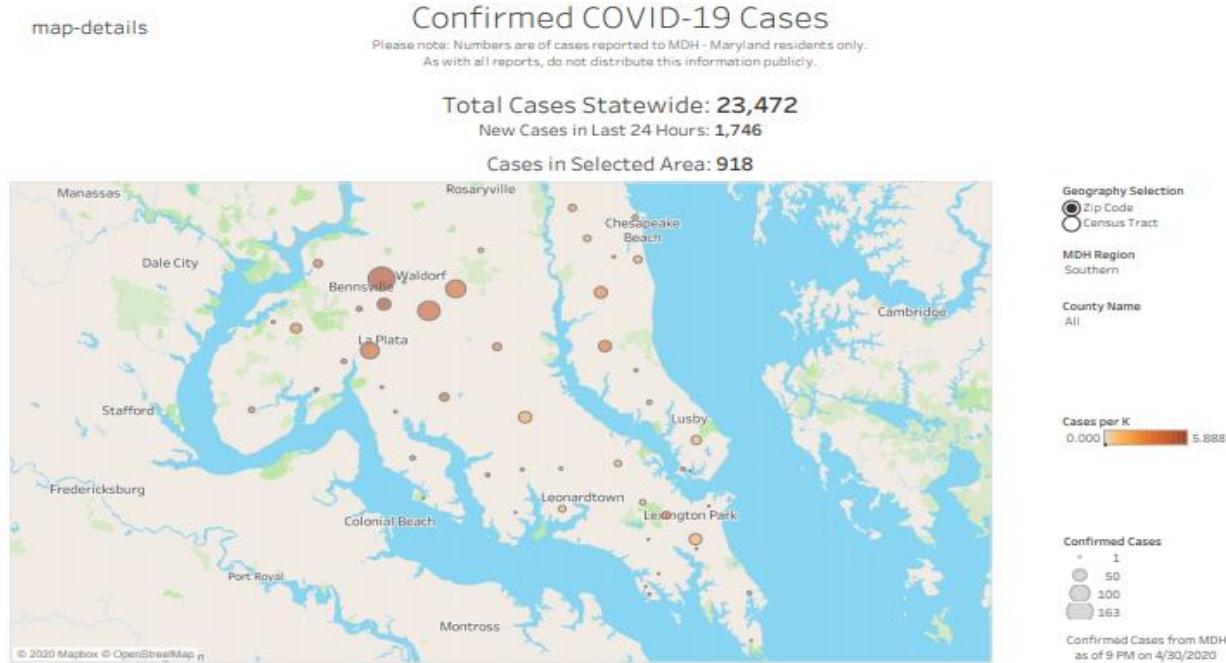
map-details



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

- Heat Map of Southern Maryland

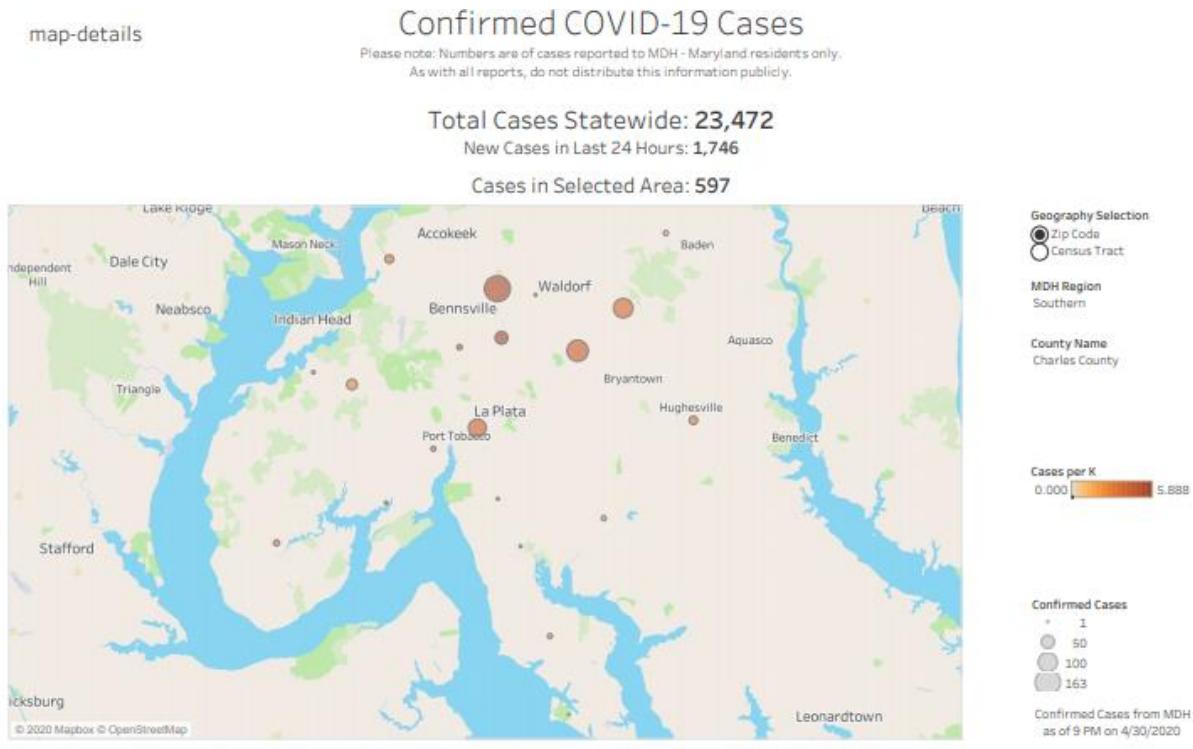
map-details



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

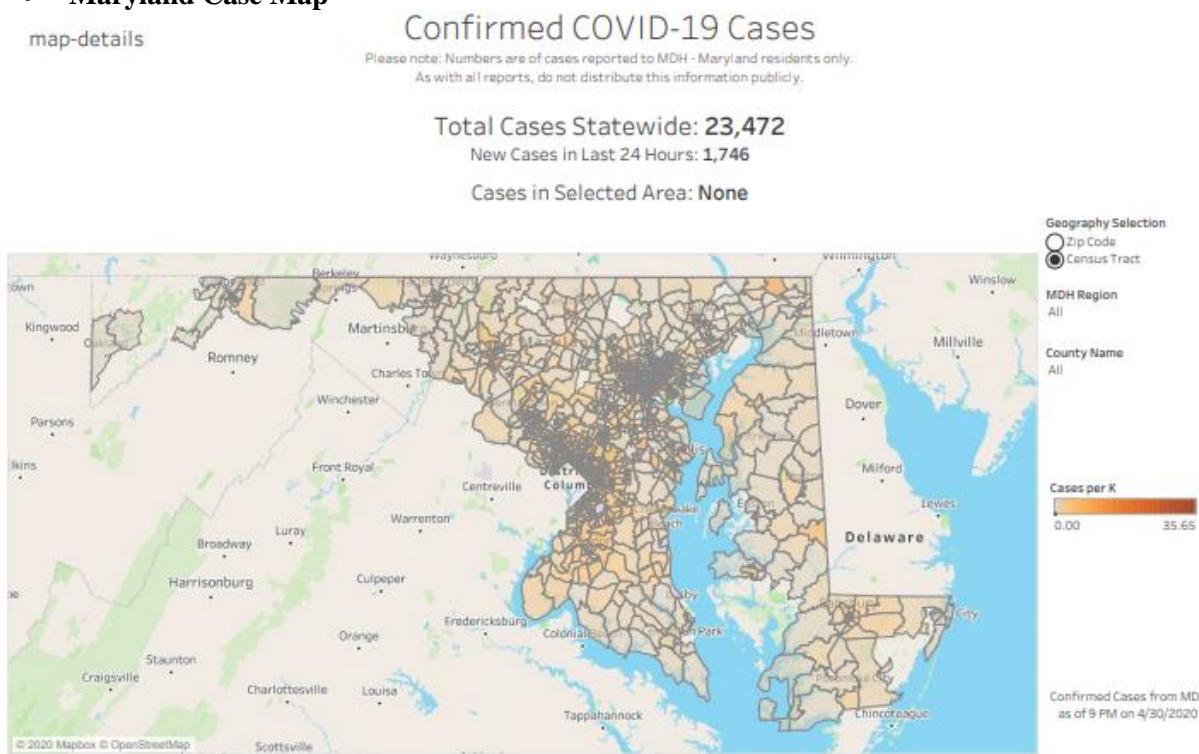
- **Heat Map of Charles County**

map-details



- Maryland Case Map

map-details



• Southern Maryland Case Map

[map-details](#)

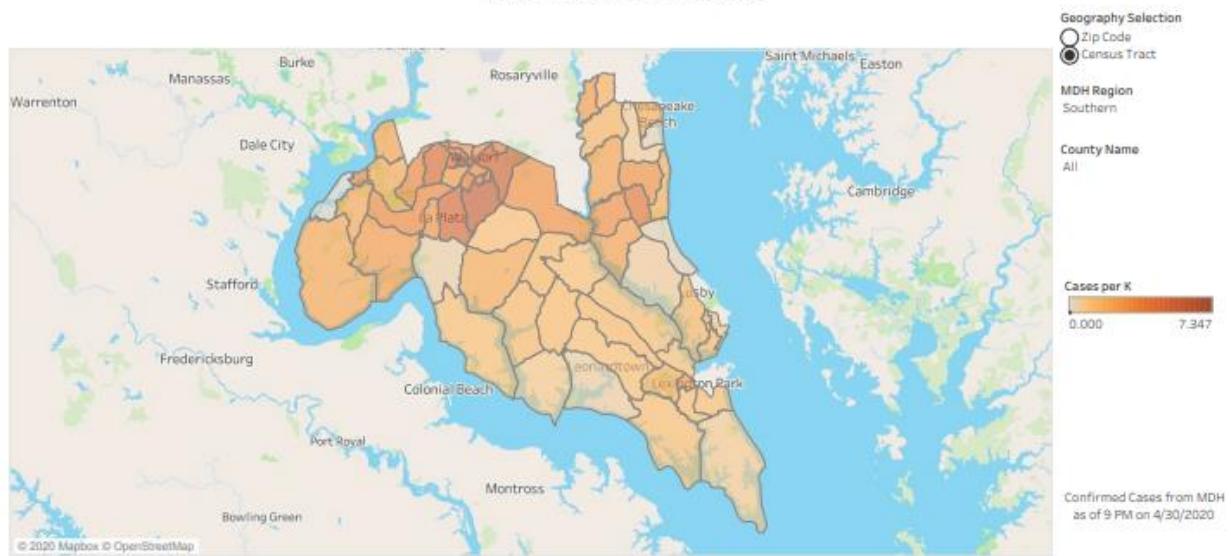
Confirmed COVID-19 Cases

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: 23,472

New Cases in Last 24 Hours: 1,746

Cases in Selected Area: None



• Charles County Case Map

[map-details](#)

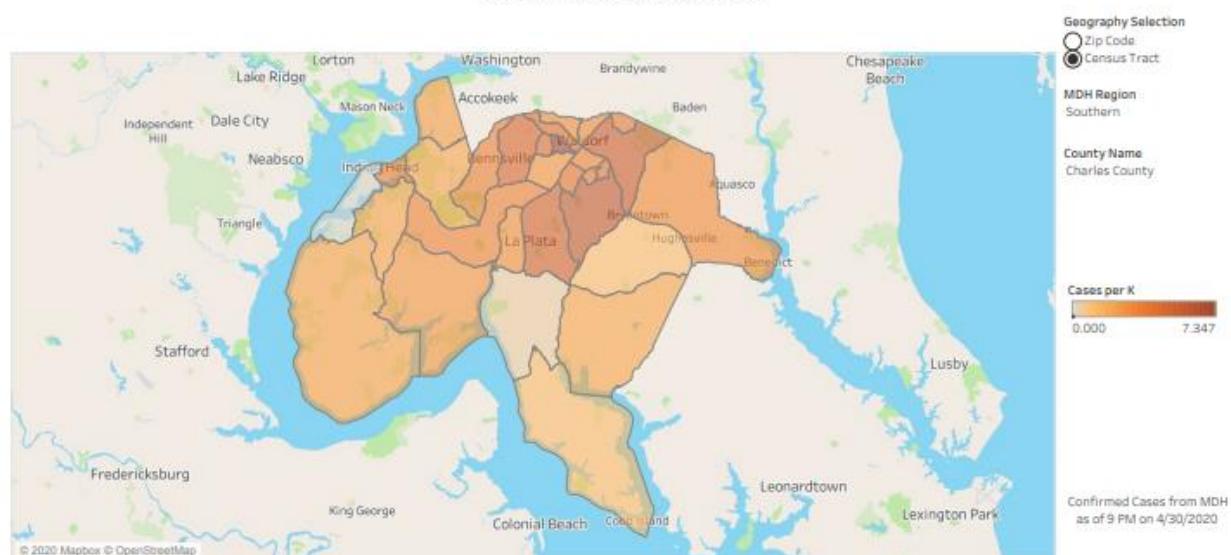
Confirmed COVID-19 Cases

Please note: Numbers are of cases reported to MDH - Maryland residents only.
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Total Cases Statewide: 23,472

New Cases in Last 24 Hours: 1,746

Cases in Selected Area: None



- **Statewide Cases by Date**

Confirmed COVID-19 Cases

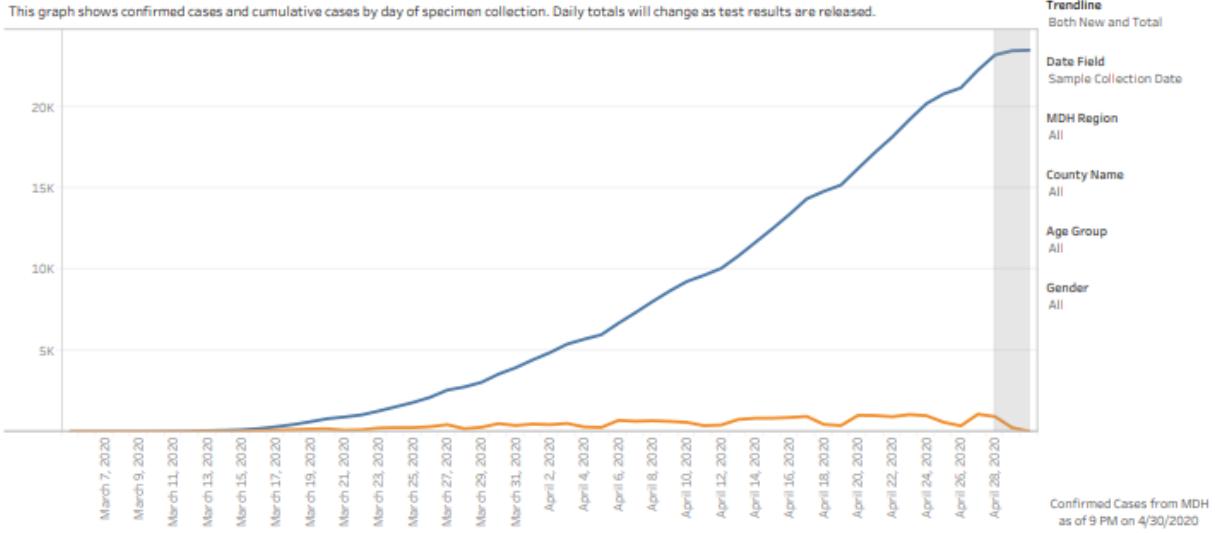
Please note: Numbers are of cases reported to MDH - Maryland residents only.
As with all reports, do not distribute this information publicly.

Total Cases Statewide: 23,472

New Cases in Last 24 Hours: 1,746

Number of Cases for Selected Area/Demographics: 23,472

This graph:



Confirmed COVID-19 Cases

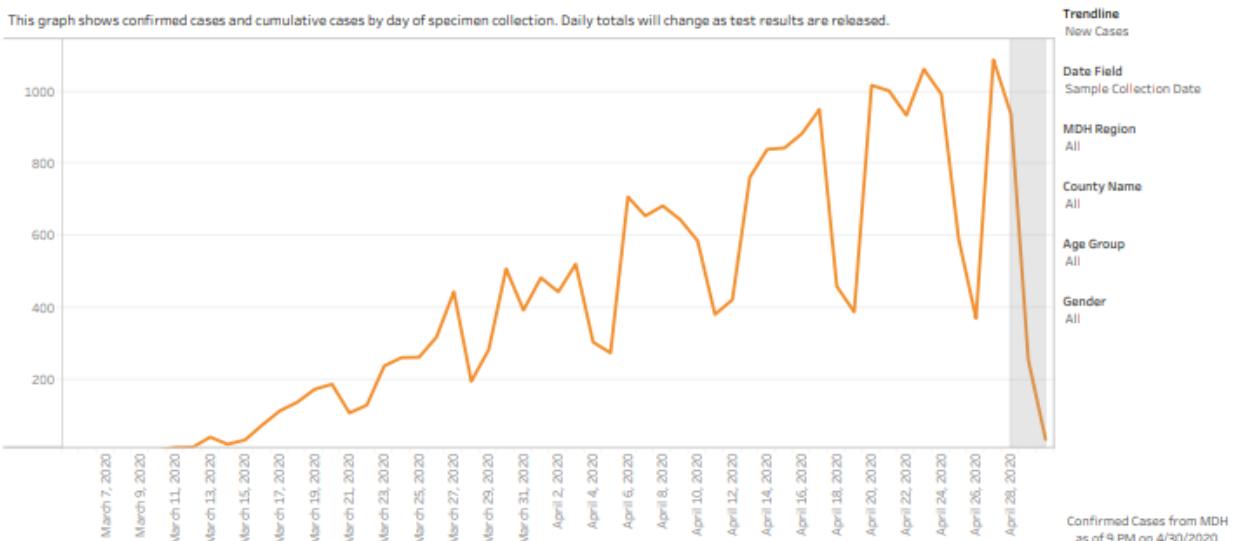
Please note: Numbers are of cases reported to MDH - Maryland residents only.
As with all reports, do not distribute this information publicly.

Total Cases Statewide: 23,472

New Cases in Last 24 Hours: 1,746

Number of Cases for Selected Area/Demographics: 23,472

This graph:



- **Southern Maryland Cases by Date**

Confirmed COVID-19 Cases

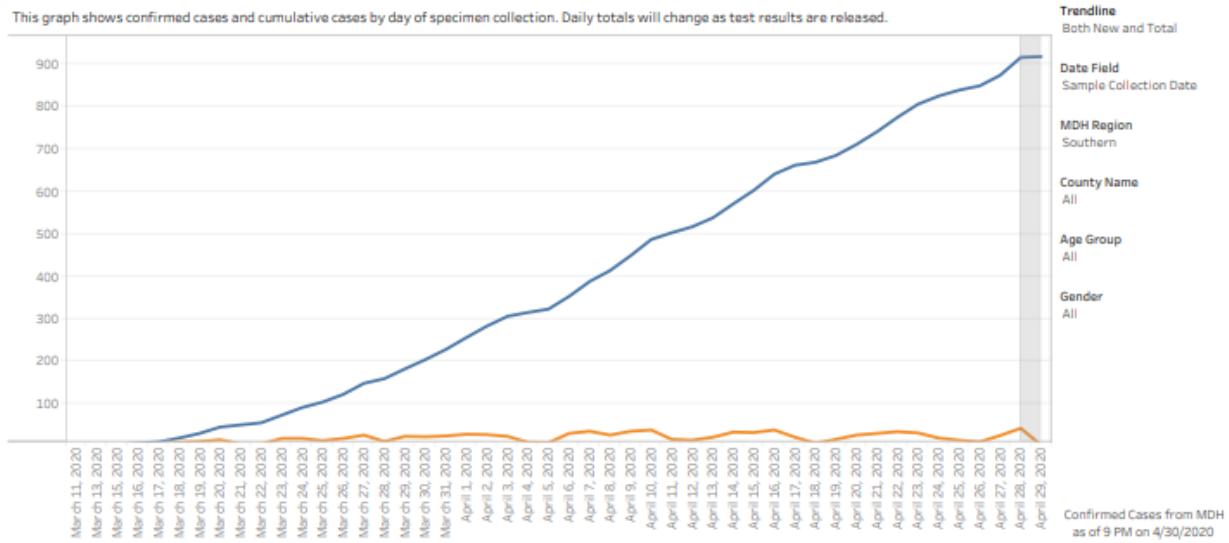
Please note: Numbers are of cases reported to MDH - Maryland residents only.
As with all reports, do not distribute this information publicly.

Total Cases Statewide: 23,472

New Cases in Last 24 Hours: 1,746

Number of Cases for Selected Area/Demographics: 918

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.

- Charles County Cases by Date

Confirmed COVID-19 Cases

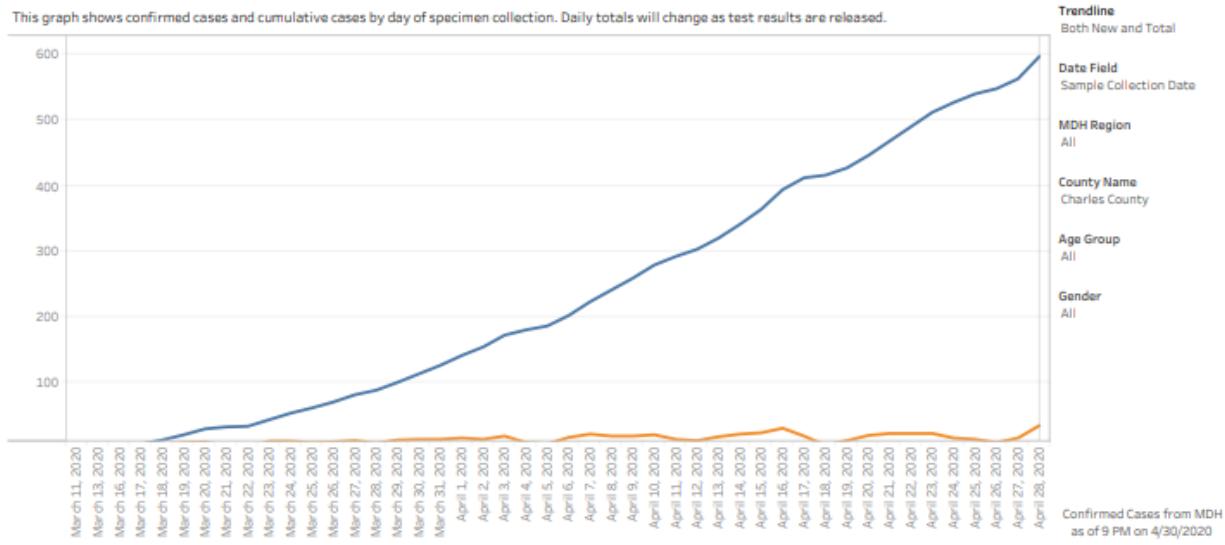
Please note: Numbers are of cases reported to MDH - Maryland residents only.
As with all reports, do not distribute this information publicly.

Total Cases Statewide: 23,472

New Cases in Last 24 Hours: 1,746

Number of Cases for Selected Area/Demographics: 597

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

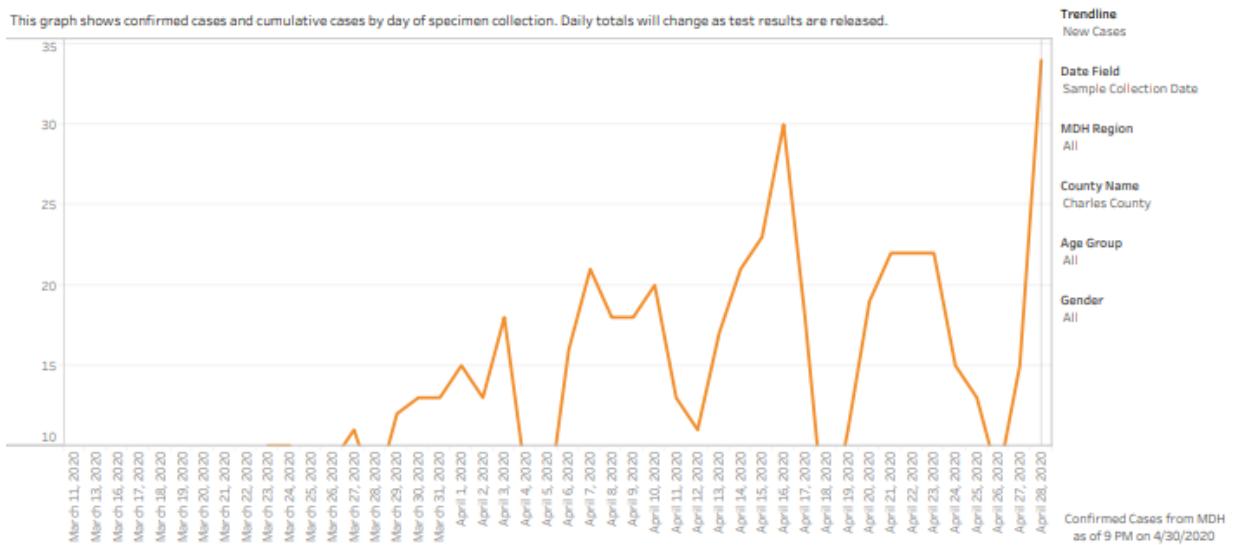
Please note: Numbers are of cases reported to MDH - Maryland residents only.
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Total Cases Statewide: 23,472

New Cases in Last 24 Hours: 1,746

Number of Cases for Selected Area/Demographics: 597

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.

- **NCR Case Projections**

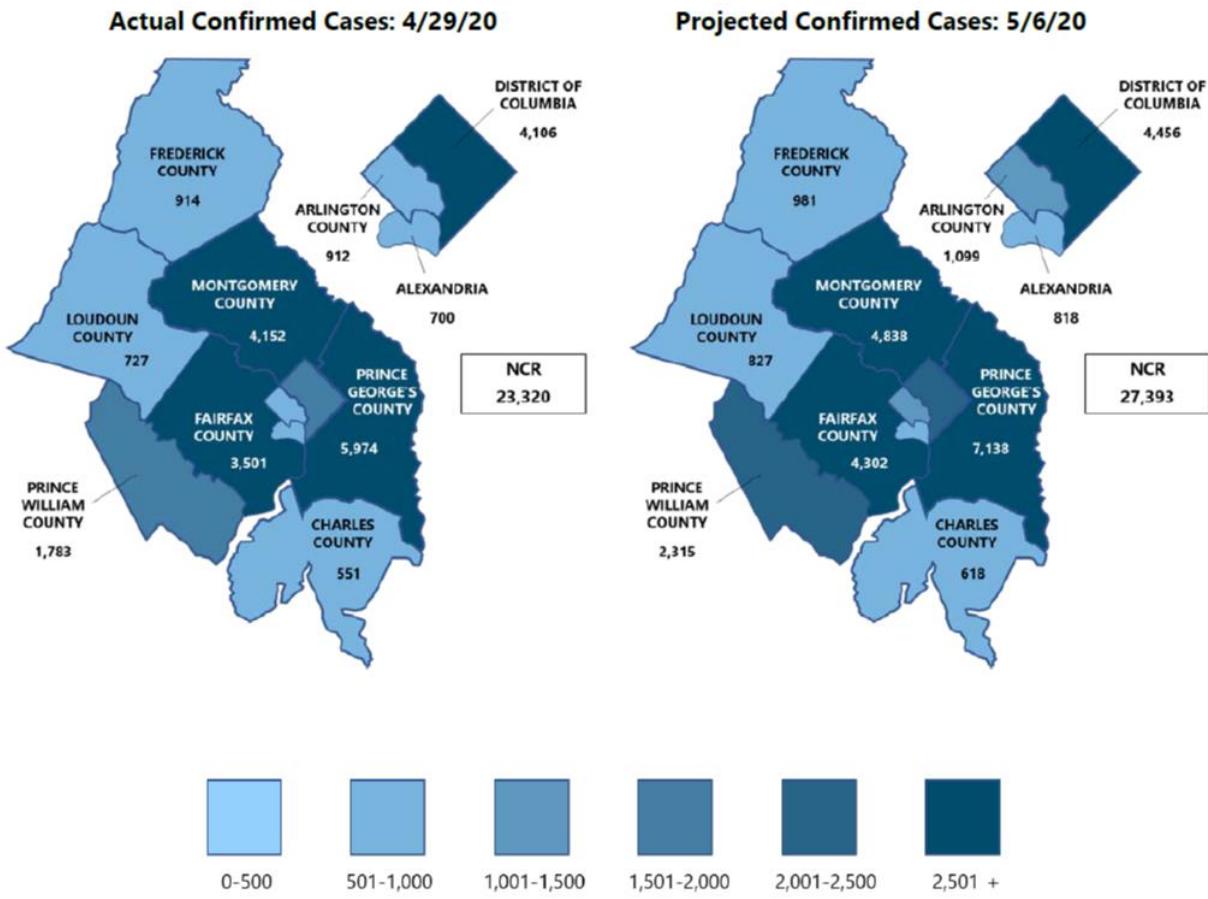
	Actual Confirmed Cases On:			Projected Cases For:									
	4/27	4/28	4/29	4/30	5/1	5/2	5/3	5/4	5/5	5/6	5/13	5/20	
Washington DC	3,892	3,994	4,106	4,192	4,241	4,287	4,332	4,375	4,417	4,456	4,695	4,876	
Charles Co., MD	529	539	551	564	576	586	596	604	612	618	647	657	
Frederick Co., MD	865	893	914	925	935	945	955	964	973	981	1,030	1,066	
Montgomery Co., MD	3,843	4,003	4,152	4,267	4,376	4,480	4,578	4,670	4,757	4,838	5,297	5,612	
Prince George's Co., MD	5,451	5,687	5,974	6,271	6,439	6,597	6,747	6,886	7,017	7,138	7,755	8,065	
Arlington Co., VA	836	865	912	955	982	1,008	1,032	1,056	1,078	1,099	1,213	1,286	
Fairfax Co., VA	3,055	3,331	3,501	3,628	3,751	3,871	3,986	4,096	4,202	4,302	4,863	5,235	
Loudoun Co., VA	628	688	727	762	774	785	797	807	817	827	884	926	
Prince William Co., VA	1,568	1,677	1,783	1,863	1,942	2,020	2,096	2,171	2,244	2,315	2,740	3,030	
Alexandria, VA	627	653	700	749	763	775	787	798	808	818	870	904	
NCR	21,294	22,330	23,320	24,176	24,779	25,355	25,905	26,428	26,924	27,393	29,995	31,658	

- **NCR Medical Demand Projections**

Medical Demand Projections:

	Actual Confirmed Cases On:			Projected Cases (Hospitalized) [ICU] [Ventilator] For:								
	4/27	4/28	4/29	5/6	5/13	5/20						
Washington DC	3,892	3,994	4,106	4,456 (891) [214] {107}	4,695 (939) [225] {113}	4,876 (975) [234] {117}						
Charles Co., MD	529	539	551	618 (124) [30] {15}	647 (129) [31] {16}	657 (131) [32] {16}						
Frederick Co., MD	865	893	914	981 (196) [47] {24}	1,030 (206) [49] {25}	1,066 (213) [51] {26}						
Montgomery Co., MD	3,843	4,003	4,152	4,838 (968) [232] {116}	5,297 (1,059) [254] {127}	5,612 (1,122) [269] {135}						
Prince George's Co., MD	5,451	5,687	5,974	7,138 (1,428) [343] {171}	7,755 (1,551) [372] {186}	8,065 (1,613) [387] {194}						
Arlington Co., VA	836	865	912	1,099 (220) [53] {26}	1,213 (243) [58] {29}	1,286 (257) [62] {31}						
Fairfax Co., VA	3,055	3,331	3,501	4,302 (860) [206] {103}	4,863 (973) [233] {117}	5,235 (1,047) [251] {126}						
Loudoun Co., VA	628	688	727	827 (165) [40] {20}	884 (177) [42] {21}	926 (185) [44] {22}						
Prince William Co., VA	1,568	1,677	1,783	2,315 (463) [111] {56}	2,740 (548) [132] {66}	3,030 (606) [145] {73}						
Alexandria, VA	627	653	700	818 (164) [39] {20}	870 (174) [42] {21}	904 (181) [43] {22}						
NCR	21,294	22,330	23,320	24,779 (4,956) [1,189] {595}	25,905 (5,181) [1,243] {622}	26,924 (5,385) [1,292] {646}						

- Maryland Case Projection Map



MISCELLANEOUS

Respectfully submitted by Charles County PHEP



Coronavirus Disease 2019 (COVID-19): Frequently Asked Questions About Mental Health

Updated April 28, 2020

The outbreak of COVID-19 can feel overwhelming for people and communities. Fear and anxiety about a disease, especially a new virus, can be stressful.

There are online resources to support you. Please reach out if you need help.

Information follows about how to cope with mental health and stress and anxiety during this time:

- [Mental Health, Stress and Anxiety for Individuals \(p.2\)](#)
- [Mental Health, Stress and Anxiety for Parents of Young Children \(p.5\)](#)
- [Mental Health, Stress and Anxiety for Adolescents and Young Adults \(p.8\)](#)
- [Mental Health, Stress and Anxiety for Health Care Workers \(p.11\)](#)
- [Mental Health, Stress and Anxiety for Older Adults and Individuals with Disabilities \(p.14\)](#)

Mental Health, Stress and Anxiety for Individuals

What should I do if I have an existing mental health condition?

People with pre-existing mental health conditions should continue with their treatment plans during an emergency and monitor for any new symptoms.

Additional information may be found at the Substance Abuse and Mental Health Services Administration (SAMHSA) website, <https://www.samhsa.gov/disaster-preparedness>.

What if I am feeling anxious or stressed related to COVID-19?

Everyone reacts differently to stressful situations. The emotional impact of an emergency on a person can depend on the person's characteristics and experiences, the social and economic circumstances of the person and their community and the availability of local resources. People can become more distressed if they see repeated images or hear repeated reports about the COVID-19 outbreak in the media.

Reactions during an infectious disease outbreak can include:

- Fear and worry about your own health status and that of your loved ones
- Changes in sleep or eating patterns
- Difficulty sleeping or concentrating
- Worsening of chronic health problems
- Increased use of alcohol, tobacco or other drugs

Feelings of fear, anxiety, sadness and uncertainty are normal during a pandemic. Fortunately, being proactive about your mental health can help to keep both your mind and body stronger.

What can I do to support myself?

Avoid excessive exposure to media coverage of COVID-19. Take breaks from watching, reading, or listening to news stories. It can be upsetting to hear about the crisis and see images repeatedly. Try to do some other activities you enjoy to return to your normal life. When you do read news, avoid media outlets that build hype or dwell on things that can't be controlled. Instead, turn to information sources that provide reliable information about how to protect yourself, such as the Centers for Disease Control and Prevention (CDC).

Recognize the things you can control. Take care of your body. Take deep breaths, stretch or meditate. Try to eat healthy, well-balanced meals, exercise regularly, get plenty of sleep and avoid alcohol and drugs.

Make time to unwind and remind yourself that strong feelings will fade. Share your concerns and how you are feeling with a friend or family member. Maintain healthy relationships. Maintain a sense of hope and positive thinking.

Maintain proper infection control techniques such as hand-washing and social distancing.

Check how realistically you are viewing the situation. The Centers for Disease Control and Prevention (CDC) has continually pointed out that the vast majority of individuals, even if they do get sick, will not become terribly ill. Avoid dramatic media and stick to credible sources of information, such as the CDC. Social media is not a great source of information.

Keep yourself grounded. Exercise, meditate. Talk to your friends on the phone. Try to get regular sleep and a healthy diet. It is not unusual for individuals to experience disruptions in both eating and sleeping during a crisis, and it is very important to try to maintain healthy habits, and to avoid strategies such as using drugs or alcohol to handle stress.

Stay connected. Staying at home and distancing from others should not mean you are completely isolated. Reaching out to people you trust is one of the best ways to reduce anxiety, depression, loneliness, and boredom during social distancing, quarantine, and isolation. You can use the phone, email, text messaging, and social media to connect with friends, family, and others. Talk “face to face” with friends and loved ones using Skype or FaceTime.

What are some of the things you can't control?

All you can do is pay attention to those things above that you can control. Worrying will merely aggravate the situation.

The infection is likely to spread through the population in unpredictable ways. There is nothing you can do about this. If you follow precautions you are less likely to get sick, but there are no guarantees.

There is some benefit to planning. But after you have a plan, move on and focus on living your life rather than worrying about the virus. Don't try to control other people's reactions. Listen and help people work through the facts concerning the virus, but understand that hyping or denying the existence of a threat is not helpful.

Call your health care provider if stress reactions interfere with your daily activities for several days in a row.

Where can I find additional resources?

Maryland's Crisis Helpline:

Call 211 and press 1, text 898-211, or visit pressone.211md.org for information or to [chat confidentially](#) about local services and programs.

CDC: Mental Health and Coping with COVID-19:
<https://www.cdc.gov/coronavirus/2019-ncov/about/coping.html>

CDC: Taking Care of Your Emotional Health:
<https://emergency.cdc.gov/coping/selfcare.asp>

SAMHSA: Warning Signs and Risk Factors for Emotional Distress:
<https://www.samhsa.gov/find-help/disaster-distress-helpline/warning-signs-risk-factors>

The Center for the Study of Traumatic Stress: Coronavirus and Emerging Infectious Disease Outbreaks Response:
<https://www.cstsonline.org/resources/resource-master-list/coronavirus-and-emerging-infectious-disease-outbreaks-response>

American Foundation for Suicide Prevention: Taking Care of Your Mental Health in the Face of Uncertainty
<https://afsp.org/story/taking-care-of-your-mental-health-in-the-face-of-uncertainty>

CDC: Strategies to Help Children Cope With a Disaster:
<https://www.cdc.gov/childrenindisasters/helping-children-cope.html>

SAMHSA's: Tips for Social Distancing, Quarantine and Isolation
<https://www.samhsa.gov/sites/default/files/tips-social-distancing-quarantine-isolation-031620.pdf>

SAMHSA's FACT SHEET: Coping With Stress During Infectious Disease Outbreaks:
<https://store.samhsa.gov/product/Coping-with-Stress-During-Infectious-Disease-Outbreaks/sma14-4885>

SAMHSA's FACT SHEET: Taking Care of Your Behavioral Health: Tips for Social Distancing, Quarantine, and Isolation During an Infectious Disease Outbreak
<https://store.samhsa.gov/product/Taking-Care-of-Your-Behavioral-Health-During-an-Infectious-Disease-Outbreak/sma14-4894>

SAMHSA's FACT SHEET: Talking with Children: Tips for Caregivers, Parents, and Teachers during Infectious Disease Outbreaks
<https://store.samhsa.gov/product/Talking-With-Children-Tips-for-Caregivers-Parents-and-Teachers-During-Infectious-Disease-Outbreaks/PEP20-01-01-006>

SAMHSA's Disaster Distress Helpline provides 24/7, 365-day-a-year crisis counseling and support to people experiencing emotional distress related to natural or human-caused disasters. This toll-free, multilingual, and confidential crisis support service is available to all residents in the United States and its territories: 1-800-985-5990

Mental Health, Stress and Anxiety for Parents of Young Children

How can I help my children?

Children react, in part, to what they see from the adults around them. When parents and caregivers deal with the COVID-19 calmly and confidently, they can provide the best support for their children. Parents can be more reassuring to others around them, especially children, if they are better prepared.

Not all children respond to stress in the same way. Some common stress-related behavior to watch for in children include:

- Excessive crying and irritation
- Returning to behaviors they have outgrown, like toileting accidents or bedwetting
- Excessive worry or sadness
- Unhealthy eating or sleeping habits
- Irritability and “acting out” behaviors
- Poor school performance or avoiding assignments
- Difficulty with attention and concentration
- Avoidance of activities enjoyed in the past
- Unexplained headaches or body pain
- Use of alcohol, tobacco, or other drugs

There are many things you can do to support your child:

Take time to talk with your child about the COVID-19 outbreak. Answer questions and share facts about COVID-19 in a way that your child can understand:

<https://www.cdc.gov/coronavirus/2019-ncov/about/share-facts.html>. Limit your child’s exposure to media coverage of COVID-19. Children may misinterpret what they hear and can become frightened about something they do not understand.

Reassure your child that they are safe. Let them know it is okay if they feel upset. Share with them how you deal with your own stress so that they can learn how to cope from you.

Help children find positive ways to express disturbing feelings such as fear and sadness. Every child has his/her own way to express emotions. Sometimes engaging in a creative activity, such as playing and drawing, can facilitate this process. Children feel relieved if they can express and communicate their disturbing feelings in a safe and supportive environment.

Help your child to have a sense of structure. When it is safe to return to school or child care, help them return to their regular activity. Be a role model; take breaks, get plenty of sleep, exercise, and eat well. Connect with your friends and family members and rely on your social support system.

The American Academy of Child and Adolescent Psychiatry has more resources and information about children and anxiety:

https://www.aacap.org/AACAP/Families_and_Youth/Resource_Centers/Anxiety_Disorder_Resource_Center/FAQ.aspx#anxietyfaq2

The American Academy of Child and Adolescent Psychiatry has more information about talking to children about coronavirus (COVID-19):

https://www.aacap.org/App_Themes/AACAP/Docs/latest_news/2020/Coronavirus_COVID19_Children.pdf

Where can I find additional resources?

Maryland's Crisis Helpline:

Call 211 and press 1, text 898-211, or visit pressone.211md.org for information or to [chat confidentially](#) about local services and programs.

Maryland Family Tree 24/7 Parenting HelpLine: 1-800-243-7337

WHO Healthy Parenting in the time of COVID-19:

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/healthy-parenting>

CDC: Mental Health and Coping with COVID-19:

<https://www.cdc.gov/coronavirus/2019-ncov/about/coping.html>

CDC: Taking Care of Your Emotional Health:

<https://emergency.cdc.gov/coping/selfcare.asp>

SAMHSA: Warning Signs and Risk Factors for Emotional Distress:

<https://www.samhsa.gov/find-help/disaster-distress-helpline/warning-signs-risk-factors>

National Association of School Psychologists: Helping Children Cope With Changes Resulting From COVID-19

<https://www.nasponline.org/resources-and-publications/resources-and-podcasts/school-climate-safety-and-crisis/health-crisis-resources/helping-children-cope-with-changes-resulting-from-covid-19>

Gender Spectrum Resources for Challenging Times

<https://www.genderspectrum.org/blog/resources-for-challenging-times>

American Foundation for Suicide Prevention: Taking Care of Your Mental Health in the Face of Uncertainty

<https://afsp.org/story/taking-care-of-your-mental-health-in-the-face-of-uncertainty>

The Center for the Study of Traumatic Stress: Coronavirus and Emerging Infectious Disease Outbreaks Response:

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CDC: Strategies to Help Children Cope With a Disaster:

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SAMHSA's FACT SHEET: Coping With Stress During Infectious Disease Outbreaks:

<https://store.samhsa.gov/product/Coping-with-Stress-During-Infectious-Disease-Outbreaks/sma14-4885>

SAMHSA's FACT SHEET: Taking Care of Your Behavioral Health: Tips for Social Distancing,

Quarantine, and Isolation During an Infectious Disease Outbreak

<https://store.samhsa.gov/product/Taking-Care-of-Your-Behavioral-Health-During-an-Infectious-Disease-Outbreak/sma14-4894>

SAMHSA's FACT SHEET: Talking with Children: Tips for Caregivers, Parents, and Teachers during Infectious Disease Outbreaks

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Mental Health, Stress and Anxiety for Adolescents and Young Adults

What should I do if I have an existing mental health condition?

People with pre-existing mental health conditions should continue with their treatment plans during an emergency and monitor for any new symptoms.

Additional information may be found at the Substance Abuse and Mental Health Services Administration (SAMHSA) website, <https://www.samhsa.gov/disaster-preparedness>.

Everyone is worrying about the coronavirus pandemic, but everyone I know is healthy. Should I worry?

Everyone reacts differently to stressful situations. Adolescents and young adults often feel like nothing can go wrong. While this is normal, and can help reduce your worries, make sure you take steps to stay healthy.

Recognize others may be hiding their worries in many ways. Some people become very irritable, angry and even start fights with others. Sleep and eating may become disrupted. Especially if other frightening things have happened, some youth may develop nightmares or have panic attacks. Still others may increase their use of alcohol, tobacco and drugs to escape from what is going on.

What can I do to help cope?

Limit your screen time. Limit your time watching, reading or listening to news stories. Avoid scrolling through your friends Instagram or Snap posts about illness and COVID-19.

Keep yourself grounded. Exercise, meditate. Draw, write in a journal or use music to express your thoughts and feelings. Do things that make you feel good and are also good for you.

Plan the things you *can* do: wash your hands, carry wet wipes or other items when you are out in public. Recognize the things you can control, like having good hygiene.

Reach out to your friends and family. If you can, talk about how you are feeling. Talk about anything positive — laugh, joke. Make sure you get enough sleep and stick to your pre-COVID-19 routine as much as you can. Let someone know if you are not able to do your usual activities because of your worrying.

Stay connected. Staying at home and distancing from others should not mean you are completely isolated. Reaching out to people you trust is one of the best ways to reduce anxiety, depression, loneliness, and boredom during social distancing, quarantine, and isolation. You can use the

phone, email, text messaging, and social media to connect with friends, family, and others. Talk “face to face” with friends and loved ones using Skype or FaceTime.

My school is closed. Now what?

Keep up your usual routine. Even if school is not required, maintaining structure to your days will help you feel in control. Routine is comforting. Schedule calls and video chats to keep you connected with your friends. Ask your family or other supports to reach out to you as well.

Where can I find additional resources?

There are resources online to help support you through this difficult time. Please use them, and ask for help if you need it.

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Mental Health, Stress and Anxiety for Health Care Workers

What should I know?

As a health professional, you may feel overwhelmed. As a person working with individuals who are potentially ill, you also likely have concerns about the risk of becoming infected yourself. You may also be concerned about your own financial security and family in the event of a quarantine or infection.

It is important to look after yourself and maintain a balanced view of the situation. There are some things you can control, and other things that you can do nothing about. The challenge is to separate these things so that you can take reasonable steps to protect yourself, but also let go of worries and anxieties that simply get in your way. It will be important to help your clients make the same distinctions.

It is important to recognize that health care workers can suffer secondary trauma as a result of their emotional involvement with distressing situations. Check in with yourself, noting if you have any symptoms of anxiety or depression. These could include sleeplessness, fatigue, irritability, depression, anger, illness, guilt and withdrawal. There are resources available online to help you cope. Please use them if you need them.

Think about what you need to help yourself and those you are helping to handle the stress involved in this situation — what are some of the things you can control?

Make sure you understand how your employer will address the outbreak. Remember that your reaction to the situation may not be the same as those of your colleagues or your clients. Everybody reacts differently to stressors, including those brought on by this outbreak. Respect other people's feelings.

Maintain proper infection control techniques such as hand-washing and social distancing.

Check how realistically you are viewing the situation. The Centers for Disease Control and Prevention (CDC) has continually pointed out that the vast majority of individuals, even if they do get sick, will not become terribly ill. Avoid dramatic media and stick to credible sources of information, such as the CDC. Social media is not a great source of information.

Keep yourself grounded. Exercise, meditate. Talk to your friends on the phone. Try to get regular sleep and a healthy diet. It is not unusual for individuals to experience disruptions in both eating and sleeping during a crisis, and it is very important to try to maintain healthy habits, and to avoid strategies such as using drugs or alcohol to handle stress.

What are some of the things you can't control? Worrying will merely aggravate the situation.

All you can do is pay attention to those things above that you can control.

The infection is likely to spread through the population in unpredictable ways. There is nothing you can do about this. If you follow precautions you are less likely to get sick, but there are no guarantees.

There is some benefit to planning. But after you have a plan, move on and focus on living your life rather than worrying about the virus. Don't try to control other people's reactions. Listen and help people work through the facts concerning the virus, but understand that hyping or denying the existence of a threat is not helpful.

Visit the Center for the Study of Traumatic Stress page on Sustaining the Well-Being of Healthcare Personnel during Coronavirus and other Infectious Disease Outbreaks:

<https://www.cstsonline.org/resources/resource-master-list/coronavirus-and-emerging-infectious-disease-outbreaks-response>

Where can I find additional resources?

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CDC: Taking Care of Your Emotional Health:

<https://emergency.cdc.gov/coping/selfcare.asp>

American Psychiatric Association: COVID-19 Mental Health Impacts: Resources for Psychiatrists:

<https://www.psychiatry.org/news-room/apa-blogs/apa-blog/2020/03/covid-19-mental-health-impacts-resources-for-psychiatrists>

SAMHSA: Warning Signs and Risk Factors for Emotional Distress:

<https://www.samhsa.gov/find-help/disaster-distress-helpline/warning-signs-risk-factors>

The Center for the Study of Traumatic Stress: Coronavirus and Emerging Infectious Disease Outbreaks Response:

<https://www.cstsonline.org/resources/resource-master-list/coronavirus-and-emerging-infectious-disease-outbreaks-response>

American Foundation for Suicide Prevention: Taking Care of Your Mental Health in the Face of Uncertainty:

<https://afsp.org/story/taking-care-of-your-mental-health-in-the-face-of-uncertainty>

CDC: Strategies to Help Children Cope With a Disaster:

<https://www.cdc.gov/childrenindisasters/helping-children-cope.html>

SAMHSA's: Tips for Social Distancing, Quarantine and Isolation

<https://www.samhsa.gov/sites/default/files/tips-social-distancing-quarantine-isolation-031620.pdf>

SAMHSA's FACT SHEET: Coping With Stress During Infectious Disease Outbreaks:

<https://store.samhsa.gov/product/Coping-with-Stress-During-Infectious-Disease-Outbreaks/sma14-4885>

SAMHSA's FACT SHEET: Taking Care of Your Behavioral Health: Tips for Social Distancing, Quarantine, and Isolation During an Infectious Disease Outbreak

<https://store.samhsa.gov/product/Taking-Care-of-Your-Behavioral-Health-During-an-Infectious-Disease-Outbreak/sma14-4894>

SAMHSA's FACT SHEET: Talking with Children: Tips for Caregivers, Parents, and Teachers during Infectious Disease Outbreaks

<https://store.samhsa.gov/product/Talking-With-Children-Tips-for-Caregivers-Parents-and-Teachers-During-Infectious-Disease-Outbreaks/PEP20-01-01-006>

SAMHSA's Disaster Distress Helpline provides 24/7, 365-day-a-year crisis counseling and support to people experiencing emotional distress related to natural or human-caused disasters. This toll-free, multilingual, and confidential crisis support service is available to all residents in the United States and its territories: 1-800-985-5990

Mental Health, Stress and Anxiety for Older Adults and Adults with Disabilities

What are warning signs and risk factors that older adults and adults with disabilities may be experiencing emotional stress or anxiety?

Older adults and adults with disabilities who are impacted by an infectious disease outbreak are faced with difficult challenges. Many older adults already struggle to maintain social connections and meaningful activities because they may not have many friends and family members nearby, they may not drive, children are grown and they are likely retired. When asked to further limit contact with the public to reduce exposure to COVID-19, they may experience increased loneliness and isolation.

Additionally, many older adults and adults with disabilities are reliant on help from family, friends or paid caregivers. Fear of not having access to this care if the caregiver becomes sick can cause stress and anxiety.

Warnings signs of stress may include:

- Difficulty concentrating on daily activities
- Loss of interest in daily activities
- Crying spells, irritability or bursts of anger
- Difficulty eating
- Sleep problems, like difficulty falling asleep, staying asleep or sleeping too much
- Increasing physical distress symptoms such as headaches, stomach pains or restlessness
- Increased fatigue
- Feeling guilty, helpless or hopeless

Older adults and adults with disabilities most at risk of experiencing severe emotional stress or anxiety include those with a history of:

- Exposure to other traumas, including severe accidents, abuse, assault, combat or rescue work
- Chronic medical illness or psychological disorders
- Chronic poverty, homelessness, or discrimination
- Those who lost a loved one or friend involved in an infectious disease outbreak
- Those who lack economic stability and/or knowledge of the English language
- Older adults who may lack mobility or independence
- Older adults who rely upon others for daily assistance

What can older adults and adults with disabilities do to reduce emotional stress and anxiety?

- Avoid excessive exposure to media coverage of COVID-19
- Only consult legitimate sources, like the Centers for Disease Control and Prevention, for information about COVID-19
- Engage in activities that bring comfort or joy
- Take deep breaths, stretch or meditate
- Try to eat healthy, well-balanced meals, exercise regularly, get plenty of sleep and avoid alcohol and drugs
- Make time to unwind and remember that strong feelings will fade
- Share your concerns and how you are feeling with a friend or family member
- Call your health care provider if stress reactions interfere with your daily activities for several days in a row
- Avoid making major life decisions

Be especially aware of scams related to COVID-19. The Federal Trade Commission has identified several of them and is offering tips to protect yourself and others:

<https://www.consumer.ftc.gov/features/coronavirus-scams-what-ftc-doing>.

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Where can I find additional resources?

Maryland's Crisis Helpline:

Call 211 and press 1, text 898-211, or visit pressone.211md.org for information or to [chat confidentially](#) about local services and programs.

CDC: Mental Health and Coping with COVID-19:

<https://www.cdc.gov/coronavirus/2019-ncov/about/coping.html>

CDC: Taking Care of Your Emotional Health:

<https://emergency.cdc.gov/coping/selfcare.asp>

SAMHSA: Warning Signs and Risk Factors for Emotional Distress:

<https://www.samhsa.gov/find-help/disaster-distress-helpline/warning-signs-risk-factors>

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HOSPITAL BRIEF 5-01-2020

- 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 = 91
- Hospital ICU Census = 15
- Hospital ICU is now a dedicated COVID-19 Unit, and 3 East is for ICU overflow.
- Isolation Room Capacity = 12
- Isolation Rooms Occupied = 6
- Confirmed positive cases of COVID-19 patient admissions = 25
 - Of the total 25 COVID-19 positive patients, five (5) of the patients are located in the ICU. Twenty (20) are located in the 3 South dedicated COVID-19 unit
- PUI admissions = 4
- Ventilated COVID-19 positive patients = 5
- Ventilators not in use = 15
- 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.

Intelligence Briefing 5-1-2020
COVID Charles County
Week 7

Updated Infection Numbers: As of 0832 hrs.

Total worldwide: 3,276,373 **+54,266** since the 4-30-20 brief.

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

4-21/22	4-22/23	4-23/24	4-24/25	4-25/26	4-26/27	4-27/28	4-28/29	4-29/4-30	4-30/5-1
93,568	54,956	87,299	91,793	88,301	164,198	67,182	79,263	82,692	54,266

Total fatalities worldwide: 233,998 **+5,241** since the 4-30-20 brief

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

Total confirmed cases in the US: 1,070,032 **+27,158** since the 4-30-20 brief

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

4-21/22	4-22/23	4-23/24	4-24/25	4-25/26	4-26/27	4-27/28	4-28/29	4-29/30	4-30/5-1
37,328	16,376	27,844	34,896	33,885	28,336	20,884	24,699	29,706	27,158

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: 61,123 **+1,896** since 4-30-2020

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

Total confirmed cases in State of MD: 23,472 **+1,730** since the 4-30-20 brief

Total tested in the State of MD: 97,511 **+4,894** over 4-30-20

Percent of those test that test positive: **24.0%**

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: 1,098 **+51** change since the 4-30-20 brief

Number of probable deaths: 94

Total Ever Hospitalized: 4,718 **Increase of 159** from 4-30-2020

Persons currently hospitalized: 1,668 **-43** since 4-30-2020

First Responder Numbers in Charles County: NUMBERS AS OF 5-1-2020 @1230

50 Quarantine: means exposed and they can't come to work. **No change since the last report**

3 Self Isolation: means sick or tested positive **-1 since the last reported**

Weather:

Sat 71-49 sun, Sunday 78-55 storms possible, Monday 73-48 sun

Local:

No stores were visited this am. Locally made hand sanitizer can be found at several small stores throughout the county.

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.

4-28-2020, President signed executive order to required meat processing plants to stay open. It is unknown the effectiveness of this order due to shrinking employee numbers.

“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)"

Additional “community cabanas” have been opened. (see attached)

Maryland Update:

Gov. using MSP and National Guard to protect COVID testing supplies

Fedex Testing site to close. Moving to PG Health Department

Gov. announced new initiatives for nursing homes

Region:

Over 24,477 cases in the NCR as of 0500 5-1-2020,

45,031 cases in Maryland, DC, and Virginia as of 1100 on 5-1-2020.
VA eases restrictions on elective surgery, and vet care.

National:

AP infection map: <https://apnews.com/7b5a2994d351e5c1697e2c7478e2969c>

At least 35 states easing some restrictions

Urban areas, meat processing, nursing homes, and prisons are reporting the largest outbreaks across the country.

Texas have increased testing to 20K per week. Data showing 8.7% of the population has tested positive.

Remdesivir showing signs of being helpful in treatment

Maritime shipping industry reporting strong declines. 22% reduction in shipments from China over last year.

3.8 million more Americans filed for unemployment

Local critical infrastructure:

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

Predictions/ Analysis:

- We appear to be on the downward side or at least seeing a leveling of this crisis. Commander should take this time to review and collect documents needed to begin the AAR process of the tactical portion of this event. Logistics should begin placing orders to build stockpiles for the next round.
- 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

May 1st, 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:

- 10 sworn officer quarantined
 - 5 Officers dealt with a disorderly subject during an arrest prior to transporting to CCDC on 4/17/20 (13 days into quarantine period)***
 - 2 Officers who transported the same subject to the hospital for an emergency evaluation on 4/20/20 (10 days into quarantine period) ***
 - 3 Officers who responded to a priority one overdose call on 4/28 (2 days into quarantine period).
- 0 officers isolated
- 26 correctional officer quarantined
 - 24 Correctional officers who encountered inmate who tested positive from 4/17-4/20/20 (same subject responsible for the police exposures reference the disorderly arrest / 10 days into quarantine period). ***

- 2 Correctional officers who have family members who are sick with symptoms.
- 1 correctional officers isolated
 - Exposed outside of CCDC, has been out of work since October 2019, has not been in the facility since then.
- 0 civilian quarantined
- 1 civilians isolated

***Subject was arrested and held at CCDC asymptomatic and continued to be asymptomatic during time in custody and during transport to hospital for emergency evaluation. Only after being released from CCSO custody did the subject become symptomatic and test positive for COVID-19.

Charles County Detention Center Population:

- 123 inmates
- 0 COVID positive inmates
- 0 Inmates with symptoms

Maryland State Police: None local

Maryland Transportation Authority: None local

La Plata Police Department: None

Natural Resources Police: None local

Definitions

Quarantine: Quarantine is the process of keeping an asymptomatic (no symptoms) person who had a reported exposure away from other people.

Isolation: Isolation is the process of keeping a symptomatic or positive person away from all other people.

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: 49

Warnings: 46

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 5-1-2020
COVID Charles County

48-hour Priorities:

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

Meals:

On Thursday, 4/30/20, CCPS served 3132 meals at the 11 meal distribution sites. This total was - 1,782 from Wednesday, 4/29/20.

Closure:

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

Instruction:

New Charles County Public Schools (CCPS) distance learning materials for students will be available today, Friday, May 1. New lessons for weeks five and six to cover May 4-15 will be posted on the CCPS website at www.ccboe.com . This includes content for elementary school students, special education resources, English Learner materials and secondary Apex Learning lessons.

Paper copies of learning packets will be available at the 11 meal sites in Charles County. Meal sites are open 11 a.m. to 1 p.m. Monday through Friday. More information is posted on the CCPS website at <https://www.ccboe.com/index.php/distance-learning> .

Learning packets for English Learners and upper math classes for secondary students are only available at the Maurice J. McDonough High School and Westlake High School distribution sites.

Community Wifi:

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

Misc:

Today, Friday, 5/1/20 is SCHOOL LUNCH HERO DAY!!

Respectfully submitted by Jason Stoddard and Michael Meiser



Serving Charles County

Charles County Volunteer Firemen's Association, Inc.

Post Office Box #21, La Plata, Maryland 20646

May 1st, 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 – 5 Members across 3 Stations (1 Positive / 4 No Test):

- 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 average
56 Ems Related Incidents ---- 17 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,

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

THERE ARE BETTER WAYS TO COPE...

Excessive drinking may lead to alcoholism
as well as health and other social problems.

