



Homeland  
Security

INTELLIGENCE NOTE

1 May 2020

## (U) Counterterrorism Mission Center

### (U//FOUO) Release of Prisoners in Response to COVID-19 Risks Radicalized Individuals Being Freed Worldwide

**(U//FOUO) Scope.** This *Intelligence Note* is intended to inform DHS and US Government (USG) leadership as well as state and local partners about the risk of prisoners released worldwide in response to the COVID-19 pandemic and the threat of radicalized individuals being freed.<sup>a</sup> The *Note* is based on a review of all available open-source information. The information cutoff date for this *Note* is 27 April 2020.

*(U//FOUO) Prepared by the DHS Intelligence Enterprise (DHS IE) Counterterrorism Mission Center (CTMC). Coordinated with CIA, DIA, DoD, DOS/INR, FBI/TSC, NSA, and NSA.*

(U//FOUO) Countries around the world, including the United States, have released or are considering releasing prisoners to mitigate the spread of COVID-19 in overcrowded prisons, which probably increases the likelihood of unidentified radicalized prisoners being freed with limited or no monitoring. Most countries are unlikely to release individuals convicted of crimes in connection to terrorism-related activities or violent offenses, but tracking other criminals who have been radicalized while in prison remains difficult, and foreign partners typically are not required under Homeland Security Presidential Directive-6 or other information-sharing arrangements to share information with the United States on non-terrorism cases.

- » (U//FOUO) **Homeland.** As of late April, approximately 16,500 non-violent prisoners have been released from state and local penitentiaries, as well as 1,500 inmates from federal prisons, as of late April, according to press reporting, court documents, and U.S. Bureau of Prison statistics.<sup>1,2,3,4</sup> Multiple individuals charged with or convicted for terrorism-related offenses have petitioned for release on bond because of COVID-19 concerns, according to press reporting and court documents.<sup>5,6,7,8</sup>
- » (U//FOUO) **Americas.** Canada has released over 2,000 prisoners in response to COVID-19, possibly including three criminals convicted for violent crimes, according to Canadian press.<sup>9,10</sup> Separately, in mid-April, Chile, Colombia, and Nicaragua announced they would move thousands of prisoners to house arrest to stem the spread of the virus, and in late-April, Mexico passed an amnesty law that will release about 2,600 low-level offenders, according to Western and Mexican press.<sup>11,12</sup>
- » (U//FOUO) **Europe.** As of late April, several European countries had released inmates convicted of misdemeanor offenses or nearing the end of their sentences, according to Western media reporting. While most European authorities are excluding prisoners considered high-risk, France plans to release about 130 prisoners convicted of non-violent, terrorist charges nearing the ends of their prison terms, according to Western media.<sup>13,14,15</sup> Several major attacks in Europe since 2015, including in Paris, Strasbourg, Berlin, and Liege, were conducted by individuals believed to have become radicalized to violence while serving time for misdemeanor crimes, according to Western media and an academic report.<sup>16,17,18,19</sup>

<sup>a</sup> (U) Please see DHS Definitions box at the end of this document.

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- » (U//FOUO) **Asia-Pacific.** Afghanistan, Australia, India, Indonesia, Myanmar, Thailand, and Sri Lanka have released or plan to release thousands of prisoners, most of whom were convicted of minor offenses, according to a body of international press.<sup>20-25</sup> In early April, Afghanistan freed 100 Taliban prisoners to stem the spread of COVID-19 as well as part of the US-Taliban peace deal, according to Western press.<sup>26,27</sup> Indonesia has released 30,000 prisoners who served at least two-thirds of their sentences and were not convicted of terrorism.<sup>28,29</sup> Between 2010 and 2018, at least 18 former Indonesian inmates, most of whom were radicalized to violence in prison, were involved in violent extremist incidents after being released, according to Western press.<sup>30</sup>
- » (U//FOUO) **Middle East.** Roughly half of the countries in the region, where prison radicalization is well- documented, are releasing or have plans to release prisoners, according to Western and regional press as well as academic reports.<sup>31-39</sup> As of mid-April, Iran had temporarily released up to 100,000 mostly non-violent offenders, more than 40 percent of its prisoner population, according to Western press.<sup>40,41</sup> In mid-April, Turkey passed an amnesty bill that will release up to 90,000 non-terrorism-related inmates, of which 45,000 will be permanently freed to ease overcrowding, according to Western and Turkish press.<sup>42-47</sup> Bahrain and Saudi Arabia also have each released hundreds of prisoners held on non-violent offenses, according to Western and regional press.<sup>48,49</sup>
- » (U//FOUO) **Africa.** Several African countries releasing or considering releases are excluding inmates convicted of serious or violent crimes, although radicalization remains an acute challenge in overcrowded and under resourced prisons, according to a body of African press, academic reports, the U.S. Institute of Peace, and the United Nations.<sup>50-61</sup> North African countries have released the most prisoners to date, with Algeria and Morocco releasing over 5,000 inmates each and Sudan over 4,000 prisoners, according to African media reporting.<sup>62,63,64</sup> In Sub-Saharan Africa, Ethiopia, Kenya, and Somalia have released roughly 5,000, 4,000, and a few hundred inmates respectively, according to Western and African press.<sup>65,66</sup>

#### (U) Report Suspicious Activity

**(U) To report suspicious activity, law enforcement, Fire-EMS, private security personnel, and emergency managers should follow established protocols; all other personnel should call 911 or contact local law enforcement.**

Suspicious activity reports (SARs) will be forwarded to the appropriate fusion center and FBI Joint Terrorism Task Force for further action. For more information on the Nationwide SAR Initiative, visit <http://nsi.ncirc.gov/resources.aspx>.

#### (U) DHS Definitions

(U//FOUO) **Radicalization:** the process through which an individual changes from a non-violent belief system to a belief system that includes the willingness to actively advocate, facilitate, or use unlawful violence as a method to effect societal or political change.

(U) Tracked by: HSEC-8

## (U) Source Summary Statement

(U//FOUO) We have **moderate confidence** in our assessment that the release of prisoners probably increases the likelihood of radicalized individuals in some countries being freed with limited or no monitoring. Our confidence level is based on generally reliable Western press, a body of regional media reporting, studies produced by a range of non-profit and academic organizations, the United Nations, and the U.S. Institute of Peace, information gleaned from US federal court documents, and statistics provided by the U.S. Bureau of Prisons. We would have higher confidence in our assessment if we had further insight into the full extent of prison radicalization in many of these countries.

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- 4 (U) [BOP | 3 APR 2020 | 24 APR 2020 | Memo: Increasing Use of Home Confinement at Institutions Most Affected by COVID-19 | [https://www.bop.gov/coronavirus/docs/bop\\_memo\\_home\\_confinement\\_april3.pdf](https://www.bop.gov/coronavirus/docs/bop_memo_home_confinement_april3.pdf) | (U) | (U) | ]
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- 7 (U) [DoJ DOJ | 3 APR 2020 | 24 APR 2020 | United States vs. Taylor Ashley Parker-Dipeppe Appearance Bond Case No: CR20-032 JCC | <https://www.courtlistener.com/recap/gov.uscourts.wawd.284366/gov.uscourts.wawd.284366.43.0.pdf> | (U) | (U) | ]
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- 9 (U) [CBC | 9 APR 2020 | 19 APR 2020 | "More than 2,000 inmates released, 6 COVID-19 cases confirmed inside Ontario jails" | <https://www.cbc.ca/news/canada/toronto/ontario-jails-coronavirus-1.5527677> | (U) | (U) | ]
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- 11 (U) [BBC | 27 APR 2020 | 29 APR 2020 | "El Salvador's jails: Where social distancing is impossible" | <https://www.bbc.com/news/world-latin-america-52386404> | (U) | (U) | ]
- 12 (U) [New York Times | 20 APR 2020 | 27 APR 2020 | "Mexico's Senate Approves Amnesty Law for 1st Time Offenders" | <https://www.nytimes.com/aponline/2020/04/20/world/americas/ap-lt-virus-outbreak-mexico-amnesty.html> | (U) | (U) | ]
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- 16 (U) [The Guardian | 12 JAN 2015 | 18 APR 2020 | "Charlie Hebdo attackers: born, raised and radicalised in Paris" | <https://www.theguardian.com/world/2015/jan/12-sp-charlie-hebdo-attackers-kids-france-radicalised-paris> | (U) | (U) | ]
- 17 (U) [European Eye on Radicalization | 3 JAN 2019 | 20 APR 2020 | "Radicalization in Prison: Old Trends, New Threats" | <https://europeaneyeonradicalization.com/radicalization-in-prison-old-trends-new-threats/> | (U) | (U) | ]
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- 21 (U) [Agence France-Presse | 9 APR 2020 | 19 APR 2020 | "Afghanistan Frees 100 Taliban Prisoners As Part Of COVID-19 Containment" | <https://www.ndtv.com/world-news/coronavirus-update-afghanistan-frees-100-taliban-prisoners-as-part-of-covid-19-containment-2208521> | (U) | (U) | ]

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- 30 (U) [Associated Press | 9 FEB 2018 | 19 APR 2020 | "Study: Extremists still flourishing in Indonesia's prisons" | <https://apnews.com/b1d8e7bf7c9f49448410f6ac0b7919ee/Study-Extremists-still-flourishing-in-Indonesia-s-prisons> | (U) | (U) | ]
- 31 (U) [Jerusalem Post | 29 MAR 2020 | 19 APR 2020 | "Israel Releases 230 Prisoners Early to Reduce Crowding Amid COVID-19 Fears" | <https://www.jpost.com/breaking-news/israel-releases-230-prisoners-early-to-reduce-crowding-amid-covid-19-fears-622844> | (U) | (U) | ]
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- 33 (U) [Punch | 5 APR 2020 | 19 APR 2020 | "COVID-19: US, Nigeria, Iran, others release detainees, prisoners" | <https://punchng.com/covid-19-us-nigeria-iran-others-release-detainees-prisoners/> | (U) | (U) | ]
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## Customer Feedback Form

Product Title:

All survey responses are completely anonymous. No personally identifiable information is captured unless you voluntarily offer personal or contact information in any of the comment fields. Additionally, your responses are combined with those of many others and summarized in a report to further protect your anonymity.

1. Please select partner type:  and function:

2. What is the highest level of intelligence information that you receive?

3. Please complete the following sentence: "I focus most of my time on:"

4. Please rate your satisfaction with each of the following:

	Very Satisfied	Somewhat Satisfied	Neither Satisfied nor Dissatisfied	Somewhat Dissatisfied	Very Dissatisfied	N/A
Product's overall usefulness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Product's relevance to your mission	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Product's timeliness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Product's responsiveness to your intelligence needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. How do you plan to use this product in support of your mission? (Check all that apply.)

- |  |   |
|--|---|
| <input type="checkbox"/> Drive planning and preparedness efforts, training, and/or emergency response operations | <input type="checkbox"/> Initiate a law enforcement investigation       |
| <input type="checkbox"/> Observe, identify, and/or disrupt threats   | <input type="checkbox"/> Initiate your own regional-specific analysis   |
| <input type="checkbox"/> Share with partners   | <input type="checkbox"/> Initiate your own topic-specific analysis      |
| <input type="checkbox"/> Allocate resources (e.g. equipment and personnel)                                       | <input type="checkbox"/> Develop long-term homeland security strategies |
| <input type="checkbox"/> Reprioritize organizational focus   | <input type="checkbox"/> Do not plan to use                             |
| <input type="checkbox"/> Author or adjust policies and guidelines  | <input type="checkbox"/> Other: <input type="text"/>                    |

6. To further understand your response to question #5, please provide specific details about situations in which you might use this product.

7. What did this product not address that you anticipated it would?

8. To what extent do you agree with the following two statements?

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A
This product will enable me to make better decisions regarding this topic.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This product provided me with intelligence information I did not find elsewhere.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. How did you obtain this product?

10. Would you be willing to participate in a follow-up conversation about your feedback?

To help us understand more about your organization so we can better tailor future products, please provide:

Name:   
Organization:   
Contact Number:

Position:   
State:   
Email:

Submit  
Feedback

[Privacy Act Statement](#)

CLASSIFICATION:

Product Serial Number:

REV: 01 August 2017



## **PUBLIC HEALTH BRANCH BRIEFING COVID-19 PANDEMIC RESPONSE**

**May 2, 2020**

### **GENERAL REPORTING INFORMATION**

#### **INFECTIOUS DISEASE**

##### **CASE COUNT—CHARLES COUNTY**

**As of 5/2/2020, 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: 24,473 (97,511 negative)
- 2) **New cases:** 1,156
  - 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 -11 new; total 4,910
  - e) Deaths -- Total 1,156 (58) in Last 24hrs)
  - f) Release from isolation – 1,590

**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.

## **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 5/2 at 1000 am, total case count for Charles County was 622 cases.

There have been 45 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: 622 cases on 5/2 at 1000 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.

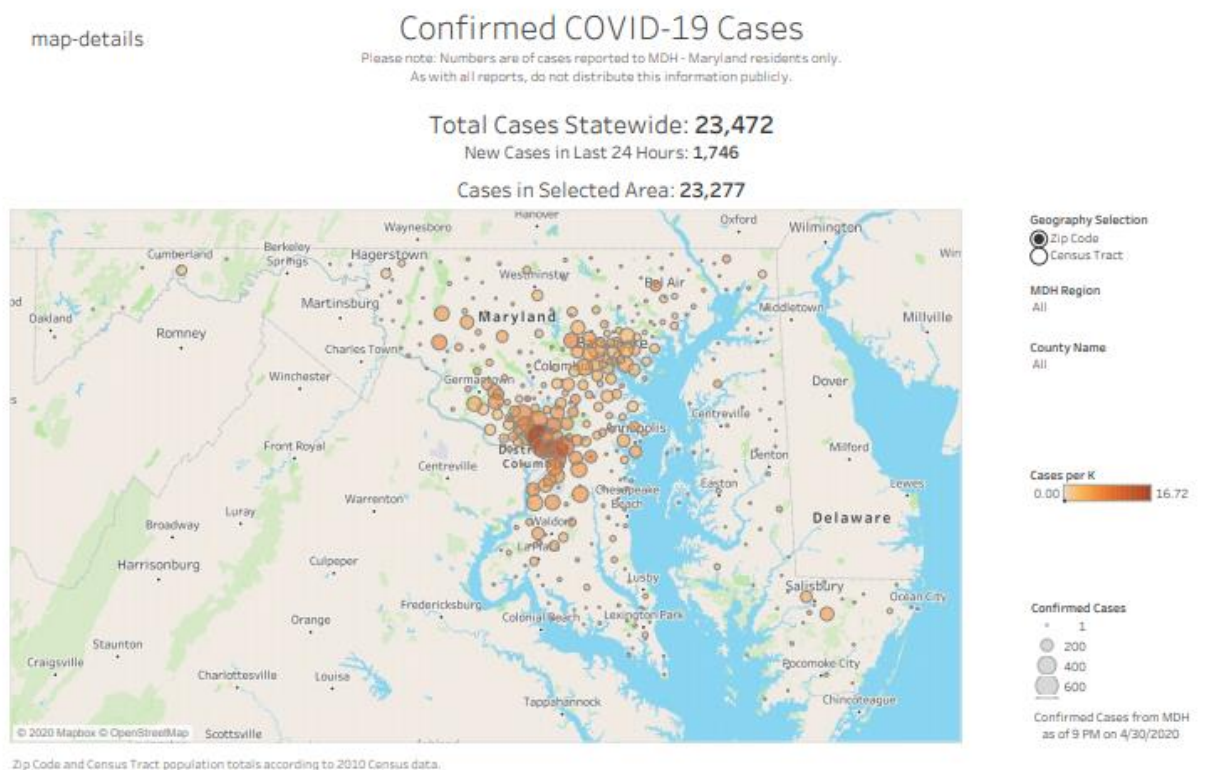
*(Zip code level data with counts less than 7 cases cannot be shared publicly and must remain confidential.)*

**Confirmed cases by zip code:**

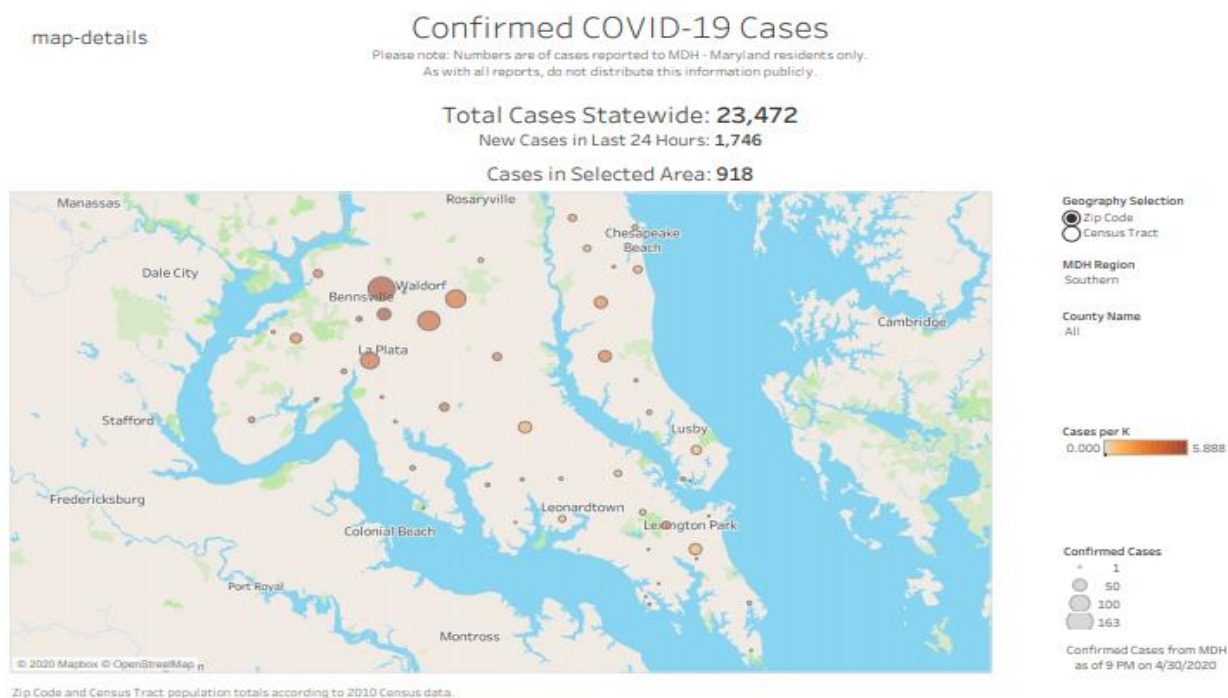
Zip code:	4/30	5/1	Change from 4/30 to 5/1
20601	80	93	+13
20602	98	108	+10
20603	151	161	+10
20604	2	2	0
20611	3	3	0
20613	20	20	0
20616	16	18	+2
20622	3	3	0
20632	2	2	0
20637	15	17	+2
20640	21	26	+5
20645	1	1	0
20646	70	79	+9
20658	3	3	0
20662	9	9	0
20664	5	6	+1
20675	6	7	+1
20677	5	6	+1
20693	2	3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

**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**



- **Heat Map of Charles County**

map-details

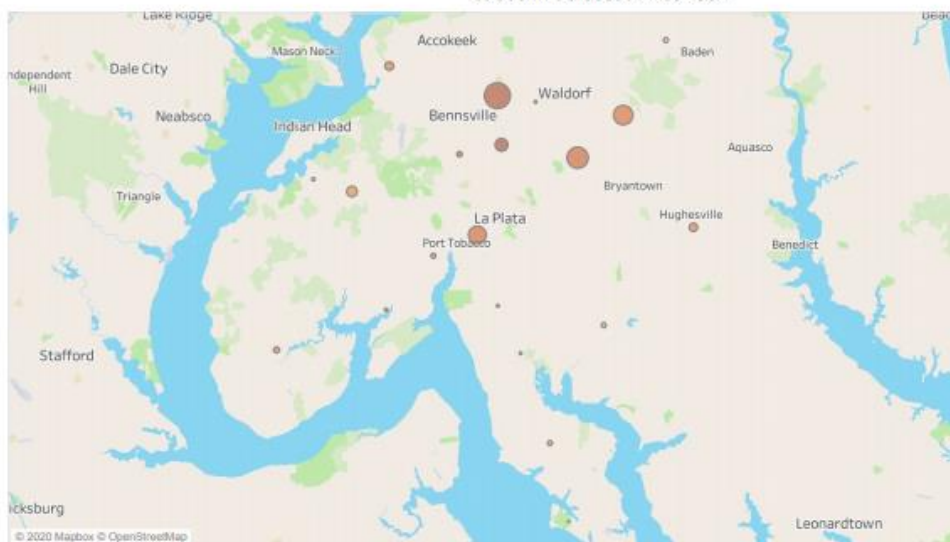
## Confirmed COVID-19 Cases

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: **23,472**

New Cases in Last 24 Hours: **1,746**

Cases in Selected Area: **597**



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

- **Maryland Case Map**

map-details

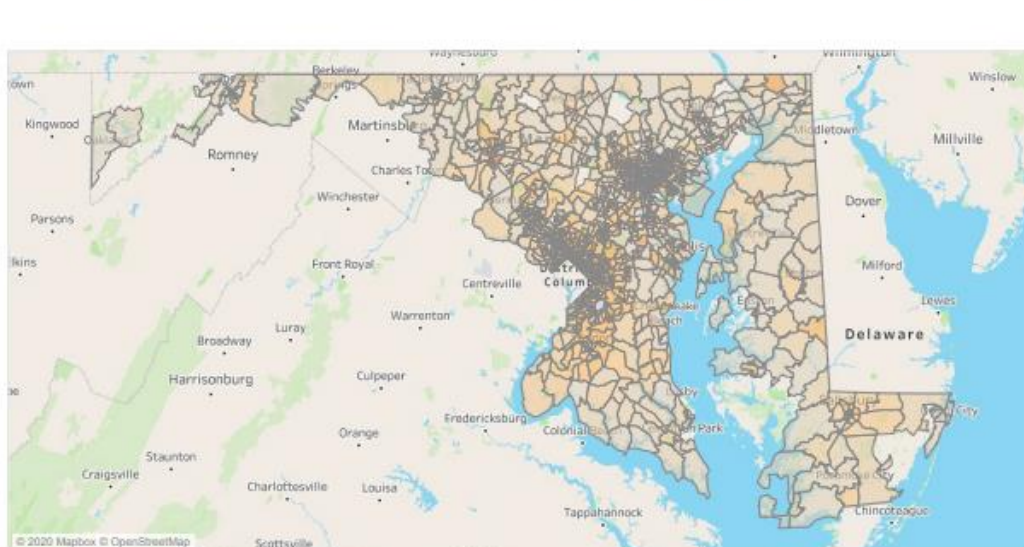
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Total Cases Statewide: **23,472**

New Cases in Last 24 Hours: **1,746**

Cases in Selected Area: **None**



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

- Southern Maryland Case Map**

map-details

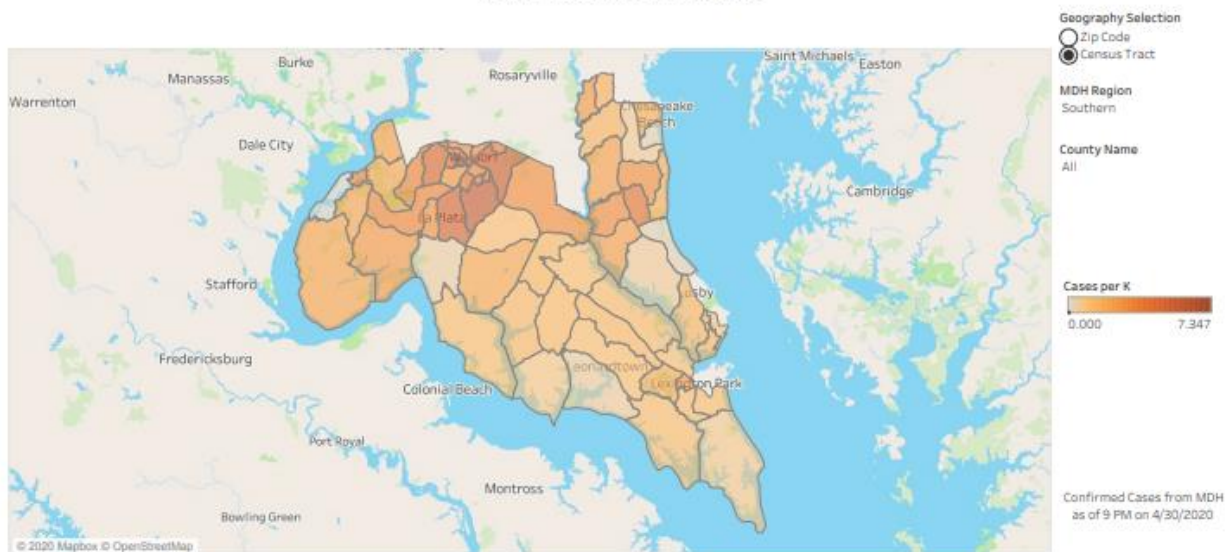
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**Total Cases Statewide: 23,472**

**New Cases in Last 24 Hours: 1,746**

**Cases in Selected Area: None**



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

- Charles County Case Map**

map-details

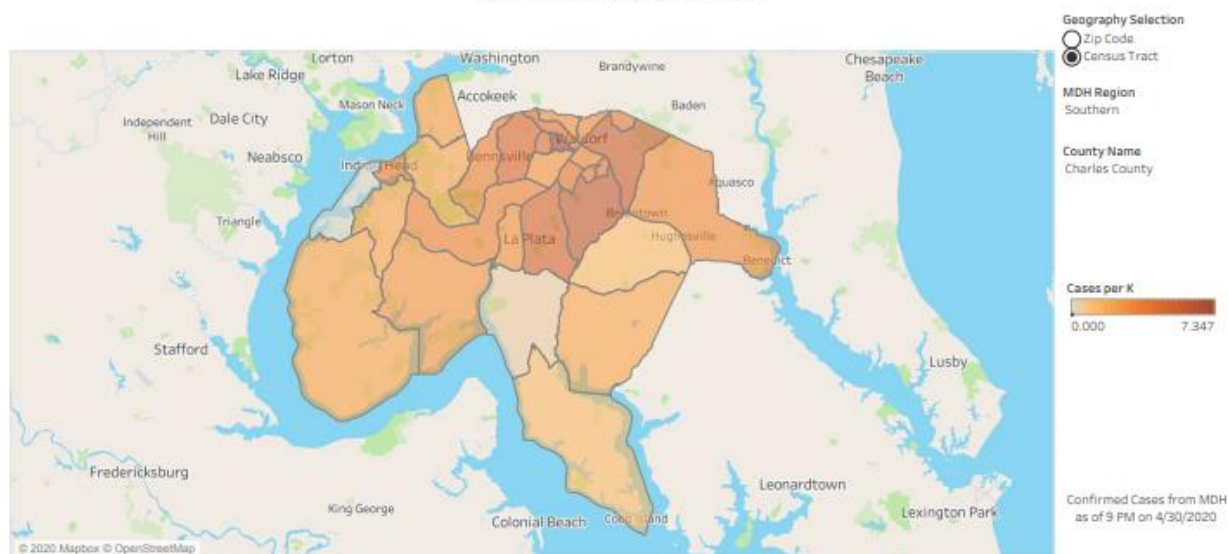
## Confirmed COVID-19 Cases

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**Total Cases Statewide: 23,472**

**New Cases in Last 24 Hours: 1,746**

**Cases in Selected Area: None**



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

- Statewide Cases by Date

## Confirmed COVID-19 Cases

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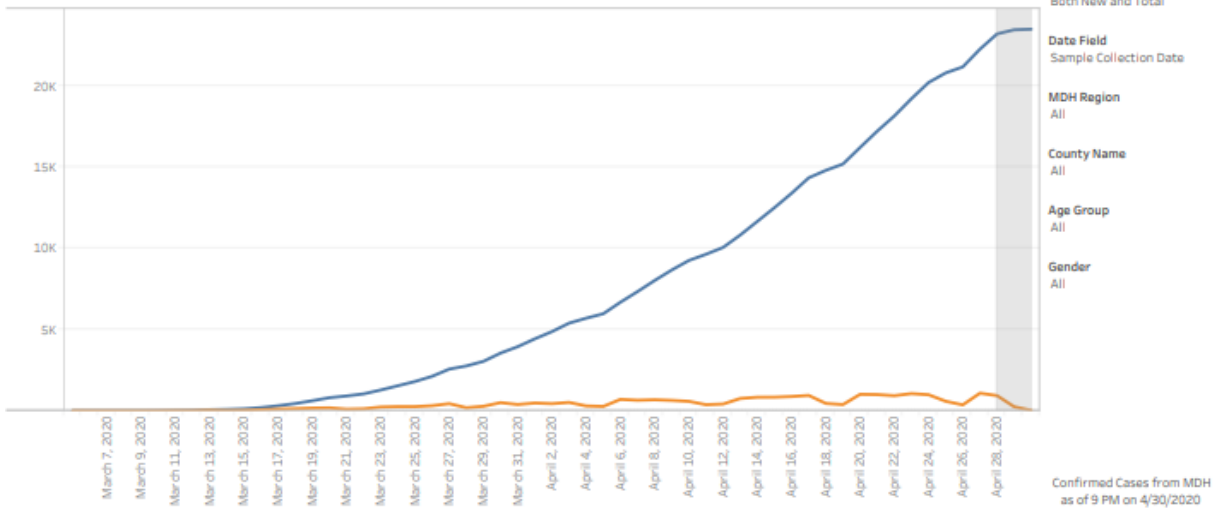
**Total Cases Statewide: 23,472**

**New Cases in Last 24 Hours: 1,746**

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

This graph:

This graph shows confirmed cases and cumulative cases by day of specimen collection. Daily totals will change as test results are released.



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. Gray 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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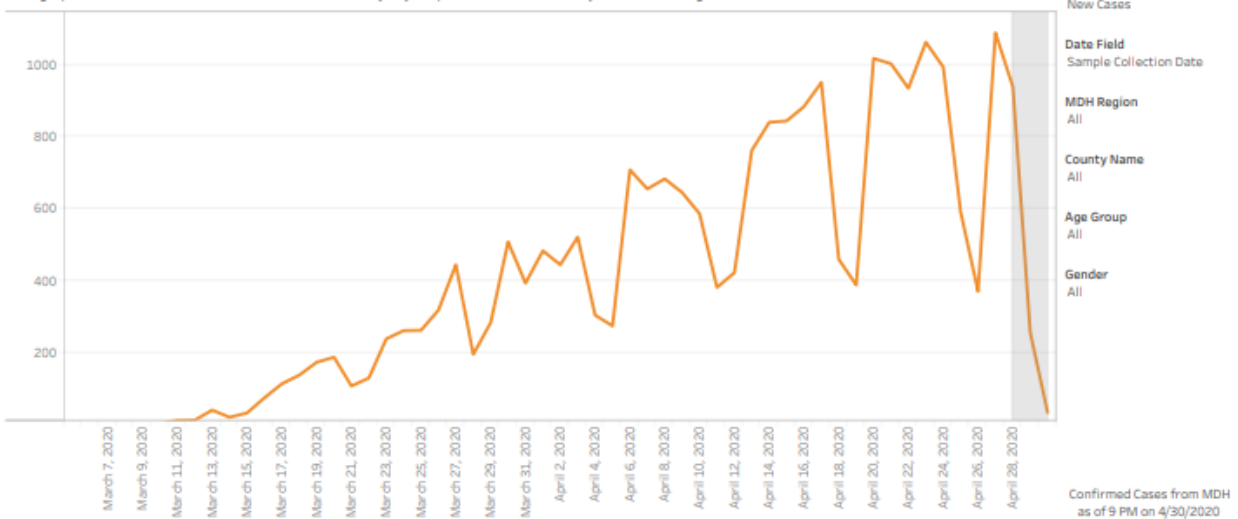
**Total Cases Statewide: 23,472**

**New Cases in Last 24 Hours: 1,746**

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

This graph:

This graph shows confirmed cases and cumulative cases by day of specimen collection. Daily totals will change as test results are released.



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. Gray shading indicates days pending additional data.

- **Southern Maryland Cases by Date**

## Confirmed COVID-19 Cases

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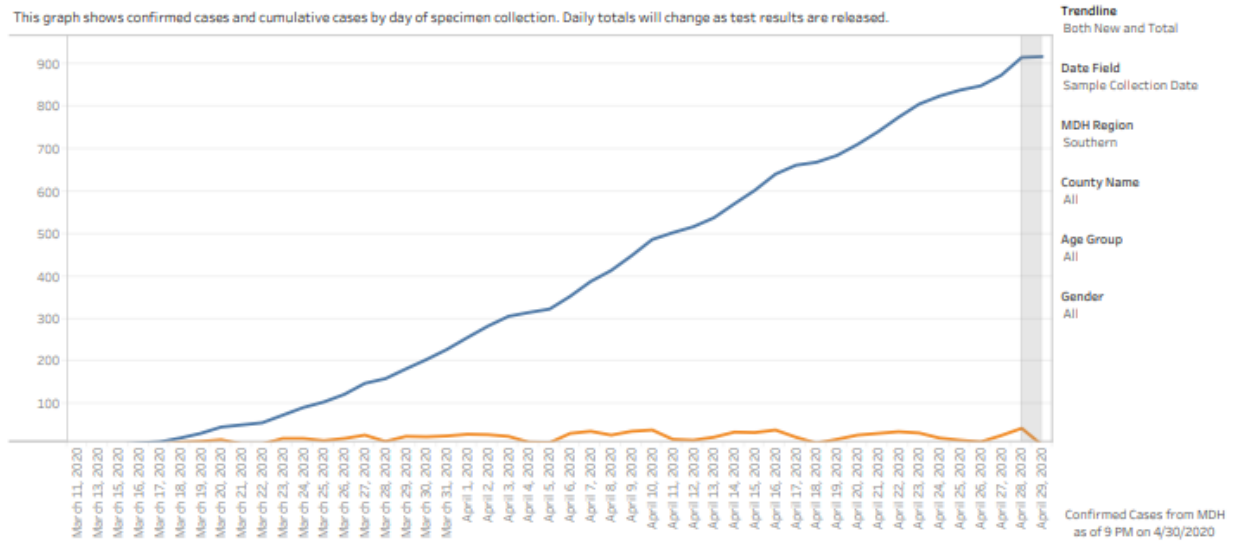
**Total Cases Statewide: 23,472**

**New Cases in Last 24 Hours: 1,746**

**Number of Cases for Selected Area/Demographics: 918**

This graph:

This graph shows confirmed cases and cumulative cases by day of specimen collection. Daily totals will change as test results are released.



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. Gray 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.

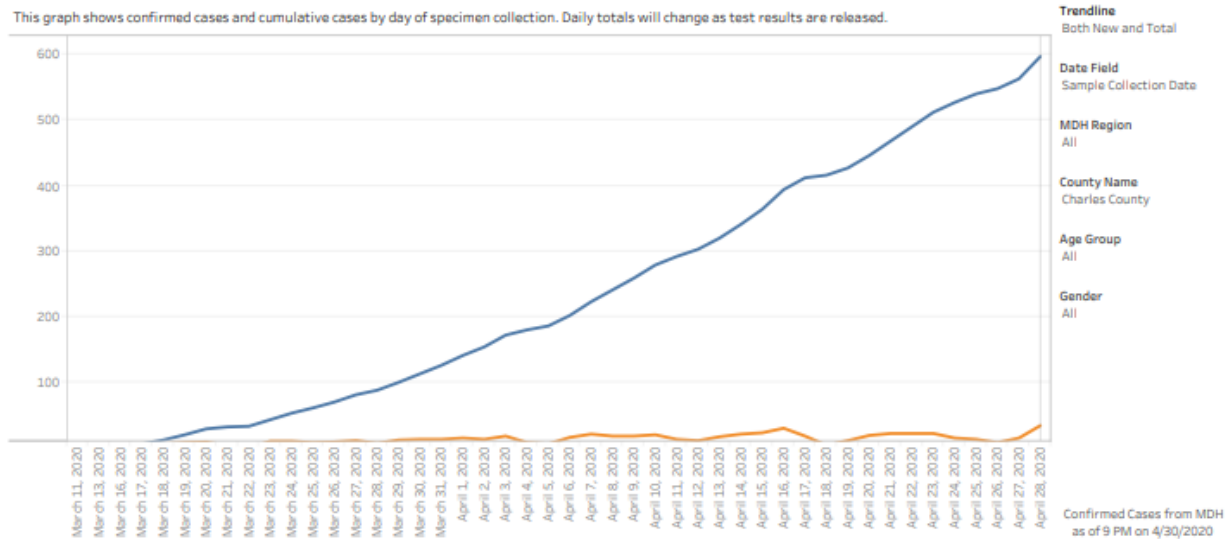
Total Cases Statewide: **23,472**

New Cases in Last 24 Hours: **1,746**

Number of Cases for Selected Area/Demographics: **597**

This graph:

This graph shows confirmed cases and cumulative cases by day of specimen collection. Daily totals will change as test results are released.



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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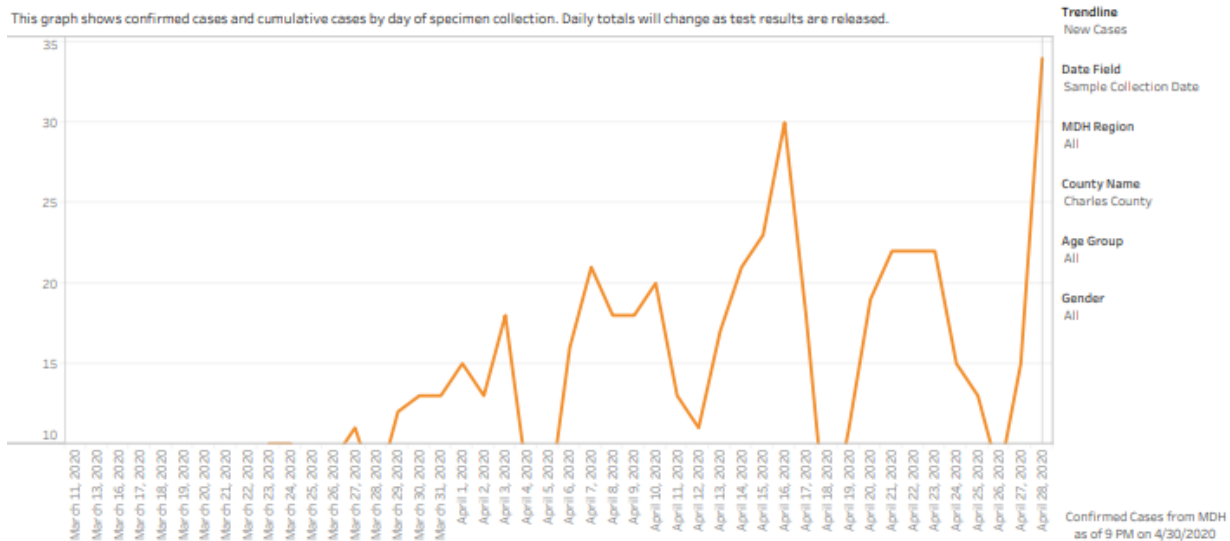
Total Cases Statewide: **23,472**

New Cases in Last 24 Hours: **1,746**

Number of Cases for Selected Area/Demographics: **597**

This graph:

This graph shows confirmed cases and cumulative cases by day of specimen collection. Daily totals will change as test results are released.



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**

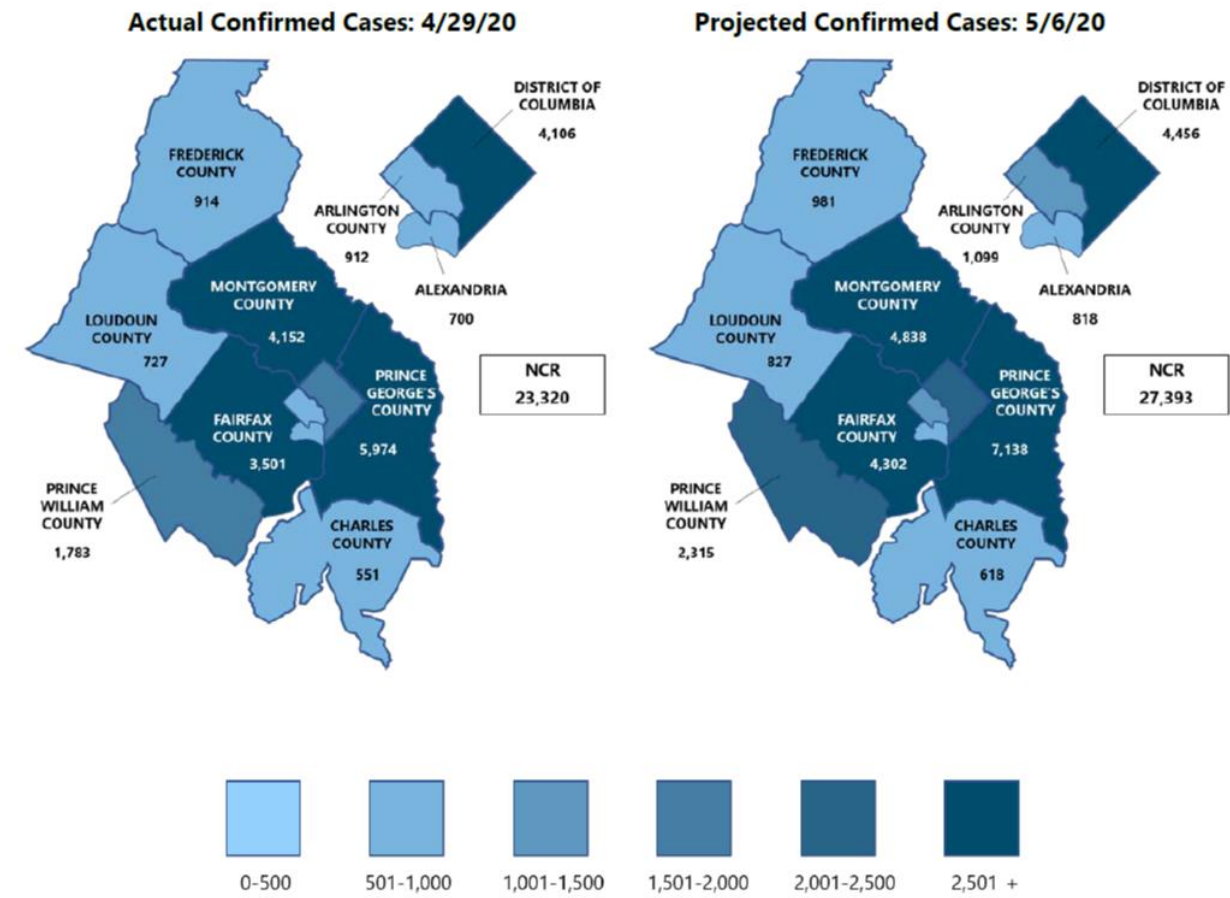
	Actual Confirmed Cases On:			Projected Cases For:									
	4/27	4/28	4/29	4/30	5/1	5/2	5/3	5/4	5/5	5/6	5/13	5/20	
Washington DC	3,892	3,994	4,106	4,192	4,241	4,287	4,332	4,375	4,417	4,456	4,695	4,876	
Charles Co., MD	529	539	551	564	576	586	596	604	612	618	647	657	
Frederick Co., MD	865	893	914	925	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*

Intelligence Briefing 5-2-2020  
COVID Charles County  
Week 7

**Updated Infection Numbers:** As of 0832 hrs.

Total worldwide: 3,364,535 **+88,162 since the 5-1-20 brief.**

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

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	5-1/2
54,956	87,299	91,793	88,301	164,198	67,182	79,263	82,692	54,266	88,162

Total fatalities worldwide: 239,236 **+5,238 since the 5-1-20 brief**

Total confirmed cases in the US: 1,104,345 **+34,313 since the 5-1-20 brief**

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

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	5-1/2
16,376	27,844	34,896	33,885	28,336	20,884	24,699	29,706	27,158	34,313

Analysis note: As testing increases the total number of US cases will likely spike. This should not be viewed as an increase in the scope of the situation. It is logical to believe that the number of positive cases will climb as testing availability has increased.

Total fatalities in US: 65,069 **+3,946 since 5-1-2020**

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

Total confirmed cases in State in of MD: 24,473 **+1,001 since the 5-1-20 brief**

Total tested in the State of MD: 101,049 **+4,894 over 5-1-20**

Percent of those test that test positive: **24.2%**

Total Fatalities in State of MD: 1,156 **+58 change since the 5-1-20 brief**

Number of probable deaths: 95

Total Ever Hospitalized: 4,910

Persons currently hospitalized: **1,657 -9 since 5-1-2020**

4-27/28	4-28/29	4-29/30	4-30/5-1	5-1/2
+15	+117	+66	-43	-9

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

**No cumulative report today. See individual reports.**

~~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:**

Sunday 78-55 storms possible, Monday 73-48 sun

### **Local:**

No stores were visited this am.

### **Maryland Update:**

FBI warns of increased threat to law enforcement in MD and DE from Anti-Government extremists (see attached)

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

### **Region:**

Over 26,647 cases in the NCR as of 0500 5-2-2020,  
47,001 cases in Maryland, DC, and Virginia as of 1100 on 5-2-2020.

VA eases restrictions on elective surgery, and vet care.

### **National:**

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

DHS warns of radicalized prisoners being released worldwide due to COVID 19 (see attached)

At least 35 states begin easing some restrictions

### **Local critical infrastructure:**

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

### **Predications/ 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 8<sup>th</sup> weeks of this crisis, 6<sup>th</sup> 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 2<sup>nd</sup> 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



# **Charles County Volunteer Firemen's Association, Inc.**

Post Office Box #21, La Plata, Maryland 20646

May 2<sup>nd</sup>, 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
- 50 Ems Related Incidents ----- 12 Fire Related Incidents

**Other Information:**

- Continue to push out information about Social Distancing in the Stations.
- Continue to push out Peer Support Information.
- Fire/EMS Units participating in Funeral Procession for EMT Marcus Paxton

Respectfully Submitted,

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