

Charles County COVID-19

Incident Action Plan



Operational Period

From	To
5/7/20	5/9/20
8:00	8:00



INCIDENT OBJECTIVES (ICS 202)

1. Incident Name Charles County COVID-19	2. Operational Period	Date From: 5/7/20 Time From: 8:00	Date To: 5/9/20 Time To: 8:00
3. Objectives			
A. Maximize the safety and overall health and well-being, including mental health of the residents, county employees, and responders, throughout this incident. Minimize the effects resulting from this incident on all personnel.			
B. Conduct surveillance of COVID-19 cases in collaboration with the health department, hospital, physicians, and other health care providers.			
C. Maintain timely, accurate and uniform communications with residents, employees and first responders as well as partners in the tri-County and National Capital Region and the state of Maryland.			
D. Prepare for and handle the human reaction crisis contingencies in long terms.			
E. Prepare for long term order maintenance.			
F. Prepare for and sustain our communities' hierarchy of needs throughout this incident.			
G. Ensure all practical steps to "Slow the Spread" of transmission of COVID-19.			
H. Determine trigger points for Continuity of Operations for all agencies, including government, public safety, schools, hospital, and other critical infrastructure systems.			
I. Prepare for the New Normal.			
4. Operational Period Command Emphasis <div style="height: 40px;"></div>			
General Situational Awareness <div style="background-color: yellow; padding: 10px; border: 1px solid black;"> <p>"Your ATM and Credit Cards Get Around...viruses and bacteria travel with them. Wipe it after you swipe it."</p> </div>			
5. Site Safety Plan Required? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Approved Site Safety Plan(s) Located at:			
6. Attachments (check if attached)			
<input checked="" type="checkbox"/> ICS 203 <input type="checkbox"/> ICS 207 <input type="checkbox"/> ICS 204 <input checked="" type="checkbox"/> ICS 208 <input type="checkbox"/> ICS 205 <input type="checkbox"/> Map/Chart <input checked="" type="checkbox"/> ICS 205A <input type="checkbox"/> Weather <input type="checkbox"/> ICS 206 <input type="checkbox"/> Forecast/Tides/Currents	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	ICS 214 <hr/> <hr/> <hr/> <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 7, 2020 @15:00</u>	

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name Charles County COVID-19		2. Operational Period <div style="display: flex; justify-content: space-between;"> <div>Date From: 5/7/20 Time From: 8:00</div> <div>Date to: 5/9/20 Time to: 8:00</div> </div>	
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 Donna Fuqua Linda Warner	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	Catarina 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 7, 2020 @ 14:00	

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name		2. Operational Period	
Charles County COVID-19		Date From: 5/7/20 Time From: 8:00	Date to: 5/9/20 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 Officer	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	Darre'll Brown
		Deputy	Marcia Keeth
		Economic Development	Darre'll 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 Gantt
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: Joe Hoffmaster Position/Title: PSC Signature			
ICS 203	IAP Page 4	Date/Time:	May 7, 2020 @ 14:00

COMMUNICATIONS LIST (ICS 205A)

1. Incident Name Charles County COVID-19		2. Operational Period:		Date From: 5/7/20	Date to: 5/9/2020
				Time From: 8:00	Time to: 8:00
3. Basic Local Communications Information:					
Name - Last	Name-First	Representing	Email	Phone	
Adams	Jennifer	DES FSC	AdamsJen@Charlescountymd.gov		
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		
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@chairescountymd.gov		
Smith	Bill	CCVFA/CCAEMS	Smithb@ccvfireems.org		
Spalding	Andrew	Volunteer EMS Chief	chiefems@ccvfireems.org		
6. Prepared by: Name: _____ Joe Hoffmaster _____ Title: _____ PSC _____ Signature _____					
ICS 205A	IAP Page 5	Date/Time: May 7, 2020 @ 14:00			

COMMUNICATIONS LIST (ICS 205A)

1. Incident Name		2. Operational Period:		Date From:	5/7/20	Date to:	5/9/2020
Charles County COVID-19				Time From:	8:00	Time to:	8:00
3. Basic Local Communications Information:							
Name - Last	Name-First	Representing	Email	Phone			
Stoddard	Jason	Intell	jestoddard@ccboe.com				
Ranston	Harvey	CCDOH	Ranston.harvey@maryland.gov				
Laschatt	Lisa	CCDOH	lisa.laschatt@maryland.gov				
Meiser	Michael	CCPS	mlmeiser@ccboe.com				
EOC- CC		CCEOC	DESEOC@charlescountymd.gov				
Cherry	Lori	LOGS- Deputy	CherryL@charlescountymd.gov				
Herbert	Scott	PS LOGS	sherbert@hvfdeems.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				
Teleconfernce #			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@chalrescountymd.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: 5/7/20 Time From: 8:00	Date To: 5/9/20 Time To: 8:00
3. Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan:			
"Your ATM and Credit Cards Get Around...viruses and bacteria travel with them. Wipe it after you swipe it. "			
1. Total identified PUI's transported as of 5/7: 604 Total # of patients testing positive : 109			
2. PPE stockpiles remain stable with an estimated supply range of 10+ days based on current call volumes.			
3. EMSOP Special Order 2020-01 Version 4.1 has been updated to include new travel guidance from MIEMSS as well as out of County decon best practices.			
4. As this is a rapidly changing landscape, leaders should review any changes with their personnel each morning.			
5. Speical 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.			
6. Personnel who report having a fever, sore throat, cough or other respiratory related symptoms should stay at home and self-isolate until they are symptom free for a period of 72 hours.			
7. The County's Peer Support Team has been activated and will make weekly wellness checks with our County's first responders.			
8. Please remember that PPE caches are for EVERYONE. We are all in this TOGETHER so there is NO career and volunteer PPE caches.			
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.			
10. Collection and limited re-use of PPE is starting the week as a Contingency Plan. Procedures are outlined in Special Order 2020-05 V1.1. The primary plan of single use PPE is still in Place.			
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 7, 2020</u> @ <u>14:00</u>	

ACTIVITY LOG (ICS 214)

1. Incident Name Charles County COVID-19		2. Operational Period		Date From	5/7/2020	Date To:	5/9/2020
				Time From:	8:00	Time To:	8:00
3. Name:		4. ICS Position		5. Home Agency (and Unit):			
6. Resources Assigned							
Name		ICS Position		Home Agency (and Unit)			
7. Activity Log							
Date/Time		Notable Activities					
8. Prepared by: Name: _____ Position/Title: _____ Signature: _____							
ICS 214, Page 1		Date/Time: _____					

ACTIVITY LOG (ICS 214)

[illegible]

EOC Operational Period Meeting Schedule

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



Safety Officer's Report Charles County EOC

05-07-20

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

Today's Safety Message: "Your ATM and Credit Cards Get Around...viruses and bacteria travel with them. Wipe it after you swipe it."

Total number of PUI's transported to date: 604

Total number of patients transported by EMS testing + for COVID: 109

Total number of first responders on self-isolation: 0

Total number of first responders on quarantine: 8

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

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

Total number of fire stations sanitized: 6

Daily Estimated PPE Burn Rate: 30 sets/day



10425 Audie Lane
La Plata, MD 20646



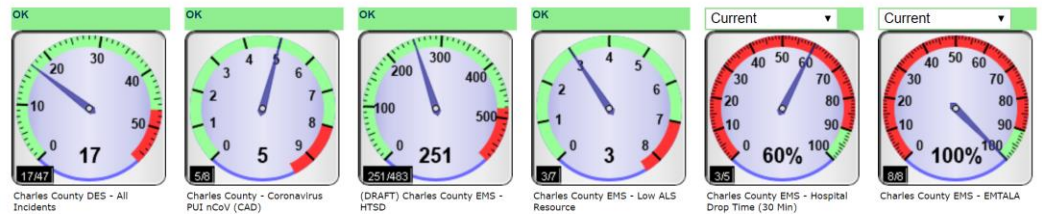
301-399-1143



DESsafety@charlescountymd.gov



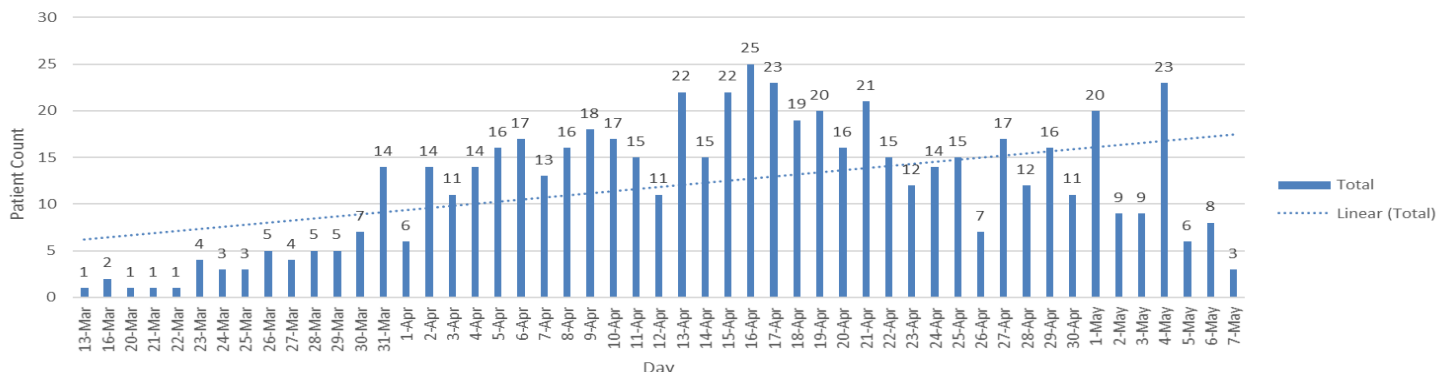
www.charlescountymd.gov



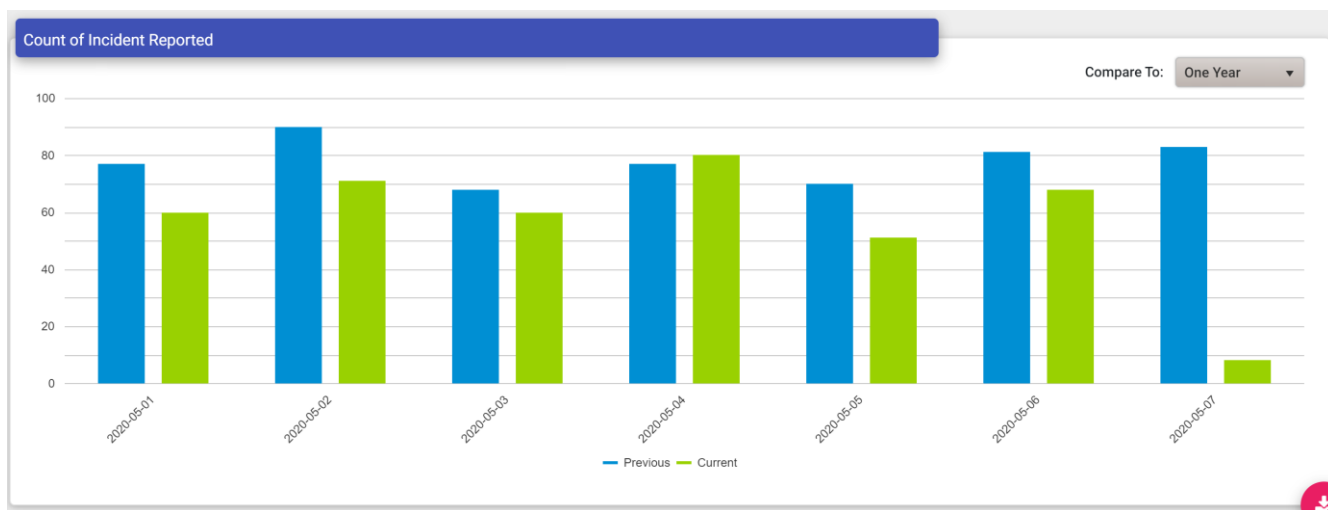
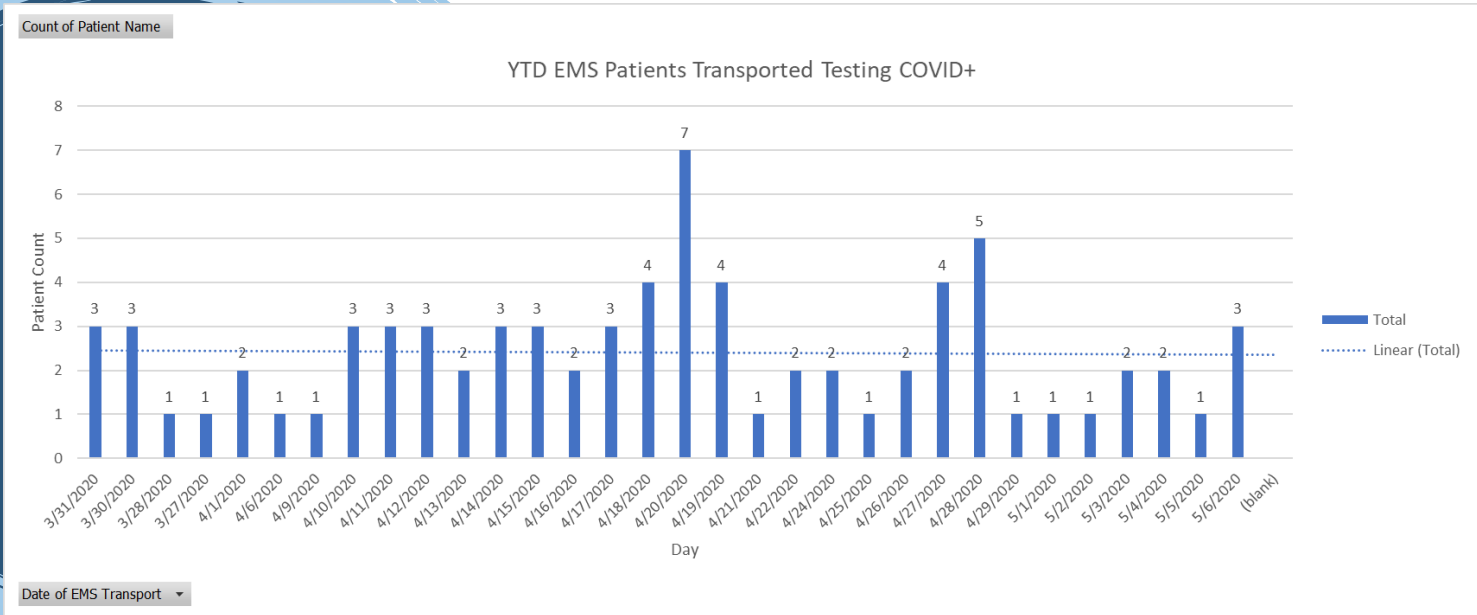
ePCR

Count of Incident Number

PUI Incidents - 03-13-20 thru 05-07-20 @ 1058



Sent to Queue



YOUR ATM & CREDIT CARDS GET AROUND...

Viruses and Bacteria Travel With Them.
Wipe It After You Swipe It!





PUBLIC HEALTH BRANCH BRIEFING COVID-19 PANDEMIC RESPONSE

May 7, 2020

GENERAL REPORTING INFORMATION

INFECTIOUS DISEASE

CASE COUNT—CHARLES COUNTY

As of 5/7/2020, total case count for Charles County is 698.

- *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. (*Approximately 20 calls this past weekend.*)

MEDIA, SOCIAL MEDIA AND WEBSITE

- Complaints via Website are starting to increase concerning mask use.

PARTNER/STAKEHOLDER OUTREACH

LTC/AL

- The Long-Term Care and Assisted Living call was held today at 3 p.m. by CCDOH nurse liaisons.

ALL-PARTNER

- The all-partner call held today 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: 29,374 (119,226 negative)
- 2) **New cases:** 1,211
 - 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 (-24 last 24 hours); total current 1,683; total ever 5,663
 - e) Deaths -- Total 1,401 (63 last 24 hours)
 - f) Release from isolation – 2,029

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

RESOURCE DISTRIBUTION

- Two orders picked up today
- Next PPE shipment will arrive next week
- IR thermometers will be included for distribution from CCDOH per request
- EM will have in its shipment 3 oz. bottles of hand sanitizer to distribute as needed

VOLUNTEERS

MARYLAND MEDICAL RESERVE CORPS

- No new responders accepted into Charles County Unit today

CAREGIVER SERVICE CORPS

- Nothing new to report

TESTING

VEIP TESTING SITE UPDATE

- Tested to Date: 872
- 114/120 appointments slots were tested Thursday, May 7, 2020
- For the seventh operational period, May 12-14 appointment slots will be increased to 135 per test day.

EPIDEMIOLOGY AND SURVEILLANCE

Charles County

As of 5/7 at 9 am, total case count for Charles County was **698** cases.

This number differs from the number released by MDH this morning. The epidemiologist found some discrepancies in the RedCap line list and had to talk to the state about changes. All cases from 20607 were being included as Prince George's County this week. MDH is working to get the Charles County cases from 20607 moved back into the Charles County line list and case count. They have added any new cases from 20607 to the line list, but we are still waiting for the previous 20607 cases to be moved back. After discussions with other local health department epidemiologists in the state, this has happened to several counties that share zip codes. MDH is overburdened at this time, so patience is needed as we sort out these problems.

There have been **49** confirmed deaths associated with COVID-19 (7.3%). Majority of deaths are associated with outbreaks in skilled nursing facilities. There were 3 probable COVID-19 deaths. COVID-19 is listed as the cause of death, but laboratory testing has not yet confirmed.

(Projection infographics are new. Other graphics and county data will be pulled tomorrow morning.)

- Average age of fatalities: 78.4 years
- Gender breakdown among confirmed fatalities: 70.6% Female, 29.4% Male

Racial breakdown among confirmed fatalities:

- 54.9% Non-Hispanic White
- 39.2% Non-Hispanic Black
- 2.0% Non-Hispanic Asian
- 3.9% Hispanic

- Number of negative lab results: 3085
- Positivity Rate: 17.9% (State positivity rate: 19.6%)
- Recovered and released from isolation: 142
- Partially recovered with improved symptoms: 41
- 143 or 21.2% required hospitalization
- Among confirmed cases, 391 (58%) Female; 282 (42%) Male
- 17% Healthcare Workers
- 2% First Responders: EMS, Fire, Law Enforcement
- 32% have underlying health conditions
- Age range of positive COVID-19 cases: 0-100 years

Age Distribution for Charles County cases:

- Under 18 years: 14 (2.1%)
- 18-64 years: 502 (74.6%)
- 65+ years: 157 (23.3%)

ESSENCE data for urgent care utilization at Patient First in Waldorf had a yellow alert for Tuesday, May 5th. The yellow alert is due to 3 “Visit of Interest” tags with the ICD code for “Contact with and exposure to other viral communicable diseases.” All 3 patients presented for a COVID-19 test. Patient volume was 42 patients on 5/5. Total patient volume has remained similar over the last week. All were discharged to home for self-care. 20 patients presented with ILI or at least one COVID-19 like symptoms on 5/5. Diagnoses for ILI patients on Tuesday included bronchitis with or without tracheitis, unspecified myalgia (muscle pain or body aches), other fatigue, acute pharyngitis, unspecified fever, headache, shortness of breath, cough, contact with and exposure to other viral communicable diseases, and encounter for screening for other viral diseases. On 5/5, there 3 “Visit of Interest” CDC Classifier tags. They were due to COVID-19 exposure to a positive case. They completed a total of 10 COVID-19 tests in their drive-up testing site on 5/5.

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 28 on 5/4. This is an increase from the numbers for the past week

- 5/2: 10
- 5/3: 9
- 5/4: 28
- 5/5: 4

Race breakdown: The data is now being captured in the MDH line lists of confirmed cases in REDCap. Data was accessed today at 9 a.m. 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: 673 cases at 9 a.m. today 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.

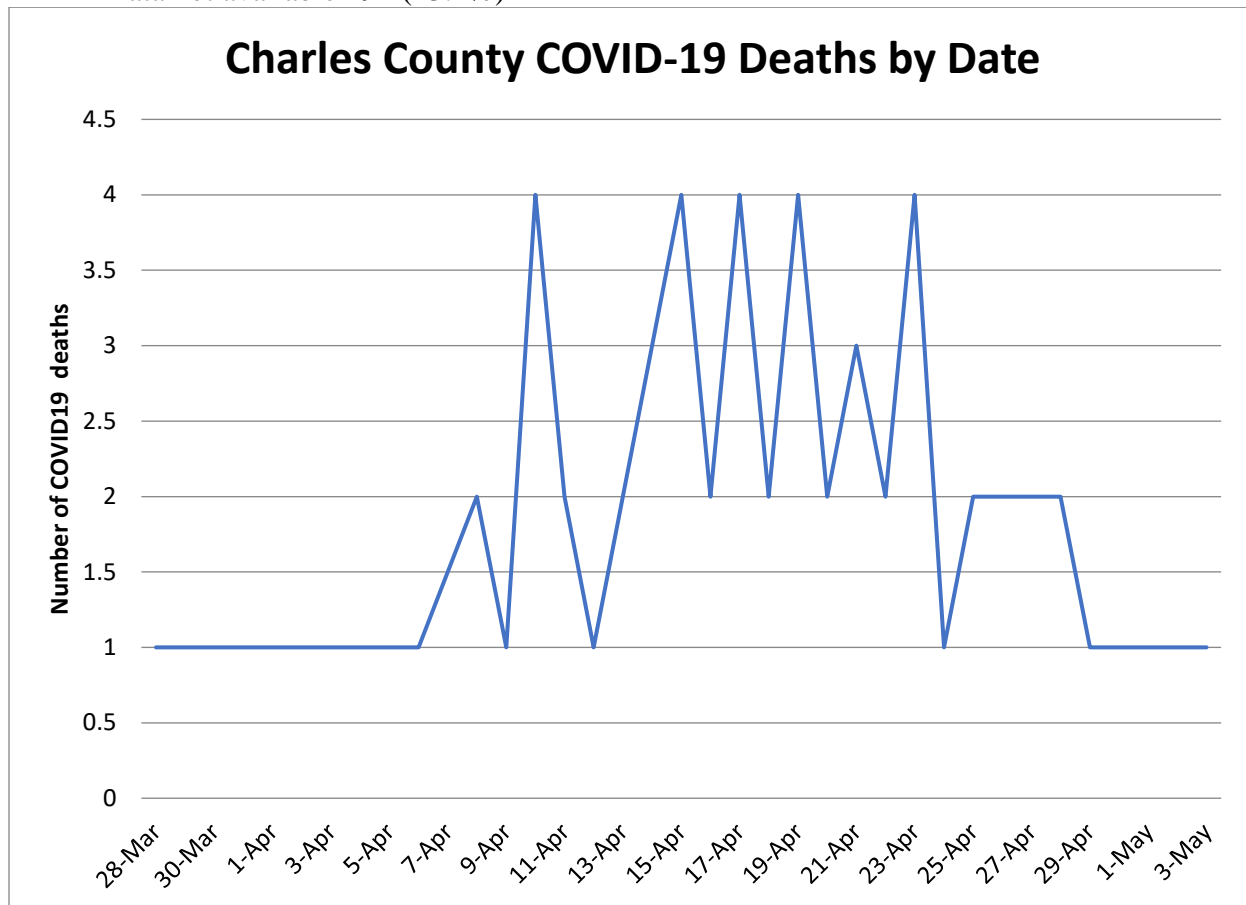
Race Breakdown

- Asian: 14 (2.1%)
- Black/African American: 295 (43.8%)
- White: 185 (27.4%)
- Other or 2+ races: 37 (5.5%)
- Data not available/Declined to Answer: 142 (21.1%)

Ethnicity Breakdown

- Hispanic 11 (1.6%)
- Non-Hispanic 333 (49.5%)

- Declined to answer 37 (5.5%)
- Data not available 292 (43.4%)



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

- Positive resident cases in Skilled Nursing Facilities/Assisted Living Facilities: 139
- Positive staff cases in Skilled Nursing Facilities/Assisted Living Facilities: 53
- Among those 139 resident cases, 106 are in skilled nursing facilities and 33 are in assisted living facilities.
- Current residents or staff who are Persons Under Investigation (PUI) in Skilled Nursing Facilities/Assisted Living Facilities: 2
- Total currently hospitalized: 6
- Deaths: 42

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 and completed resident testing by the close of business on Friday, 5/1. Results are coming in from the state laboratory and from CIAN laboratory. Dr Haft held a call on 5/4 to get an update on

numbers and to answer any questions regarding staff testing and staff needs. There will be a need to quarantine staff that test positive. Each facility has been asked by Dr Haft to provide numbers for staff testing and for potential staff needs. He put that request into the state and Chesapeake on 5/5. We anticipate that staff testing will occur this week and over the weekend.

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 (57%) 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 5/65 at 9:00 am.

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

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 (56%) 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.

Confirmed cases by zip code:

Zip code:	5/6
20601	102
20602	117
20603	173
20604	2
20607	16
20611	4
20613	11
20616	23
20622	3
20632	2
20637	18
20640	28
20645	1
20646	93
20658	3
20662	9
20664	8
20675	7
20677	9
20693	3
20695	44

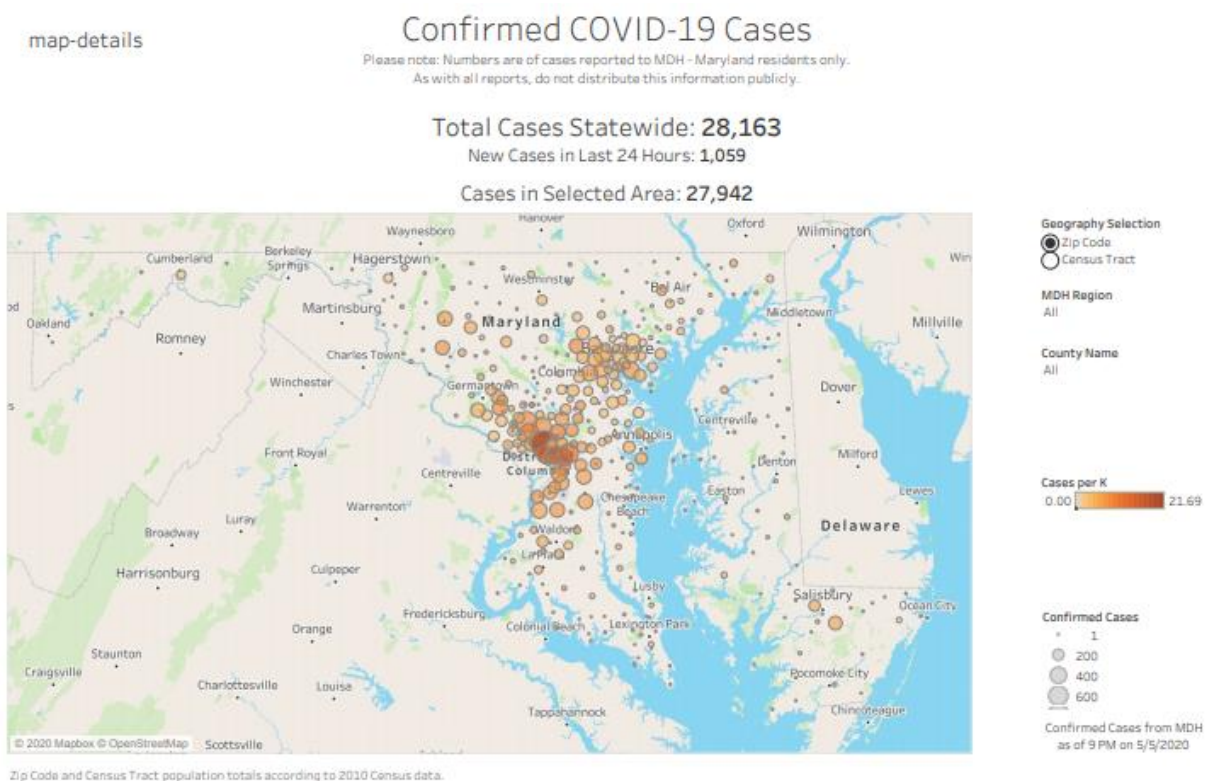
COVID-19 Positive Case rate per 1,000 residents as of May 6, 2020:

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

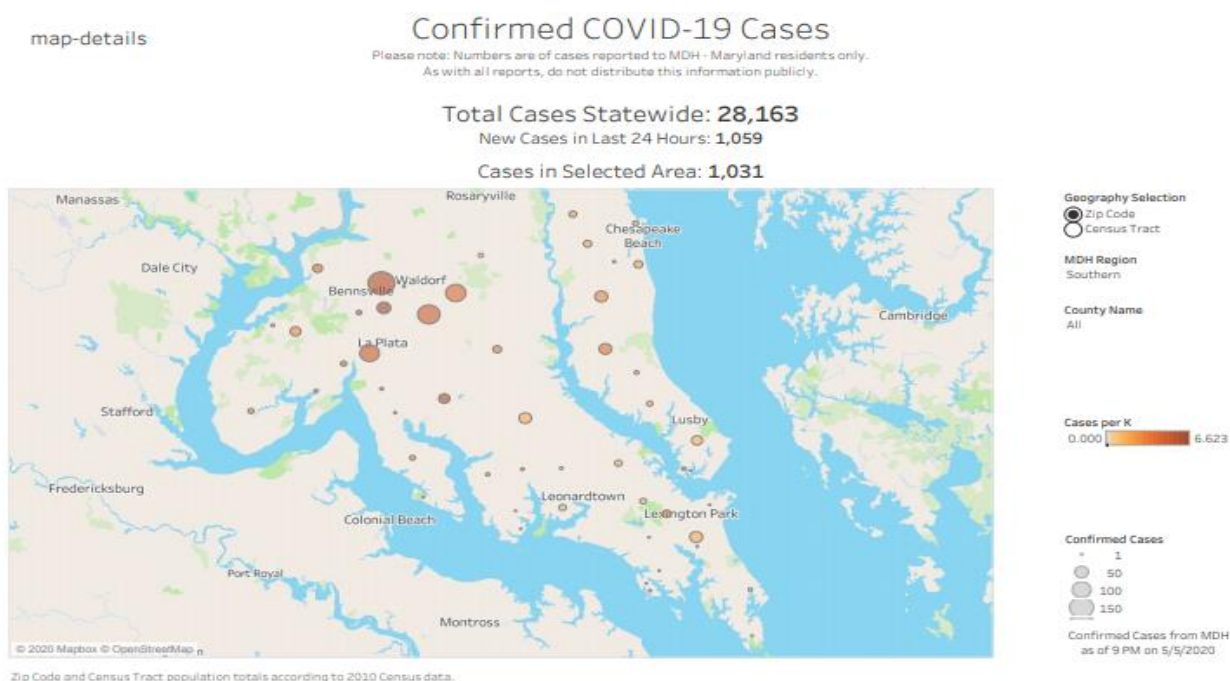
Zip Code of Residence:	COVID-19 positive case rate per 1000 residents: 4/30	COVID-19 positive care rate per 1000 residents: 5/5	COVID-19 positive case rate per 1000 residents: 5/6
20601	3.188	4.057	4.098
20602	3.967	4.688	4.849
20603	5.316	5.834	6.041
20613 (Charles Co residents only from this zip code)	0.506	0.506	0.506
20616	2.732	3.756	3.927
20622	0	1.429	1.429
20637	2.766	3.135	3.319
20640	2.108	2.683	2.778
20646	3.759	4.817	4.923
20662	3.067	3.067	3.067
20664	1.674	2.678	2.678
20675	3.591	4.189	4.189
20677	2.153	3.445	3.876
20695	5.446	6.476	6.623

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



- Maryland Case Map



- **Southern Maryland Case Map**

map-details

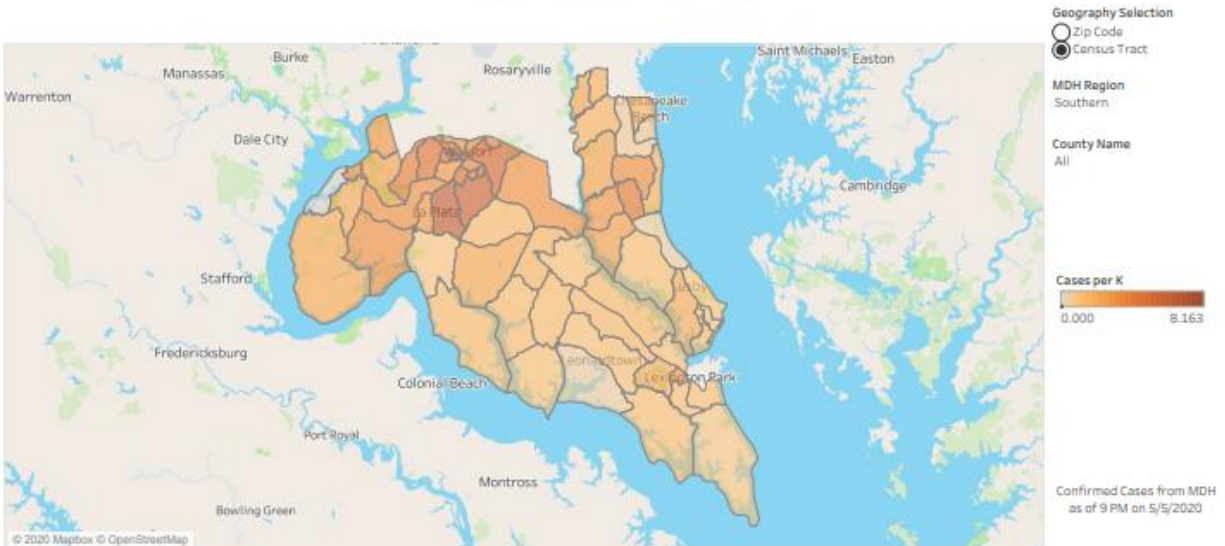
Confirmed COVID-19 Cases

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: 28,163

New Cases in Last 24 Hours: 1,059

Cases in Selected Area: None



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

- **Charles County Case Map**

map-details

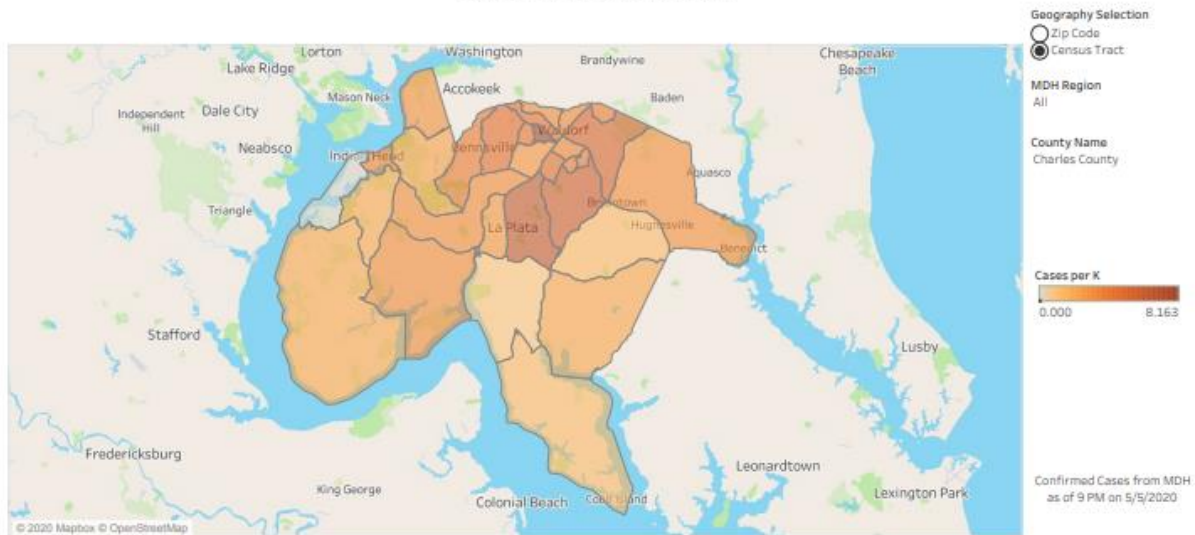
Confirmed COVID-19 Cases

Please note: Numbers are of cases reported to MDH - Maryland residents only.
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Total Cases Statewide: 28,163

New Cases in Last 24 Hours: 1,059

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.
As with all reports, do not distribute this information publicly.

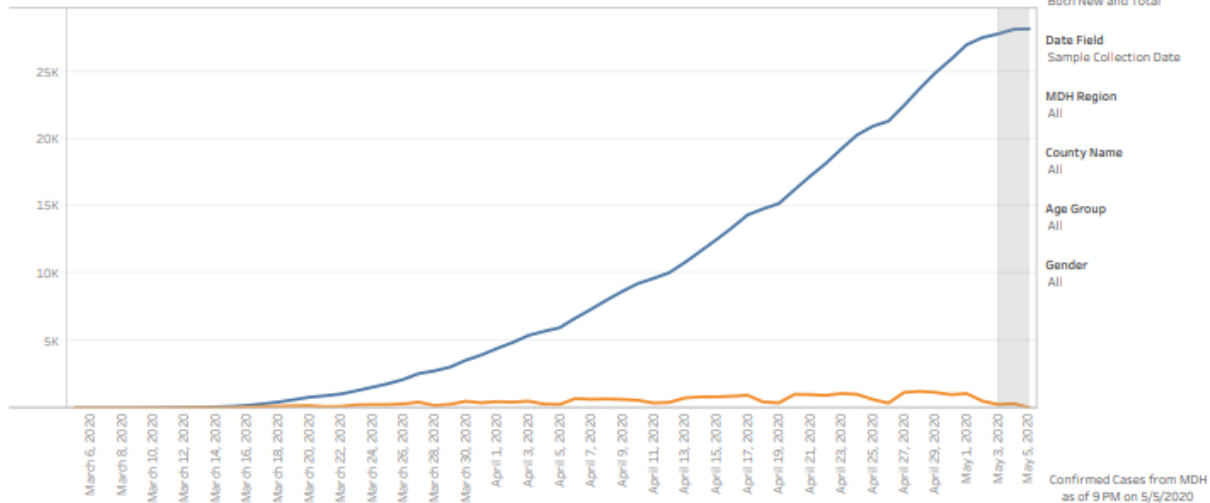
Total Cases Statewide: 28,163

New Cases in Last 24 Hours: 1,059

Number of Cases for Selected Area/Demographics: 28,163

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.
As with all reports, do not distribute this information publicly.

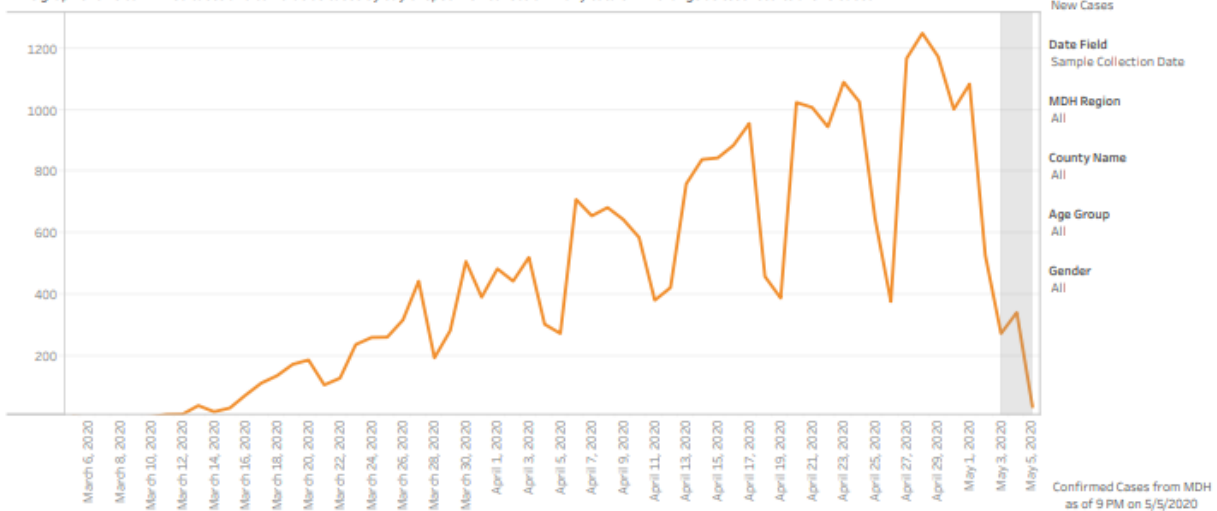
Total Cases Statewide: 28,163

New Cases in Last 24 Hours: 1,059

Number of Cases for Selected Area/Demographics: 28,163

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.

- **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.

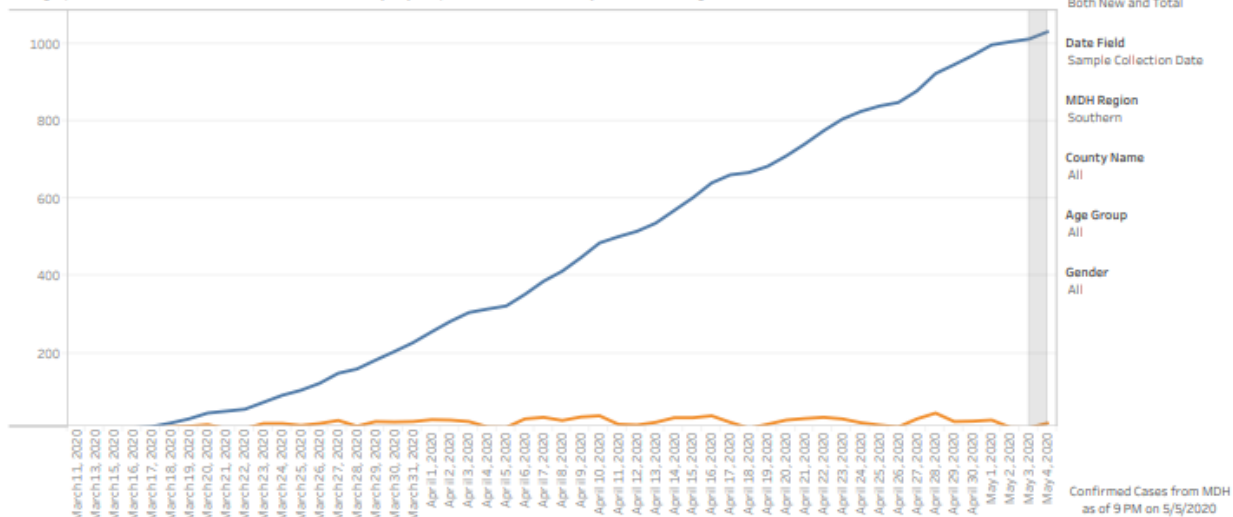
Total Cases Statewide: 28,163

New Cases in Last 24 Hours: 1,059

Number of Cases for Selected Area/Demographics: 1,031

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.
As with all reports, do not distribute this information publicly.

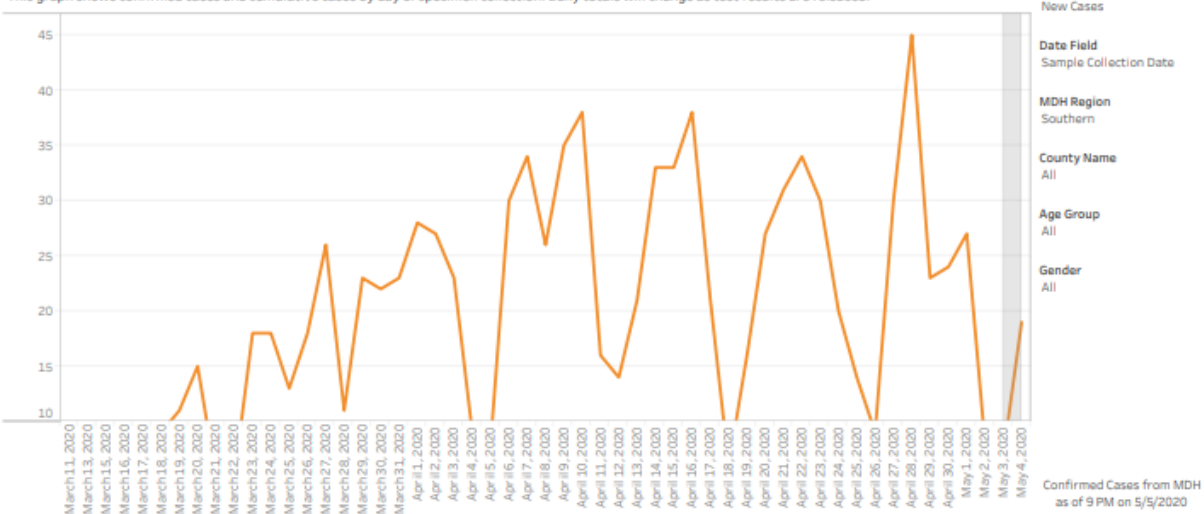
Total Cases Statewide: 28,163

New Cases in Last 24 Hours: 1,059

Number of Cases for Selected Area/Demographics: 1,031

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.

- 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.

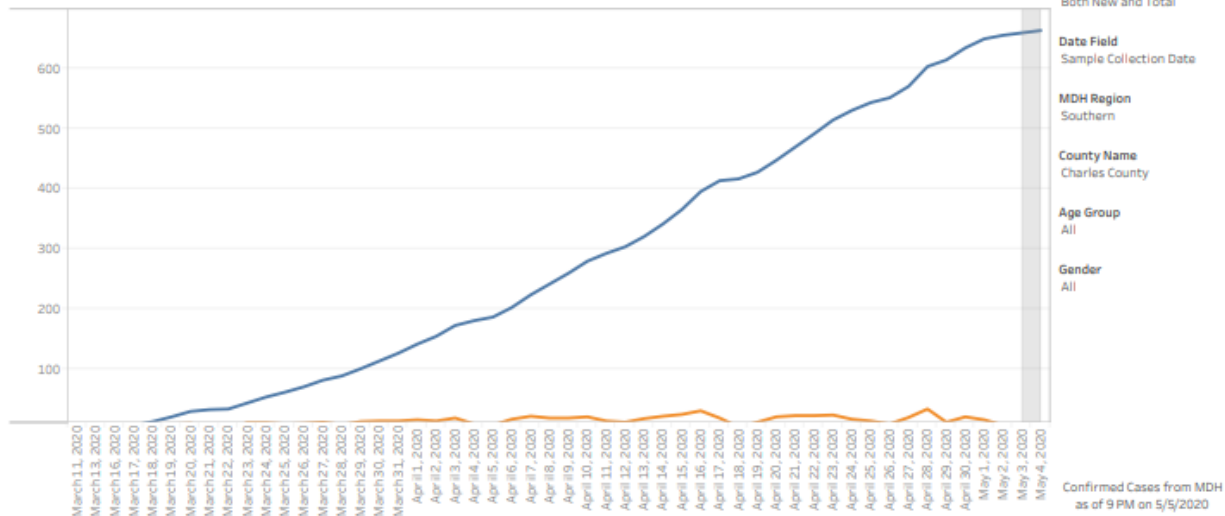
Total Cases Statewide: 28,163

New Cases in Last 24 Hours: 1,059

Number of Cases for Selected Area/Demographics: 663

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.
As with all reports, do not distribute this information publicly.

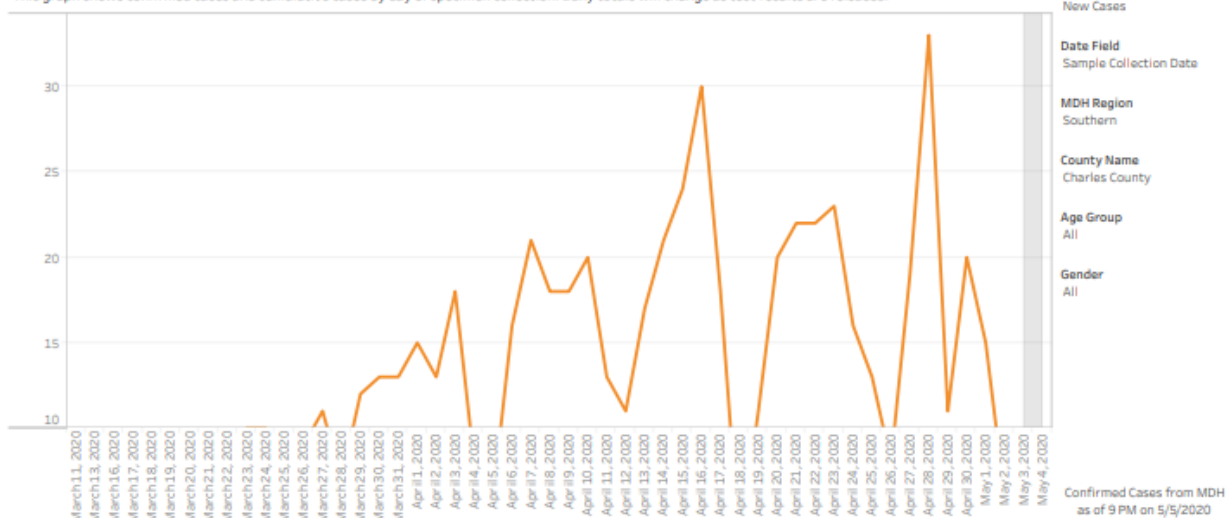
Total Cases Statewide: 28,163

New Cases in Last 24 Hours: 1,059

Number of Cases for Selected Area/Demographics: 663

This graph:

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



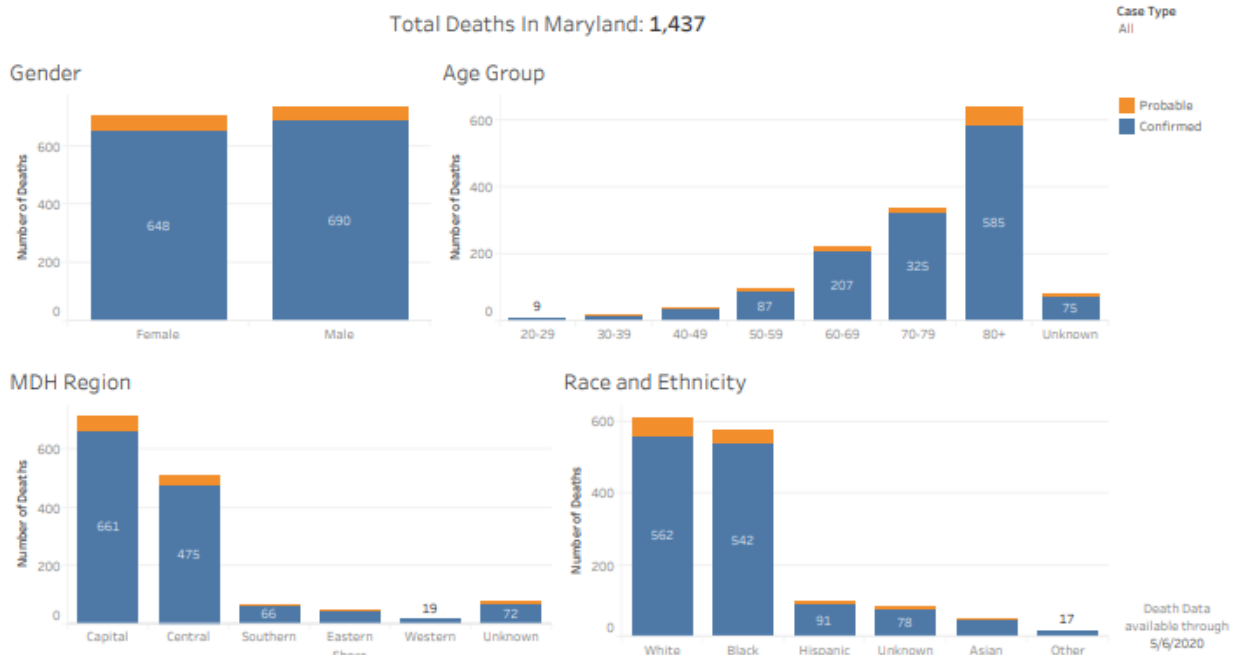
Date shown is the sample collection date, not the date when the test result was confirmed. Daily totals may change as pending tests are reported. Grey shading indicates days pending additional data.

- **Maryland Demographic Fatalities**

COVID-19 Fatalities

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

Total Deaths In Maryland: 1,437



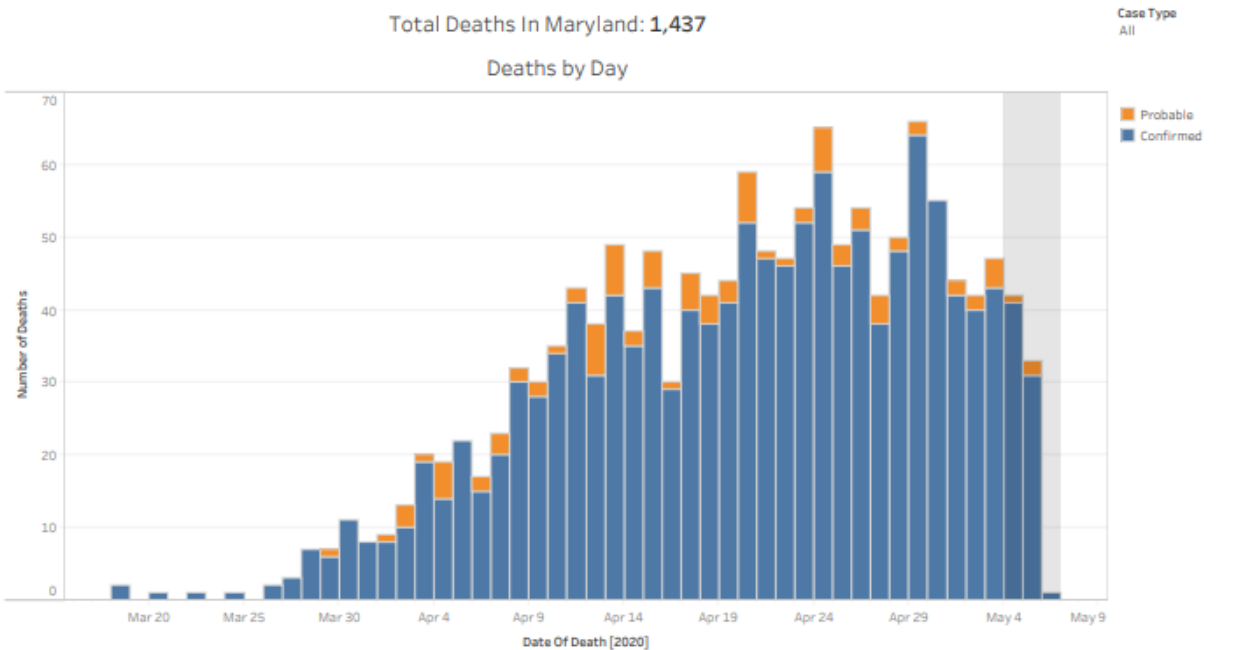
Confirmed death: Laboratory-confirmed positive COVID-19 test result

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

COVID-19 Fatalities

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

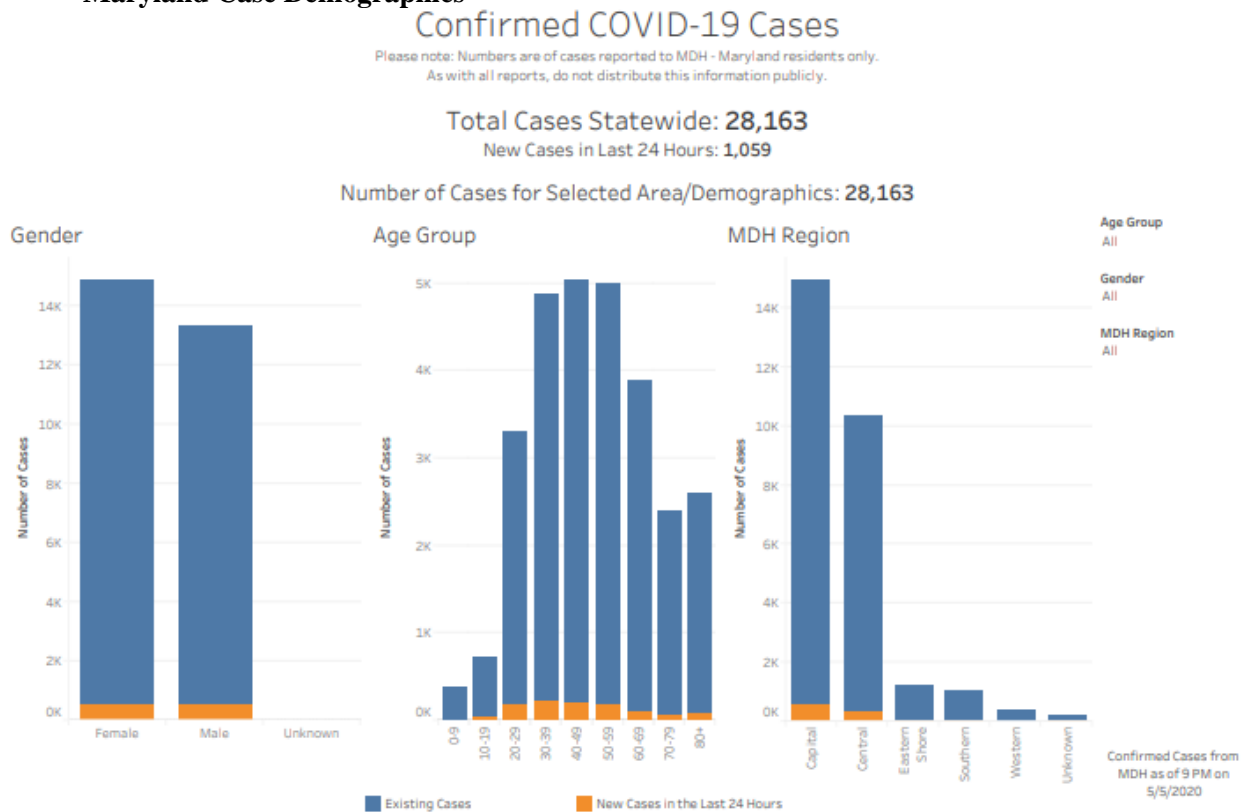
Total Deaths In Maryland: 1,437



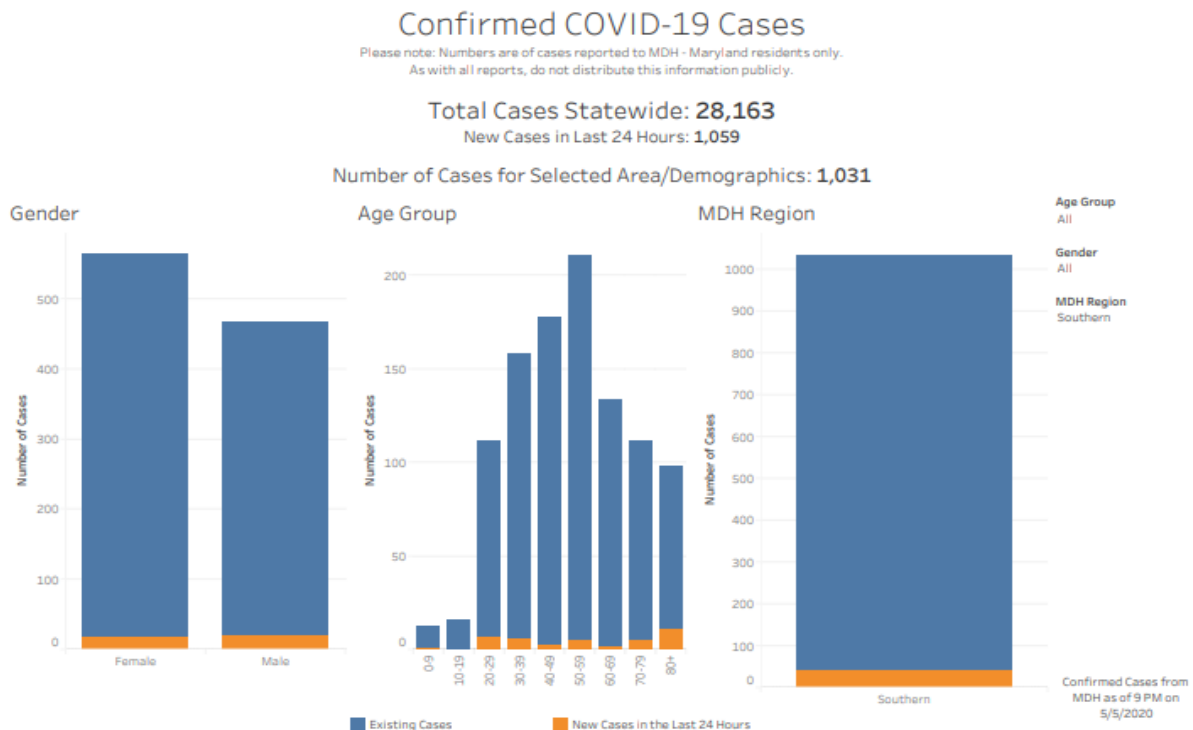
Confirmed death: Laboratory-confirmed positive COVID-19 test result

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

- Maryland Case Demographics**



- Southern Maryland Case Demographics**

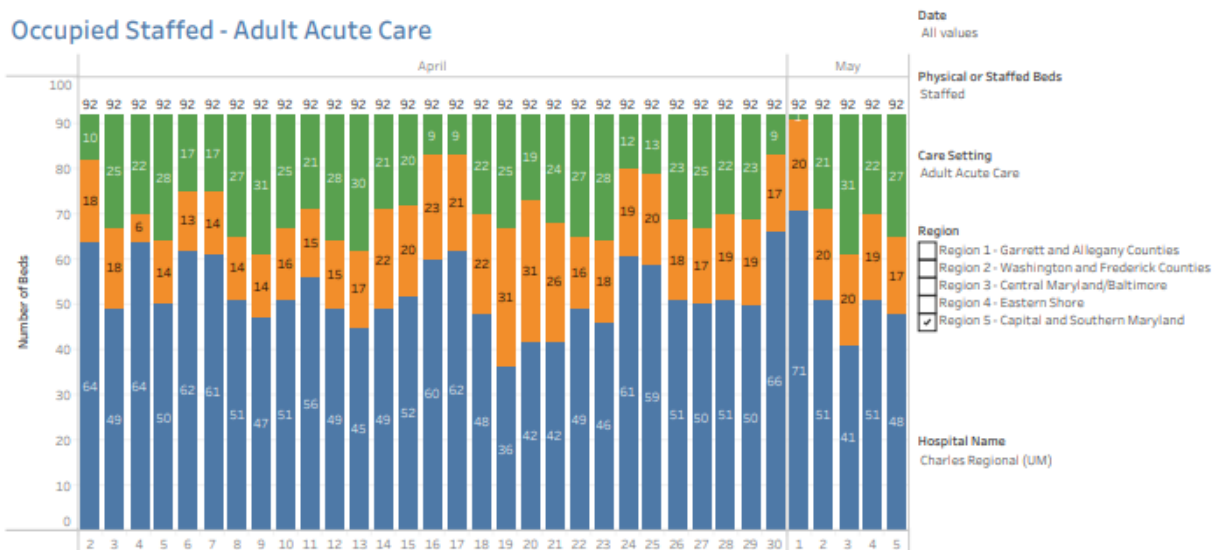
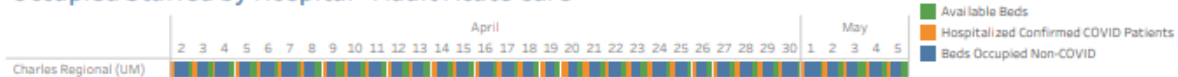


- **Maryland Occupied Staff Adult Acute Care**

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/5/2020

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

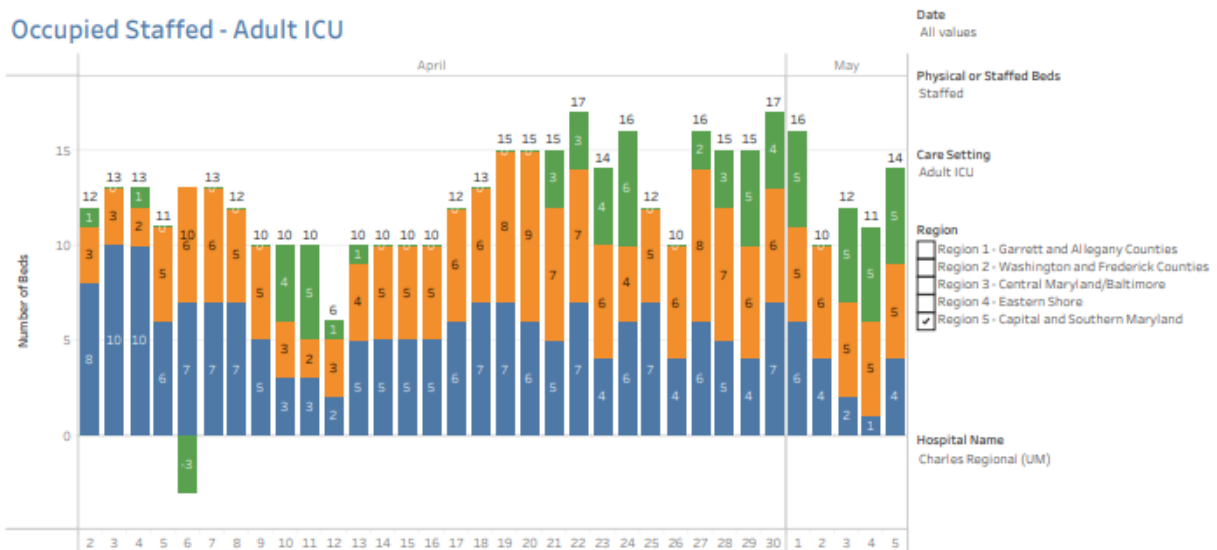
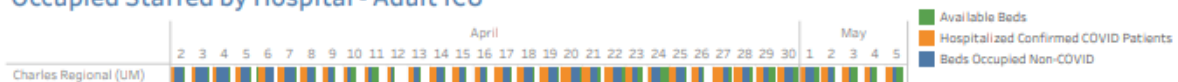
Occupied Staffed - Adult Acute Care**Occupied Staffed by Hospital - Adult Acute Care**

- **Maryland Occupied Staff Adult ICU**

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/5/2020

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Occupied Staffed - Adult ICU**Occupied Staffed by Hospital - Adult ICU**

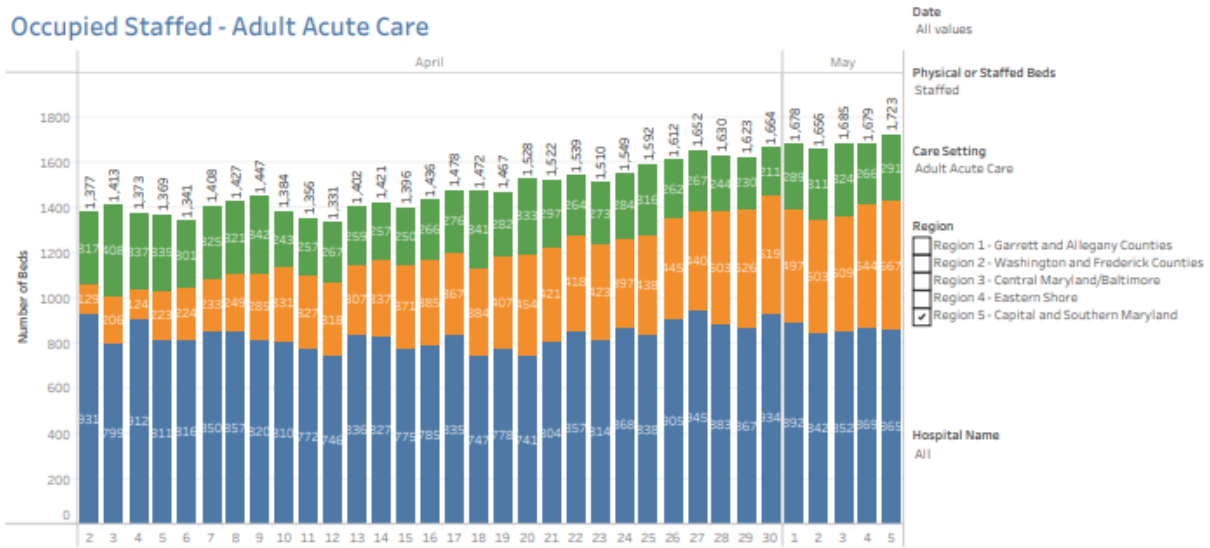
- Southern Region Occupied Staff Acute Care

MIEMSS Facility Resources Emergency Database (FRED)

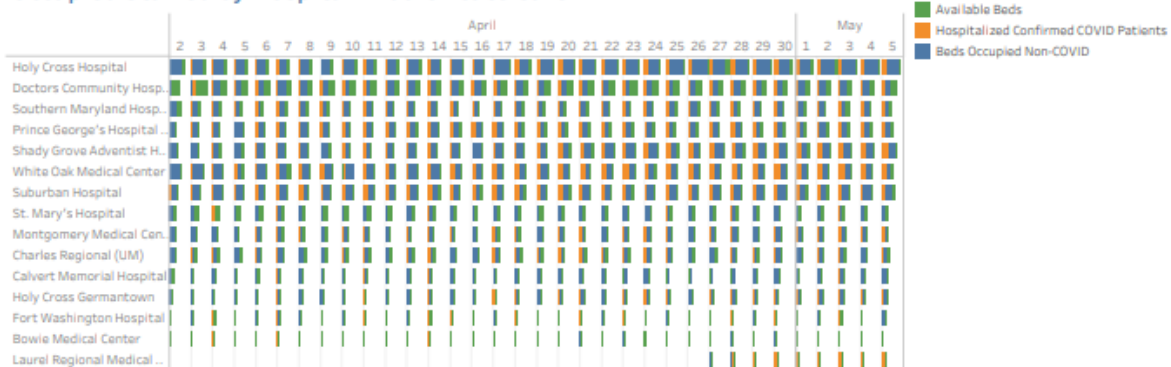
Data as of 5/5/2020

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

Occupied Staffed - Adult Acute Care



Occupied Staffed by Hospital - Adult Acute Care



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



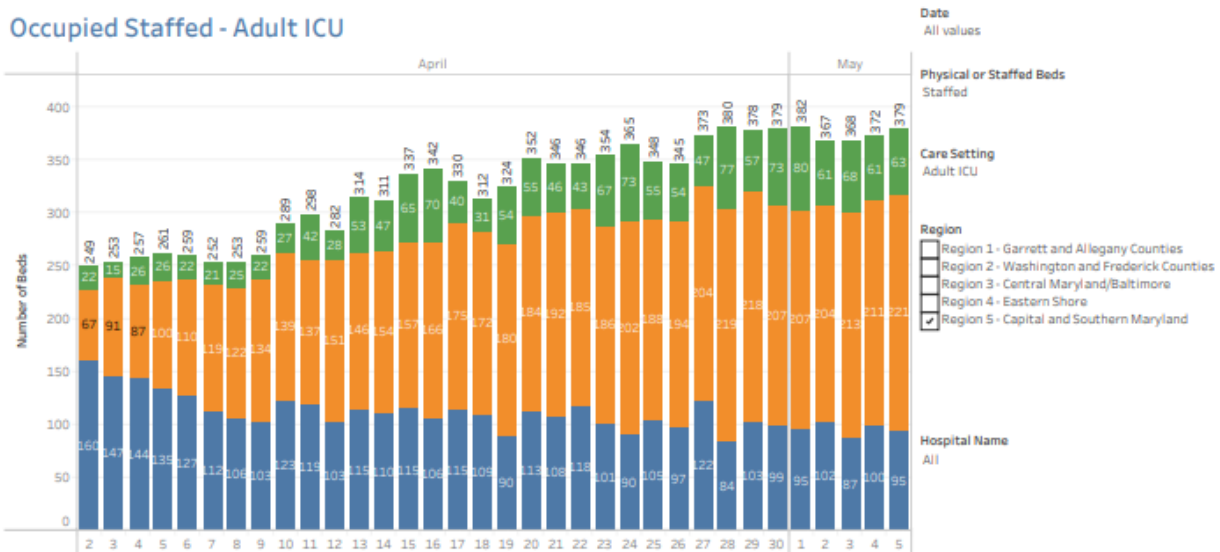
- Southern Region Occupied Staff Adult ICU

MIEMSS Facility Resources Emergency Database (FRED)

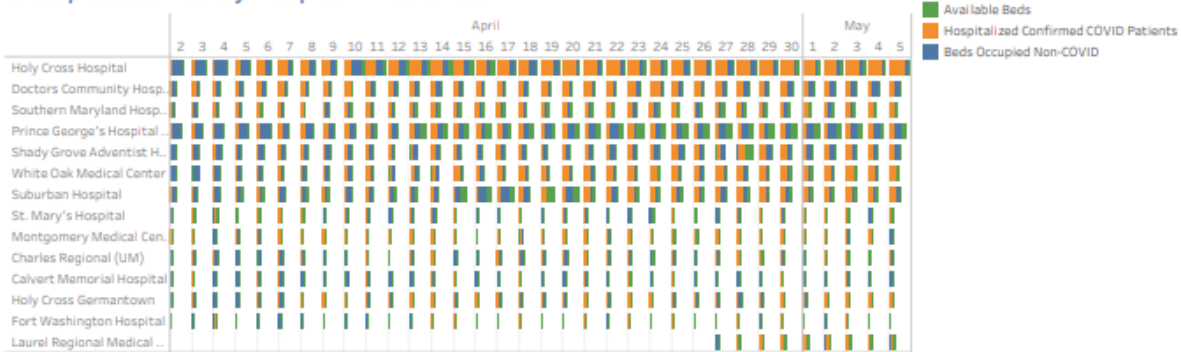
Data as of 5/5/2020

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Occupied Staffed - Adult ICU



Occupied Staffed by Hospital - Adult ICU



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



- **Maryland ICU Bed Availability**

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/5/2020

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Available Adult ICU Beds by Hospital as of 5/5/2020



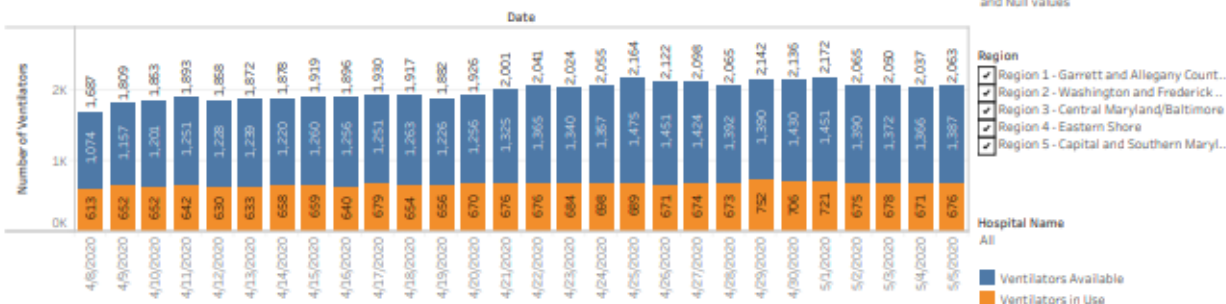
• Maryland Hospital Ventilator Availability

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/5/2020

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

Ventilators Availability

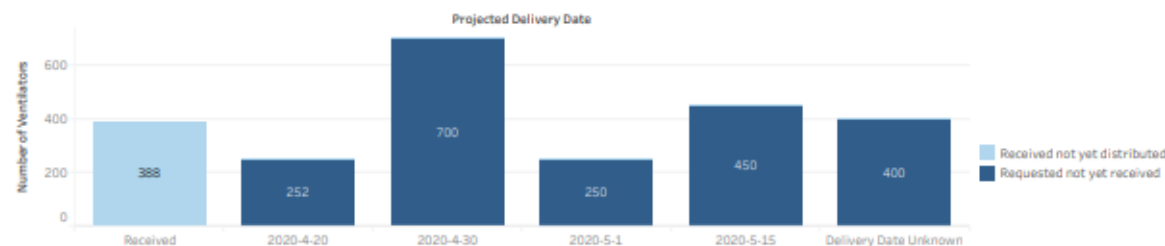


Additional Ventilators Supplied by Federal and State Government

Data as of 4/15/2020

Type	Source	Requested	Received	Distributed
Federal Ventilators	EMAC	50	50	0
	SNS	470	470	132
DGS Procured	Blue Door Pharma	400	0	
	Blue Flame Medical	110	0	
	Energy Audit	142	0	
	Percussionaire (mobile)	250	0	
	Vanguard	1,150	0	
Grand Total		2,572	520	132

Additional Ventilatory Delivery Projections Supplied by Federal and State Government



Ventilators in Use by Hospital

Highlighting Indicates Percentage of Ventilators in Use

Hospital Name	April																														May					Ventilators % in Use
	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1	2	3	4	5								
Anne Arundel Medic...	70%	49%	28%	28%	30%	35%	34%	36%	38%	33%	33%	35%	35%	33%	30%	18%	20%	20%	20%	23%	21%		21%	20%	23%	23%	22%									
Atlantic General Ho...	20%	25%	25%	25%	29%	29%	29%	21%	21%	33%	33%	33%	53%	47%	53%	47%	53%	50%	46%	53%	53%	59%	59%		53%	53%	53%	53%	59%							
Baltimore Conventi...																																				
Baltimore Washing...	78%	68%	68%	46%	57%	55%	66%	57%	52%	62%	46%	56%	50%	60%	43%	82%	82%	27%	68%	55%	33%	40%	40%	40%	37%	37%	37%	33%								
Bowie Medical Cente...	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%								
Calvert Memorial H...	50%	44%	38%	44%	31%	44%	44%	44%	38%	24%	24%	24%	19%	19%	19%	24%	19%	14%	19%	10%	14%	19%	19%	10%	14%	14%	10%									
Carroll Hospital Cen...	27%	27%	33%	33%	35%	33%	33%	35%	38%	43%	39%	39%	30%	24%	15%	15%	15%	15%	18%	18%	43%	27%	36%	33%	30%	27%	18%	18%								
Charles Regional (U...	58%	58%	17%	10%	14%	14%	18%	23%	18%	32%	33%	36%	59%	41%	36%	32%	36%	42%	42%	42%	37%	16%	16%	26%	13%	17%	17%	29%								
Chestertown (UMSR...	20%	20%	0%	0%	0%	0%	14%	14%	14%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	29%	29%	29%	29%	29%	29%	29%	14%								
Doctors Community ...	74%	76%	70%	83%	87%	87%	87%	78%	80%	71%	71%	71%	78%	96%	85%	68%	65%	65%	61%	67%	69%	71%	67%	31%	67%	63%	67%	59%								

Hospitals started reporting ventilators in use on 4/2/2020.

Source: CRISP, 2020. CRISP MIEMSS FRED SmartSheet Download and Maryland Department of Health.



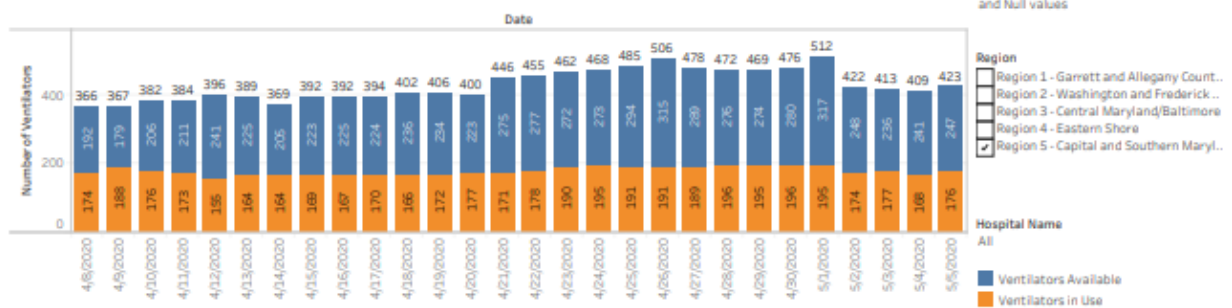
Southern Region Ventilator Availability

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/5/2020

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Ventilators Availability

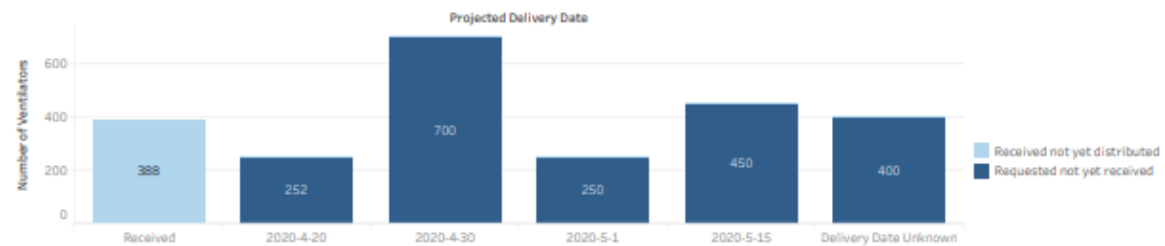


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Bowie Medical Center	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%						
Calvert Memorial H.	50%	44%	38%	44%	31%	44%	44%	44%	44%	38%	24%	24%	24%	19%	19%	19%	24%	19%	14%	19%	10%	14%	19%	19%	10%	14%	14%	10%							
Charles Regional (U.	58%	58%	17%	10%	14%	14%	18%	23%	18%	32%	33%	36%	59%	41%	36%	32%	36%	42%	42%	42%	37%	16%	16%	26%	13%	17%	17%	29%							
Doctors Community	74%	76%	70%	83%	87%	87%	78%	78%	80%	71%	71%	71%	78%	96%	85%	68%	65%	65%	61%	67%	69%	71%	67%	31%	67%	63%	67%	59%							
Fort Washington Ho.	57%	22%	36%	36%	11%	11%	29%	13%	13%	13%	22%	22%	13%	13%	13%	13%	24%	24%	24%	24%	24%	19%	13%	7%	0%	0%	13%	7%							
Germantown EC	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%							
Holy Cross Germant.	50%	63%	78%	78%	67%	56%	44%	56%	70%	67%	63%	56%	56%	67%	67%	89%	73%	90%	88%	67%	70%	60%	60%	56%	60%	60%	30%	70%							
Holy Cross Hospital	96%	91%	95%	93%	90%	95%	98%	95%	98%	95%	92%	90%	90%	83%	86%	89%	83%	92%	83%	83%	86%	94%	94%	36%	86%	83%	89%	89%							
Laurel Regional Med.	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	13%	22%	26%	24%	20%	19%						
Montgomery Medic.	25%	33%	25%	40%	25%	25%	33%	33%	42%	42%	67%	58%	67%	67%	71%	67%	75%	67%	53%	53%	40%	47%	53%	40%	47%	47%	40%								

Hospitals started reporting ventilators in use on 4/2/2020.

Source: CRISP, 2020. CRISP MIEMSS FRED SmartSheet Download and Maryland Department of Health.

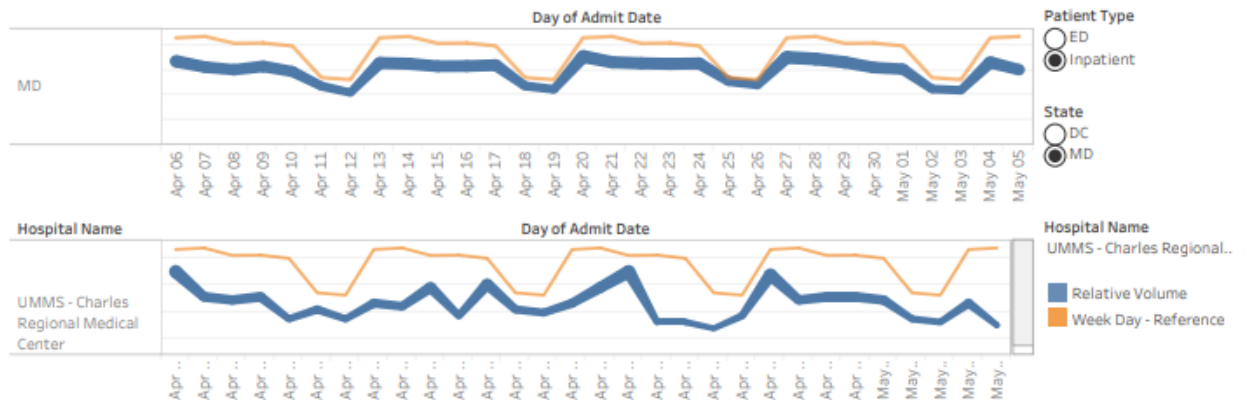


• Maryland Hospital Inpatient Volume

Hospital Volume Trend Lines

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

The orange reference line shows the statewide average relative volume by the day of the week, using all ADT data from January 1, 2020 to February 29, 2020.

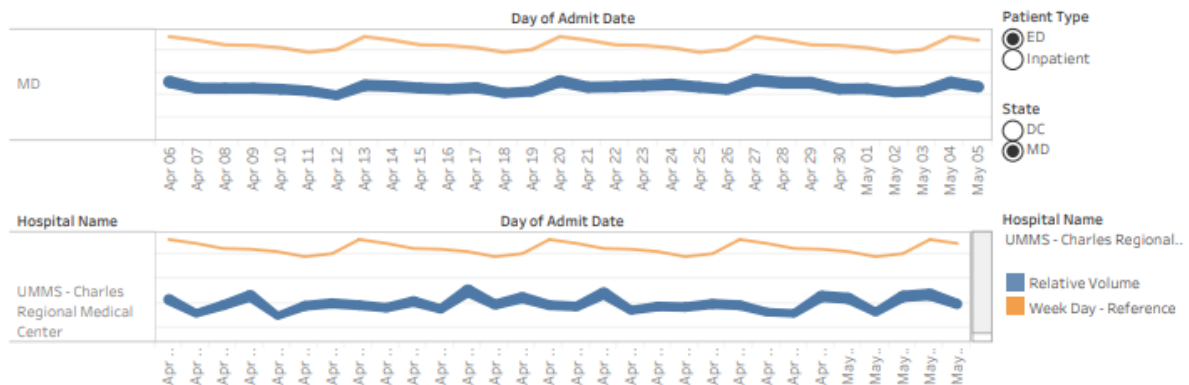


• Maryland Hospital ED Volume

Hospital Volume Trend Lines

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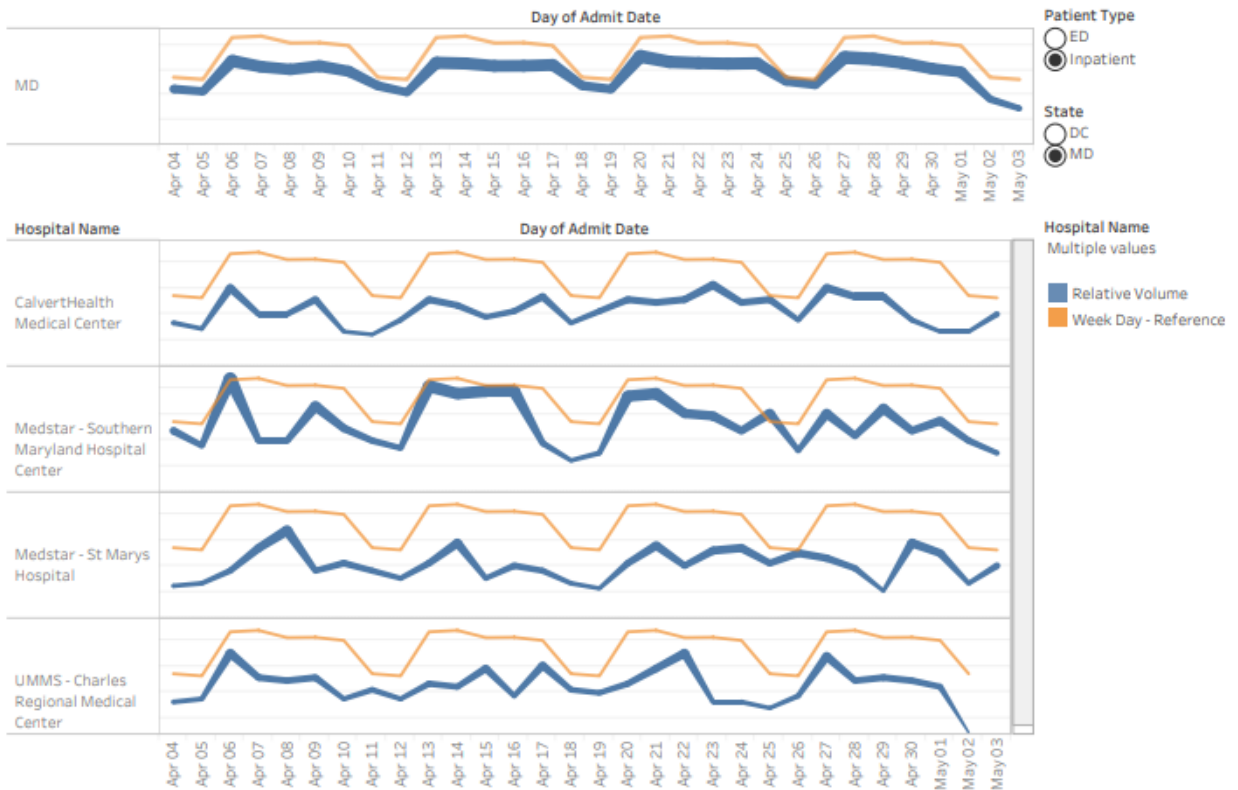


• Southern Region Inpatient Volume

Hospital Volume Trend Lines

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The orange reference line shows the statewide average relative volume by the day of the week, using all ADT data from January 1, 2020 to February 29, 2020.

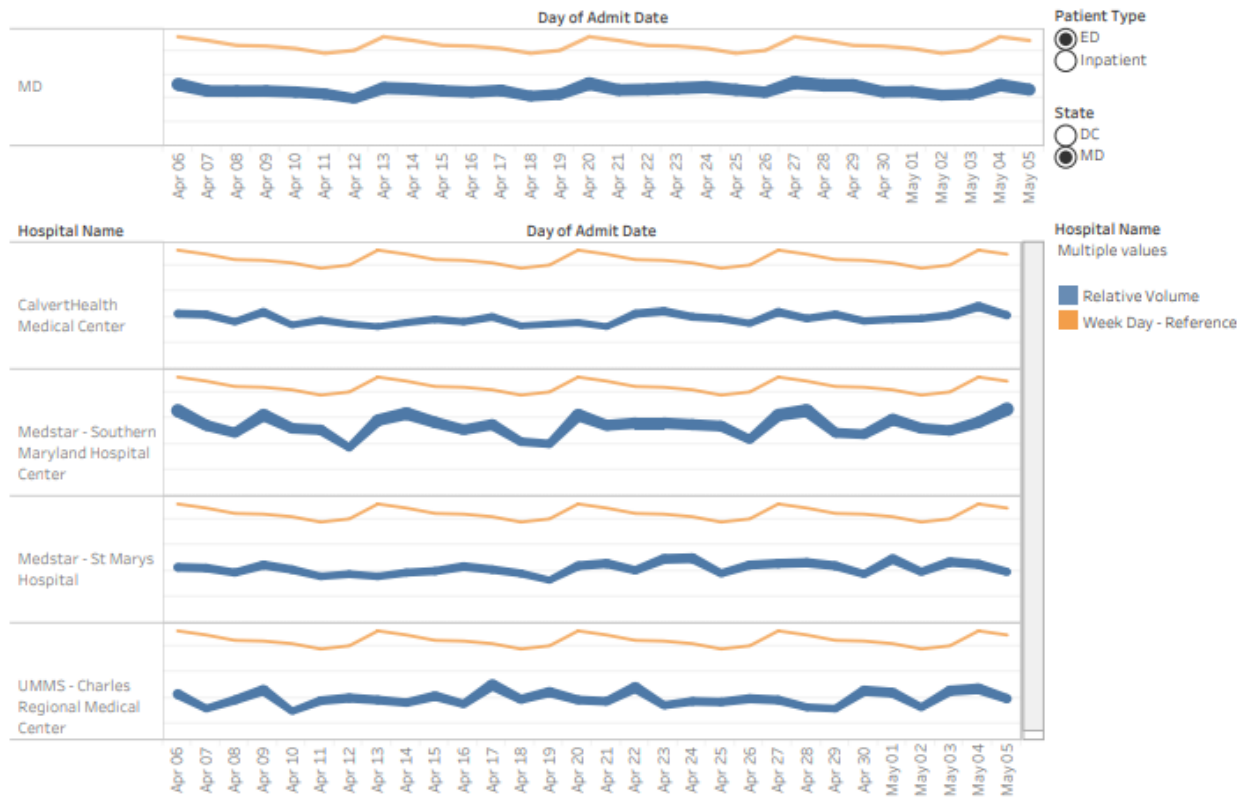


• Southern Region ED Volume

Hospital Volume Trend Lines

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

The orange reference line shows the statewide average relative volume by the day of the week, using all ADT data from January 1, 2020 to February 29, 2020.



Data shown between
4/6/2020 and 5/5/2020

- **Maryland Occupied Staffed Beds**

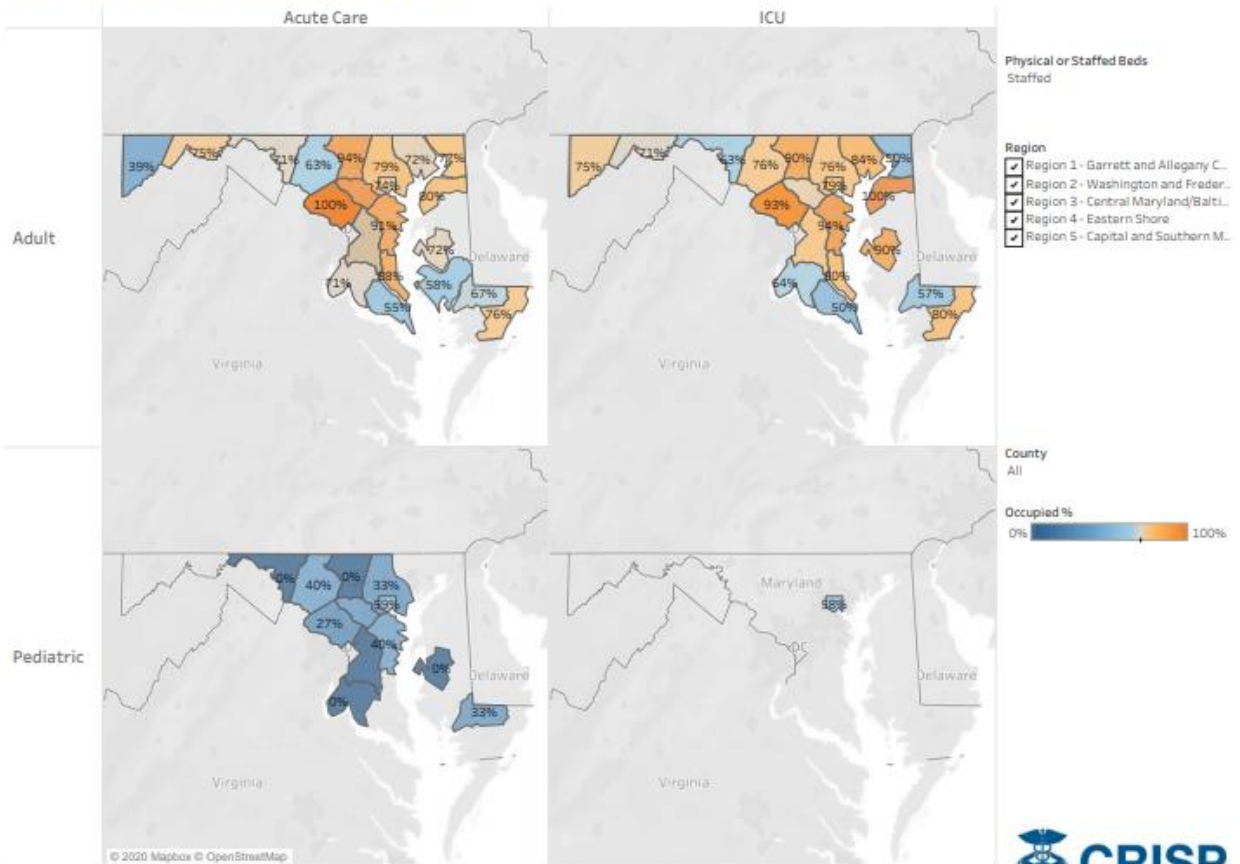
MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/5/2020

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Occupied Staffed Beds - on 5/5/2020

Date
5/5/2020



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



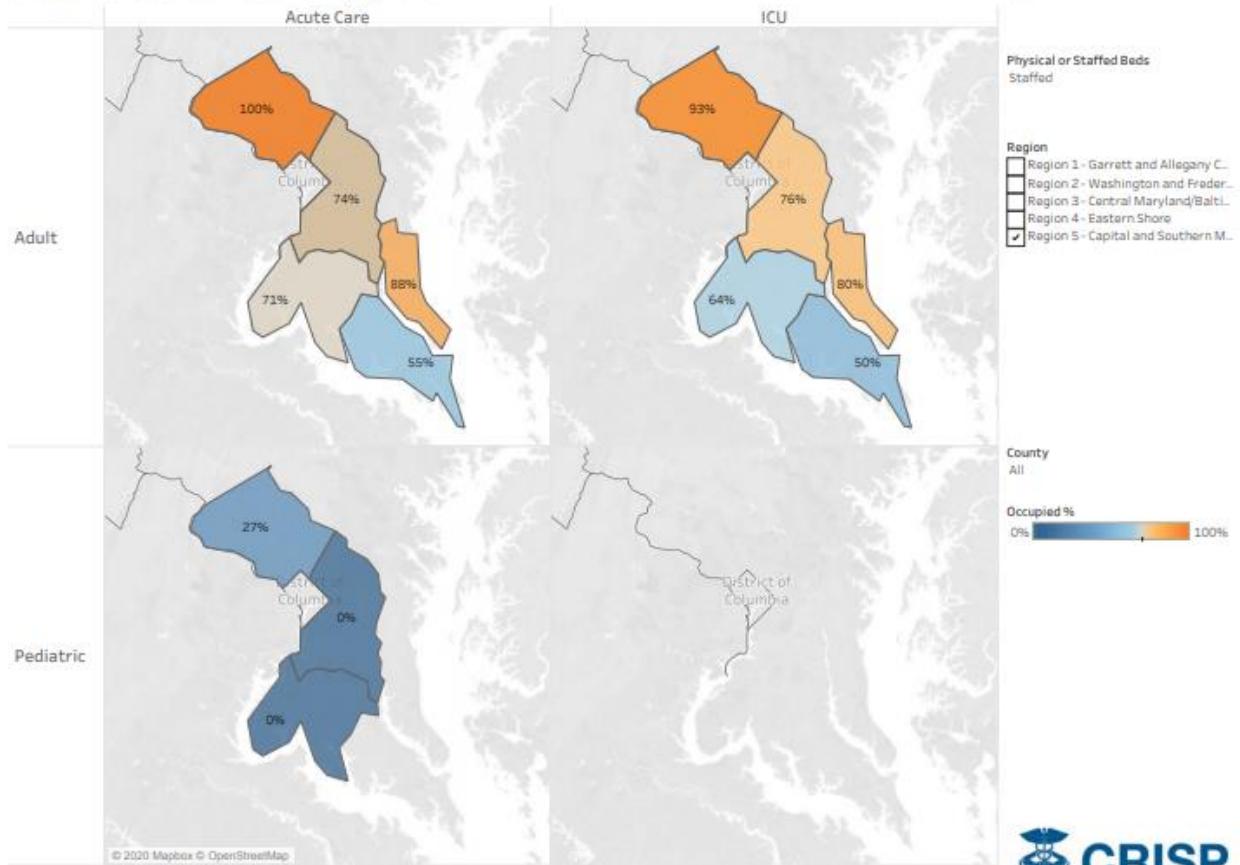
- **Southern Region Occupied Staffed Beds**

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/5/2020

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

Occupied Staffed Beds - on 5/5/2020



Source: CRISP, 2020. CRISPMIEMSS FRED SmartSheet Download.



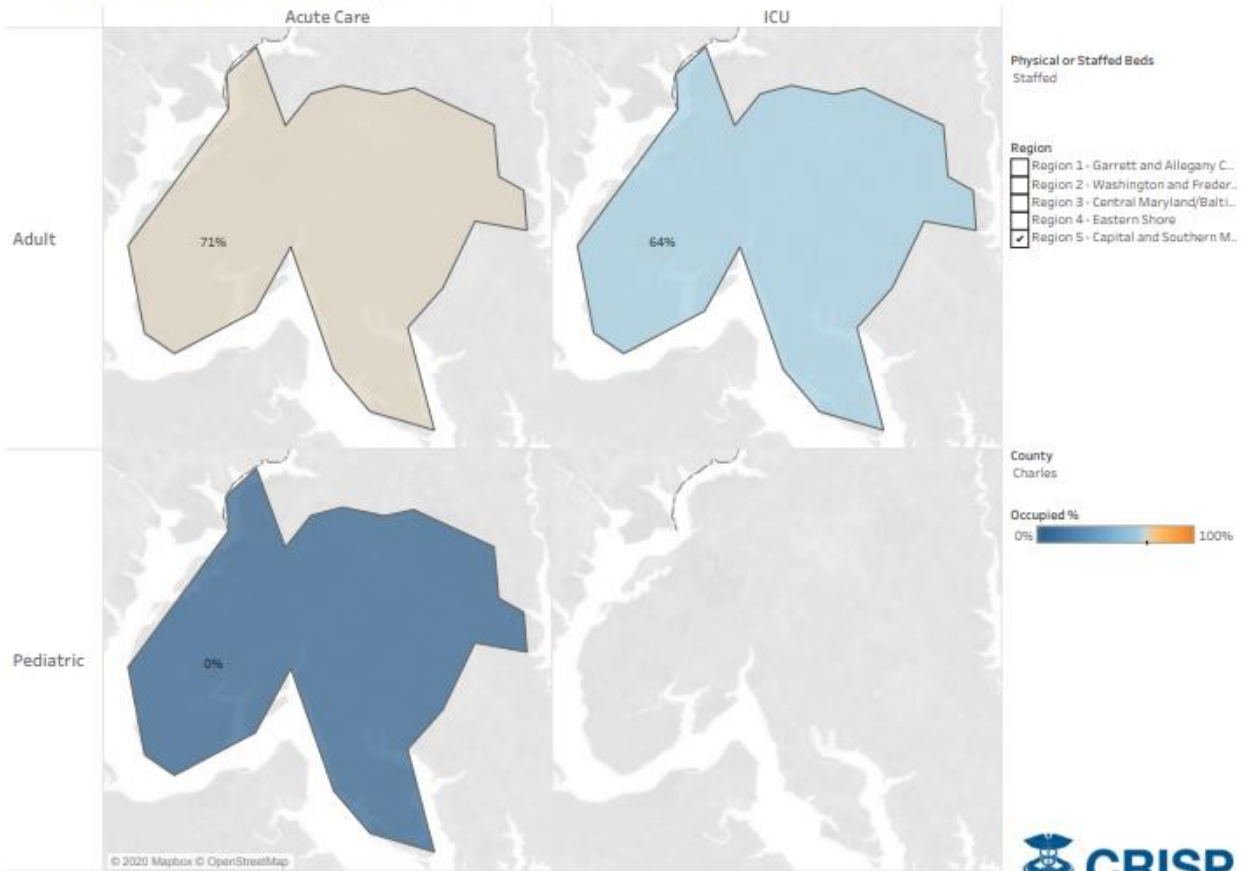
• Charles County Occupied Staffed Beds

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/5/2020

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Occupied Staffed Beds - on 5/5/2020



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



• Southern Region Occupied Staffed Beds

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/5/2020

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

Occupied Staffed Beds - Adult Acute Care



Occupied Staffed Beds - Adult Acute Care by Hospital

	April																														May				
Hospital Name	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1	2	3	4	5							
Charles Regional (UM)	71%	66%	73%	77%	70%	67%	77%	78%	80%	90%	90%	76%	73%	79%	74%	71%	70%	87%	86%	75%	73%	76%	75%	90%	89%	77%	66%	76%	71%						

Hospital Name
Charles Regional (UM)

Occupied %
0% 100%

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/5/2020

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Occupied Staffed Beds - Adult ICU



Occupied Staffed Beds - Adult ICU by Hospital

	April																														May				
Hospital Name	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1	2	3	4	5							
Charles Regional (UM)	90%	90%	80%	50%	83%	90%	90%	90%	90%	90%	90%	90%	90%	90%	82%	71%	63%	80%	100%	88%	80%	67%	76%	69%	90%	58%	55%	64%							

Hospital Name
Charles Regional (UM)

Occupied %
0% 100%

• Maryland Capacity Overview

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/5/2020

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

Statewide Capacity Overview

Available Acute Care and ICU Staffed
Beds (Adult):

1,675

(1675/7763) = 22%

Ventilators Available:

1,387

(1387/2063) = 67%

Patients in the Emergency Department:

736

(736/2021) = 36%

Change from day before: +42 beds

Change from day before: +21 vents

Change from day before: -14 patients

Hospitalized Confirmed COVID-19 Patients

Staffed Acute Care Beds Occupied by
COVID-19 Patients:

1,123

(1123/6232) = 18%

Change from day before:

+3 patients

Staffed ICU Beds Occupied
by COVID-19 Patients:

584

(584/1531) = 38%

Change from day before:

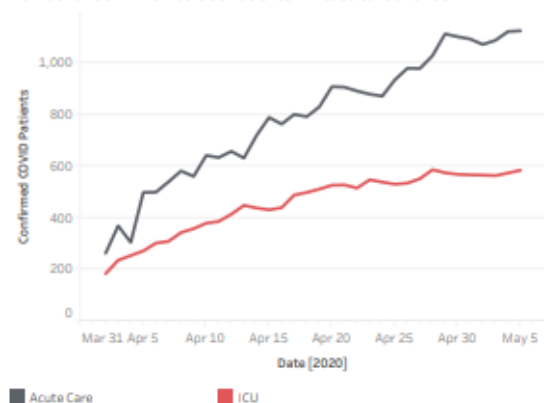
+11 patients

Bed Summary

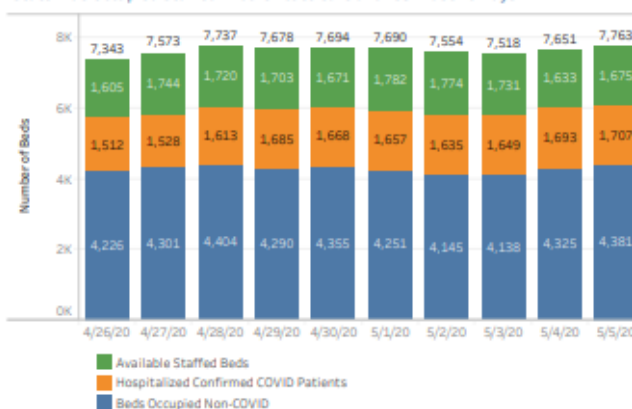
	Physical Beds	Staffed Beds	Occupied Beds	% Occupied Physical Bed	% Occupied Staffed Bed
Adult Acute Care	7,769	6,232	4,880	63%	78%
Adult ICU	1,934	1,531	1,208	62%	79%
Pediatric Acute Care	318	233	110	35%	47%
Pediatric ICU	45	45	26	58%	58%

Hospitalized COVID-19 Patients

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



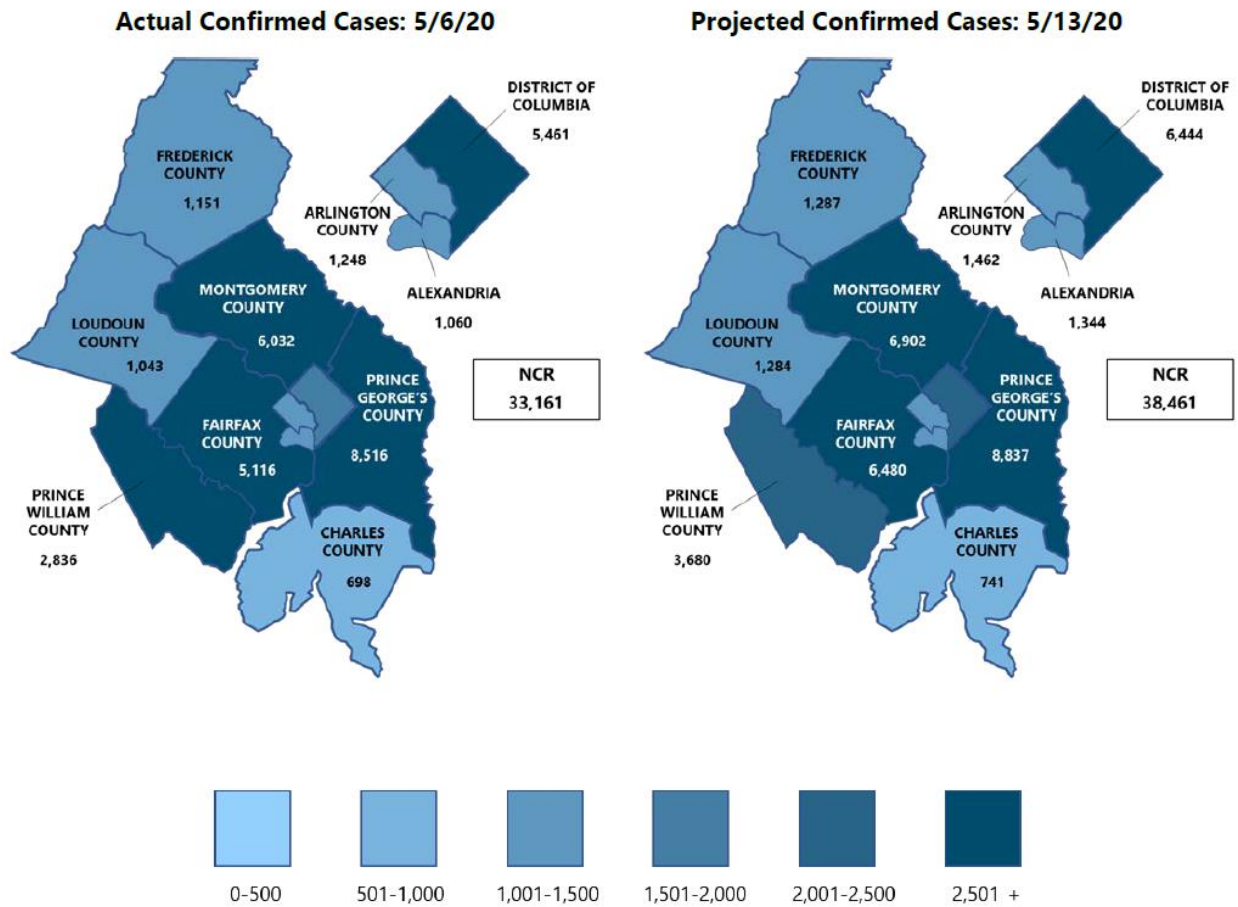
Statewide Occupied Staffed - Adult Acute Care and ICU - Last 10 Days



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



- Projections



	Actual Confirmed Cases On:			Projected Cases For:									
	5/4	5/5	5/6	5/7	5/8	5/9	5/10	5/11	5/12	5/13	5/20	5/27	
Washington DC	5,170	5,322	5,461	5,617	5,767	5,912	6,051	6,187	6,318	6,444	7,226	7,851	
Charles Co., MD	651	660	698	682	693	704	714	723	733	741	790	824	
Frederick Co., MD	1,069	1,071	1,151	1,227	1,238	1,249	1,259	1,269	1,278	1,287	1,338	1,375	
Montgomery Co., MD	5,384	5,541	6,032	5,965	6,134	6,297	6,455	6,609	6,757	6,902	7,804	8,540	
Prince George's Co., MD	7,869	7,869	8,516	8,503	8,569	8,631	8,688	8,741	8,791	8,837	9,081	9,228	
Arlington Co., VA	1,139	1,169	1,248	1,282	1,315	1,347	1,377	1,406	1,435	1,462	1,628	1,759	
Fairfax Co., VA	4,684	4,903	5,116	5,317	5,515	5,711	5,906	6,099	6,290	6,480	7,775	9,010	
Loudoun Co., VA	961	998	1,043	1,080	1,115	1,150	1,185	1,218	1,251	1,284	1,494	1,680	
Prince William Co., VA	2,507	2,608	2,836	2,960	3,083	3,205	3,325	3,445	3,563	3,680	4,478	5,236	
Alexandria, VA	940	983	1,060	1,102	1,144	1,185	1,225	1,265	1,305	1,344	1,604	1,845	
NCR	30,374	31,124	33,161	33,734	34,573	35,390	36,186	36,962	37,720	38,461	43,218	47,348	

Medical Demand Projections:

	Actual Confirmed Cases On:			Projected Cases (Hospitalized) [ICU] {Ventilator} For:								
	5/4	5/5	5/6	5/13			5/20			5/27		
Washington DC	5,170	5,322	5,461	6,444	(1,289)	{309}	{155}	7,226	(1,445)	{347}	{173}	7,851 (1,570) {377} {188}
Charles Co., MD	651	660	698	741	(148)	{36}	{18}	790	(158)	{38}	{19}	824 (165) {40} {20}
Frederick Co., MD	1,069	1,071	1,151	1,287	(257)	{62}	{31}	1,338	(268)	{64}	{32}	1,375 (275) {66} {33}
Montgomery Co., MD	5,384	5,541	6,032	6,902	(1,380)	{331}	{166}	7,804	(1,561)	{375}	{187}	8,540 (1,708) {410} {205}
Prince George's Co., MD	7,869	7,869	8,516	8,837	(1,767)	{424}	{212}	9,081	(1,816)	{436}	{218}	9,228 (1,846) {443} {221}
Arlington Co., VA	1,139	1,169	1,248	1,462	(292)	{70}	{35}	1,628	(326)	{78}	{39}	1,759 (352) {84} {42}
Fairfax Co., VA	4,684	4,903	5,116	6,480	(1,296)	{311}	{156}	7,775	(1,555)	{373}	{187}	9,010 (1,802) {433} {216}
Loudoun Co., VA	961	998	1,043	1,284	(257)	{62}	{31}	1,494	(299)	{72}	{36}	1,680 (336) {81} {40}
Prince William Co., VA	2,507	2,608	2,836	3,680	(736)	{177}	{88}	4,478	(896)	{215}	{107}	5,236 (1,047) {251} {126}
Alexandria, VA	940	983	1,060	1,344	(269)	{64}	{32}	1,604	(321)	{77}	{39}	1,845 (369) {89} {44}
NCR	30,374	31,124	33,161	34,573	(6,915)	{1,660}	{830}	36,186	(7,237)	{1,737}	{868}	37,720 (7,544) {1,811} {905}

MISCELLANEOUS

Respectfully submitted by Charles County PHEP

HOSPITAL BRIEF 5-07-2020

- 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 = 67
- Hospital ICU Census = 13
- Hospital ICU is now a dedicated COVID-19 Unit, and 3 East is for ICU overflow.
- Isolation Room Capacity = 12
- Isolation Rooms Occupied = 8
- Confirmed positive cases of COVID-19 patient admissions = 21
 - Of the total 21 COVID-19 positive patients, four (4) of the patients are located in the ICU. Seventeen (17) are located in the 3 South dedicated COVID-19 unit
- PUI admissions = 9
- Ventilated COVID-19 positive patients = 5
- Ventilators not in use = 15
- COVID-19 related deaths = 31 (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.
- EMS staff transport to CRMC on Wednesday, 05/06/2020 = One (1) known COVID-19 positive, and two (2) PUI's that tested positive.
- CMCR total Lab tests to date = 1085.
- Total COVID-19 positive Lab results to date = 241

Intelligence Briefing 5-7-2020
COVID Charles County
Week 8

Updated Infection Numbers: As of 0832 hrs.

Total worldwide: 3,775,667 **+90,538 since the 5-6-20 brief.**

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

4-27/28	4-28/29	4-29/4-30	4-30/5-1	5-1/2	5-2/3	5-3/4	5-4/5	5-5/6	5-6/7
67,182	79,263	82,692	54,266	88,162	86,724	74,919	79,860	79,091	90,538

Total fatalities worldwide: 264,406 **+6,355 since the 5-6-20 brief**

Total confirmed cases in the US: 1,229,089 **+24,616 since the 5-6-20 brief**

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

4-27/28	4-28/29	4-29/30	4-30/5-1	5-1/2	5-2/3	5-3/4	5-4/5	5-5/6	5-6/7
20,884	24,699	29,706	27,158	34,313	29,713	24,283	22,293	23,841	24,616

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: 73,431 **+4,497 since 5-6-2020**

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

Total confirmed cases in State in of MD: 28,163 **+1211 since the 5-6-20 brief**

Total tested in the State of MD: 119,226 **+3,377 over 5-6-20**

Percent of those test that test positive: **23.6%**

Total Fatalities in State of MD: 1,401 **+63 change since the 5-6-20 brief**

Number of probable deaths: 102

Total Ever Hospitalized: 5,663

Persons currently hospitalized: 1,707 +44 since 5-6-2020

4-27/28	4-28/29	4-29/30	4-30/5-1	5-1/2	5-2/3	5-3/4	5-4/5	5-5/5	5-6/7
+15	+117	+66	-43	-9	-22	+14	+44	+14	-24

First Responder Numbers in Charles County: NUMBERS AS OF 5-7-2020 @1230

15 Quarantine: means exposed and they can't come to work

1 Self Isolation: means sick or tested positive

Weather:

Friday 60-37 rain, Sat 51-37 sun, Sunday 62-45 Sun

Local:

Several stores were visited this am. Frozen food inventories seem to be returning. Meat inventories appeared to be lower today.

Historically, over 40% of cases in Charles County (268+) are 1st responders, health care providers, or nursing home patients. There have been roughly 270 new cases in Charles in the last. Using the historical data, along with CDC symptomology length, there are roughly 108 active confirmed cases today in Charles County.

Maryland Update:


Gov. announcement phase 1 recovery could begin next week.

Gov. relaxed some activities: golf, boating, and state parks are now allowed.


Over 65K Marylanders filed for unemployment over the last 2 weeks.

UPDATE | MARYLAND STRONG: ROADMAP TO RECOVERY


NEW ACTIONS ANNOUNCED MAY 6



MDH will issue guidelines to **allow for elective procedures** at the discretion of hospitals and health care providers.



Effective at 7 a.m. on May 7, safe outdoor activities will include **golf, tennis, recreational boating, fishing, and camping.**



Schools will remain closed for the remainder of the academic year. Online and distance learning will continue.

LEARN MORE AT GOVERNOR.MARYLAND.GOV/RECOVERY | FOR HEALTH RESOURCES, VISIT CORONAVIRUS.MARYLAND.GOV

MD has exceeded their 6000 bed surge capacity. Currently, 8100 surge beds, including 2400 ICU beds.

Region:

Over 32,163 cases in the NCR as of 1000 5-7-2020,
55,387 cases in Maryland, DC, and Virginia as of 1100 on 5-7-2020.

National:

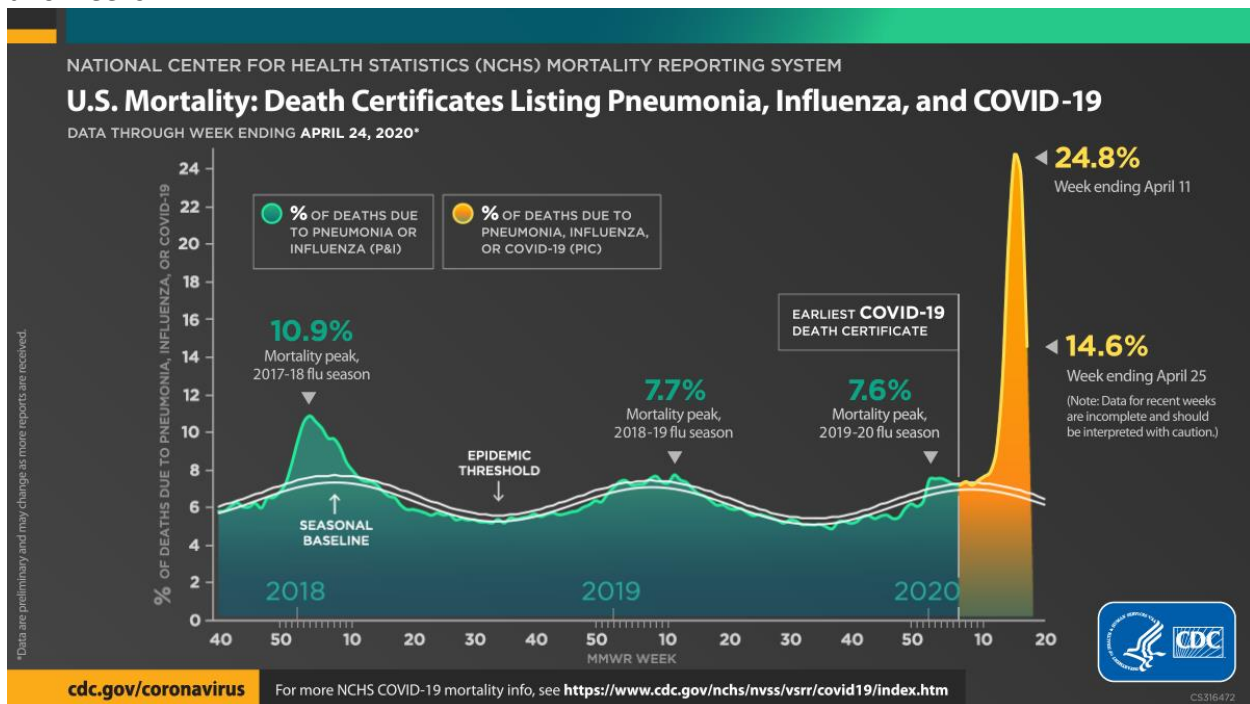
AP infection map: <https://apnews.com/7b5a2994d351e5c1697e2c7478e2969c>

3.7 million American filed for unemployment last week.

NY Health Department issued an advisory about a serious inflammatory disease affecting children that is possibly linked to COVID

NCTC releases "Tool Kit" re: chemical and biological threats to food retailers (see attached)

CDC reports deaths reported as COVID related have dropped from 24.8% to 14.9% in the last two weeks.



NC beaches have opened to non-residents

Meat processing continues to be a large concern. Smithfield in SD reporting opening this week with limited staff. Costco is limiting purchasing. Some Wendy's stores are not serving meat.

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 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 7st, 2020

Buildings:

Charles County Sheriff's Office: District 1 Lobby is closed for scheduled remodeling. The District 1 clerks have moved to 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 scheduling 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.

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:

- 4 Sworn Officer quarantined
 - 1 Officer who has family member with symptoms. Estimated return date 05/19/20.
 - 3 Officers who responded to an overdose call on April 28th. Estimated return date 05/12/20.
- 0 Sworn Officers isolated.
- 3 Correctional Officer quarantined.
 - 3 Correctional Officers who have family members who are sick with symptoms. Estimated return dates 1) 05/10/20 2) 05/18/20 3) 05/19/20
- 0 Correctional Officers isolated, officer previously isolated tested negative for COVID-19.
- 0 civilians quarantined.

- 1 civilians isolated.

Charles County Detention Center Population:

- 116 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: 52

Warnings: 49

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)

Changes denoted in red.

Charles County Public Schools Briefing 5-7-2020
COVID Charles County

48-hour Priorities:

- Maintaining instructional continuity
- Expanding and maintaining food service
- Expanding and maintaining WiFi service
- Develop a plan for closing SY 19-20

Meals:

On Wednesday, 5/6/20, CCPS served 4725 meals at the 11 meal distribution sites. This was -786 from Tuesday, 5/5/20. Westlake HS, Mudd Elem., JP Ryon Elem, St. Charles HS, and JC Parks Elem. are the highest distribution sites.

Closure:

State Superintendent of Schools Karen Salmon announced all Maryland public schools will remain closed until the end of the 2019-20 school year. Distance learning will continue for Charles County Public Schools students. All schools, buildings and centers will remain closed to the public.

Instruction:

Nothing new to report.

As Charles County Public Schools (CCPS) moves into the fifth and sixth weeks of distance learning, new assignments are now available for students online at www.ccboe.com . Paper packets with the new material are available at our 11 meal distribution sites.

Community Wifi:

All four sites are up and running and seeing use. CCPS in process of 3 other additional WiFi sites, will enable students and staff to access CCPS network not just the internet. Installation will begin the week of 5/10/20 at Dr. Mudd Elementary, Somers Middle School, and Gail Bailey Elementary School, adding to the other four hot spots of Piccowaxen Middle School, Henson Middle School, TC Martin Elementary School, and Mt. Hope Nanjemoy Elementary School.

Misc:

Due to the ongoing public health crisis created by COVID-19, Charles County Public Schools (CCPS) is planning virtual graduations for the Class of 2020 on June 11, 2020. Each high school will have an exclusive virtual graduation ceremony that will be available online and on television the morning of June 11.

Respectfully submitted by Jason Stoddard and Michael Meiser