



Safety Officer's Report Charles County EOC

05-15-20

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

Today's Safety Message: "Contractor decon procedures at CRMC will end on May 31st. Decon equipment and supplies will be available on location after the end date."

Total number of PUI's transported to date: 689

Total number of patients transported by EMS testing + for COVID: 120

Total number of first responders on self-isolation: 1


Total number of first responders on quarantine: 3

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

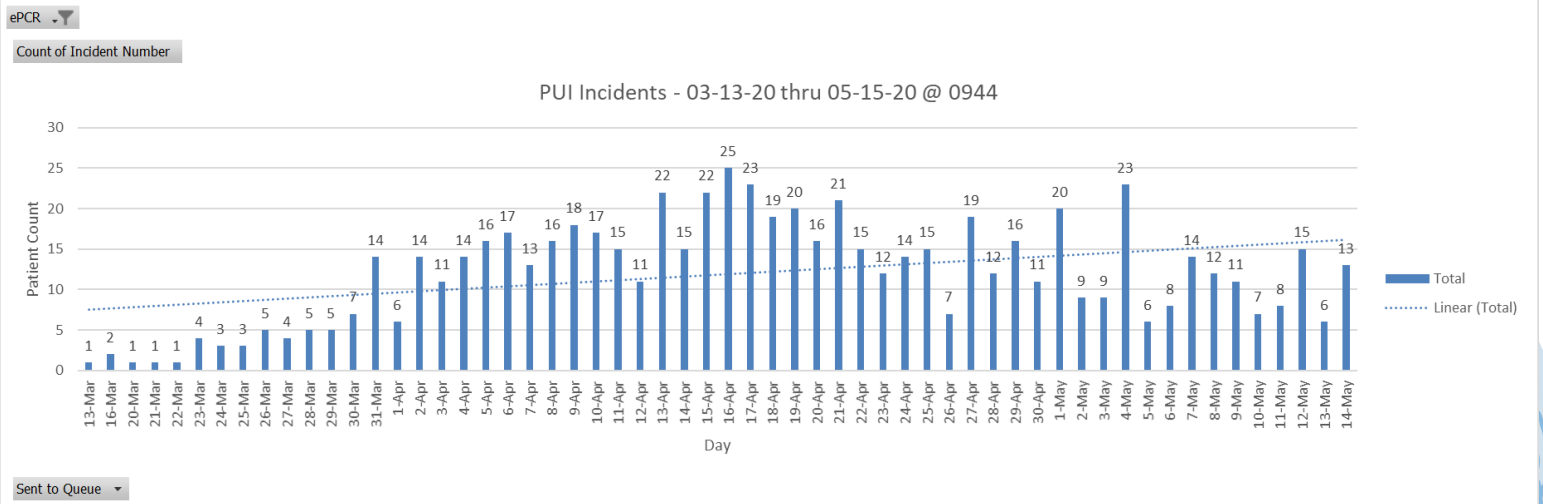
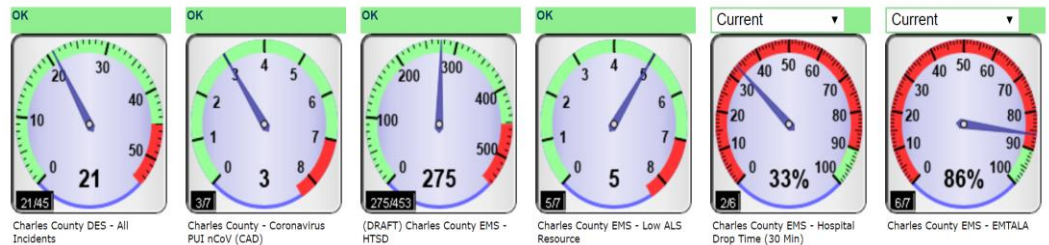
Daily Estimated PPE Burn Rate: 20 sets/day

 10425 Audie Lane
La Plata, MD 20646

 301-399-1143

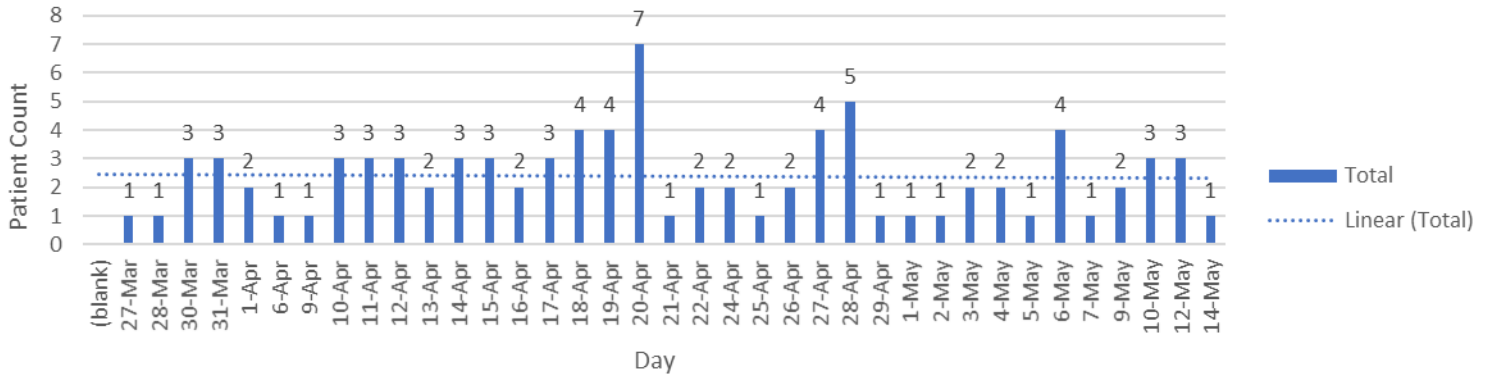
 DESsafety@charlescountymd.gov

 www.charlescountymd.gov



Count of Patient Name

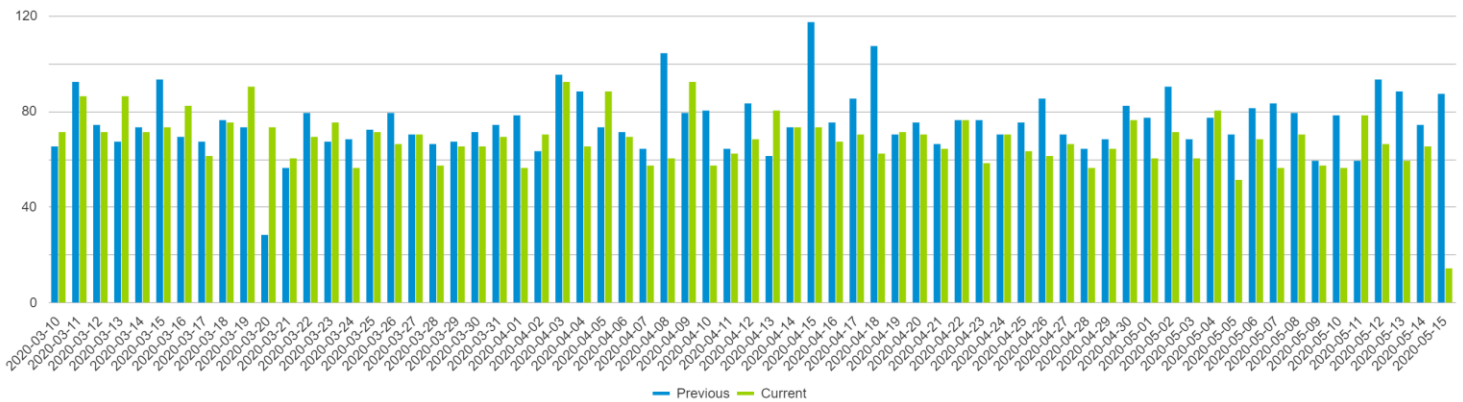
YTD COVID+ Patients Transported by EMS



Date of EMS Transport ▾

Count of Incident Reported

Compare To: One Year ▾



CONTRACTOR DECON PROCEDURES @ CRMC END ON MAY 31ST.

DECON EQUIPMENT & SUPPLIES WILL BE
AVAILABLE ON LOCATION AFTER THE
LISTED END DATE.





PUBLIC HEALTH BRANCH BRIEFING COVID-19 PANDEMIC RESPONSE

May 15, 2020

GENERAL REPORTING INFORMATION

INFECTIOUS DISEASE

CASE COUNT—CHARLES COUNTY

As of 5/15/2020, total case count for Charles County is 832.

- *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
- Call Center volume is approximately 30 to 60 call per day.

MEDIA, SOCIAL MEDIA AND WEBSITE

- PIO working on acquiring a new digital billboard at CCDOH. Demonstration model looked great.

PARTNER/STAKEHOLDER OUTREACH

LTC/AL

- The Long-Term Care and Assisted Living call was held on May 15 at 3 p.m. by CCDOH nurse liaisons.

ALL-PARTNER

- The all-partner call will be held today at 3:30 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: 36,986 (145,840 negative)
- 2) **New cases:** 1083
 - 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 (-42 last 24 hours); total current 1,496; total ever 6,679
 - e) Deaths -- Total 1,792 (44 last 24 hours)
 - f) Release from isolation – 2,685

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

RESOURCE DISTRIBUTION

- 1 new request was received and filled.
- EM shipment is expected to arrive today. Six pallets are expected today with the projected distribution amounts as shown below:
 - Bleach: 251
 - Ecolab Multi Surface Cleaner: 8
 - Disinfecting Wipes: 88
 - Hand Cleaner: 13
 - Hand Sanitizer (mixed sizes): 130
 - SaniCloth Disinfectant: 3

VOLUNTEERS

MARYLAND MEDICAL RESERVE CORPS

- No new responders were accepted into MMRC today

CAREGIVER SERVICE CORPS

- Nothing new to report.

ISOLATION & QUARANTINE AGREEMENT

J:\COVID-19\ISOLATION AND QUARANTINE GUIDANCE\Enforced Quarantine ConOps (1) 05122020.pdf

This is the updated agreement with participating hotels in the state. The Hilton Garden Inn in Waldorf is identified.

TESTING

VEIP TESTING SITE UPDATE

- Tested to Date: 1070
- 135 appts were opened for Thursday, May 12. Tested: 99 (29 empty slots / 3 cancelled / 3 no shows)
- We have been working to increase the number of available appointment slots and even added a second station to one of the lanes yesterday. However, the appointment slots are not being filled; and, we have raised the issue with state. They are looking at developing an awareness campaign for doctors, etc. Issue will be further discussed on VEIP briefing at 1600 today.

EPIDEMIOLOGY AND SURVEILLANCE

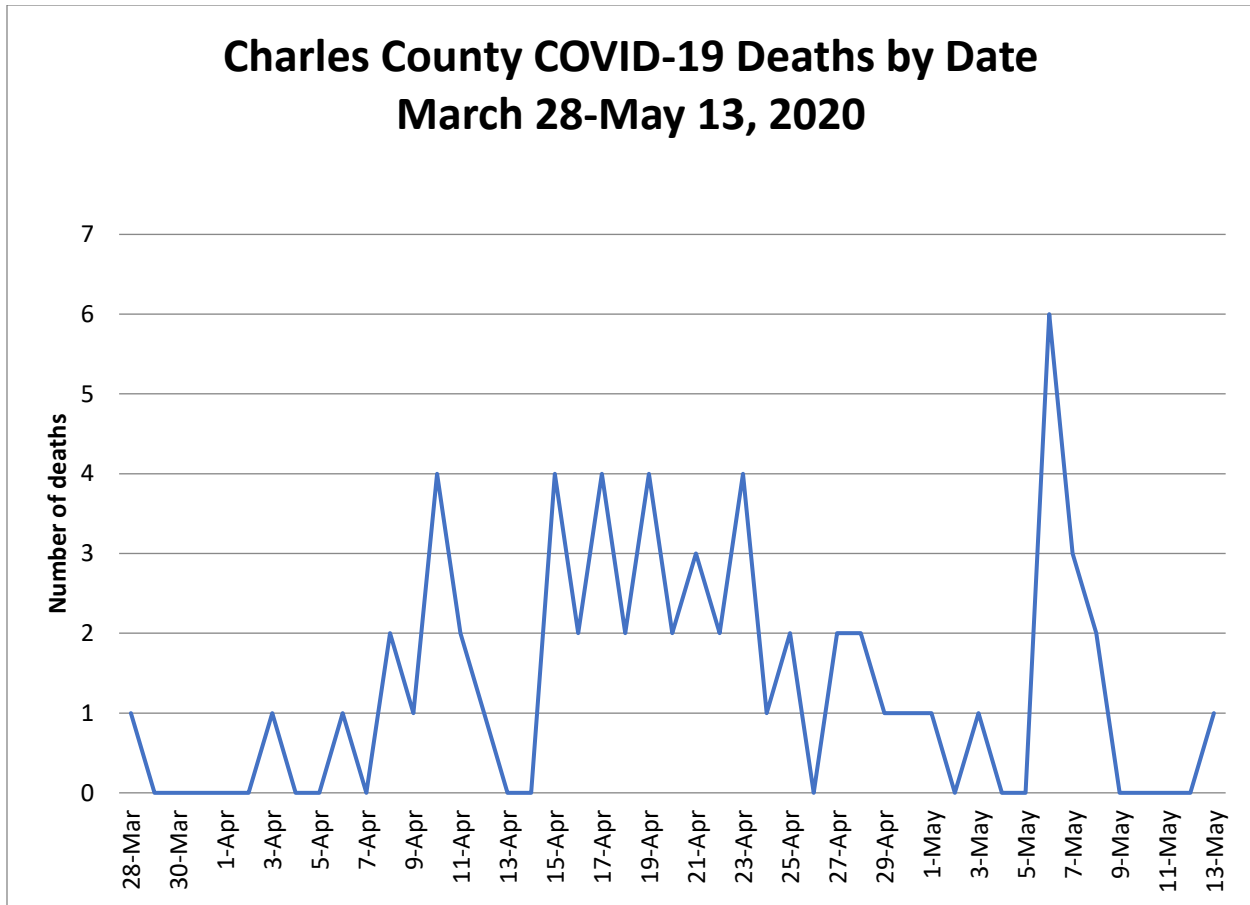
Charles County

Epidemiologist's Note: All data presented in the Charles County profile is a snapshot of the COVID-19 situation at one specific time period. Please be cognizant that data may differ from numbers presented later in the day since new positive lab results are being received by the state and local health department and entered into NEDSS electronic surveillance system throughout the work day. This explains any discrepancies in the total count or denominator being used to calculate each data measure; therefore, the date and time of data extraction for each data source is provided for your reference.

As of 5/15 at 8 a.m., total case count for Charles County was 832 cases.

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 59 confirmed deaths associated with COVID-19. This equates to 7.1% of total confirmed cases. The Charles County death rate of 7.1% is higher than the MD state average death rate of 4.8%. However, it should be noted that the majority of deaths in Charles County are associated with outbreaks in skilled nursing facilities. There are 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: 77.4 years

Age Distribution of Fatalities:

- 0-39 years: 0
- 40-69 years: 11 (18.1%)
- 70-79 years: 26 (42.6%)
- 80+ years: 24 (39.3%)

Gender breakdown among fatalities: 40 or 65.6% Female, 21 or 34.4% Male

Racial breakdown among fatalities:

- 44.3% Non-Hispanic White
 - 50.8% Non-Hispanic Black
 - 1.6% Non-Hispanic Asian
 - 3.3% Hispanic
-
- Number of negative lab results: 4056
 - Positivity Rate: 17.0% (State positivity rate: 20.2%)
 - Recovered and released from isolation: 184
 - Partially recovered with improved symptoms: 46

- Known asymptomatic cases: 14
- 166 or 20% required hospitalization.
- Among confirmed cases, 476 (57.2%) Female; 356 (42.8%) Male
- 13.3% Healthcare Workers
- 1.6% First Responders: EMS, Fire, Law Enforcement
- 27.8% have underlying health conditions
- Age range of positive COVID-19 cases: 0-100 years

Age Distribution for Charles County cases:

- Under 18 years: 26 (3.1%)
- 18-64 years: 632 (76%)
- 65+ years: 174 (20.9%)

ESSENCE data for urgent care utilization at Patient First in Waldorf had no yellow or red alerts for Thursday, May 14th. Patient volume was 50 patients on 5/14. Patient volume increased from 40 patients on Wednesday. All were discharged to home for self-care.

On 5/14, 20 patients presented with ILI or at least one COVID-19 like symptoms (40% of total patient volume). This high percentage is partially due to the COVID-19 drive up testing being performed at this location. They account for 10/20 patients with COVID-19 like illness. Diagnoses for ILI patients on Thursday included contact with and exposure to other viral communicable diseases, unspecified chest pain, encounter for screening of other viral diseases, mild persistent asthma, shortness of breath, seasonal allergic rhinitis, and acute recurrent pansinusitis.

On 5/14, there were 5 “Visit of Interest” CDC Classifier tags. It was due to COVID-19 exposure to a positive case, and all five cases presented for a COVID-19 test. They completed a total of 10 COVID-19 tests in their drive-up testing site on 5/14.

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 13 for 5/14. PUI EMS call volume has some fluctuation but remains low.

- 5/9: 11
- 5/10: 8
- 5/11: 12
- 5/12: 16
- 5/13: 5
- 5/14: 13

Epidemiologist’s Note Concerning Race breakdown: *The data is now being captured in the MDH line lists of confirmed cases in REDCap. Data was accessed on 5/15 at 8 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: 832 cases on 5/15 at 8 a.m. 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 (1.6%)
- Black/African American: 337 (40.5%)
- White: 206 (24.8%)
- Other or 2+ races: 53 (6.4%)
- Data not available/Declined to Answer: 222 (26.7%)

Ethnicity Breakdown

- Hispanic 44 (5.3%)
- Non-Hispanic 557 (66.9%)
- Data not available/Declined to Answer: 231 (27.8%)

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

- Positive resident cases in Skilled Nursing Facilities/Assisted Living Facilities: 144
- Positive staff cases in Skilled Nursing Facilities/Assisted Living Facilities: 54
- Among those 144 resident cases, 109 are in skilled nursing facilities and 35 are in assisted living facilities.
- Current residents or staff who are Persons Under Investigation (PUI) in Skilled Nursing Facilities/Assisted Living Facilities: 4
- Total currently hospitalized: 2
- Deaths: 46
- Pending tests for residents or staff at Skilled Nursing Facilities/Assisted Living Facilities: 6

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

- All 4 skilled nursing facilities in Charles County completed resident testing by Friday, 5/1. Lab results have been received for each facility. *A total of 371 residents in skilled nursing facilities were tested. 35 or 9.4% of those tests have come back positive for COVID-19.* Health department staff is looking at previous line lists to determine which of those cases are previously positive cases and which are new positives for the facilities.
- Dr Haft was able to get approval from the National Guard team lead for the Genesis locations and Restore to go ahead and test their residents. A weekly call is scheduled with the skilled nursing facilities for Friday, 5/15 to provide updates on next steps.

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 (59.7%) 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 5/15 at 8 a.m. *(Zip code level data with counts less than 7 cases cannot be shared publicly and must remain confidential.)*

Confirmed cases by zip code:

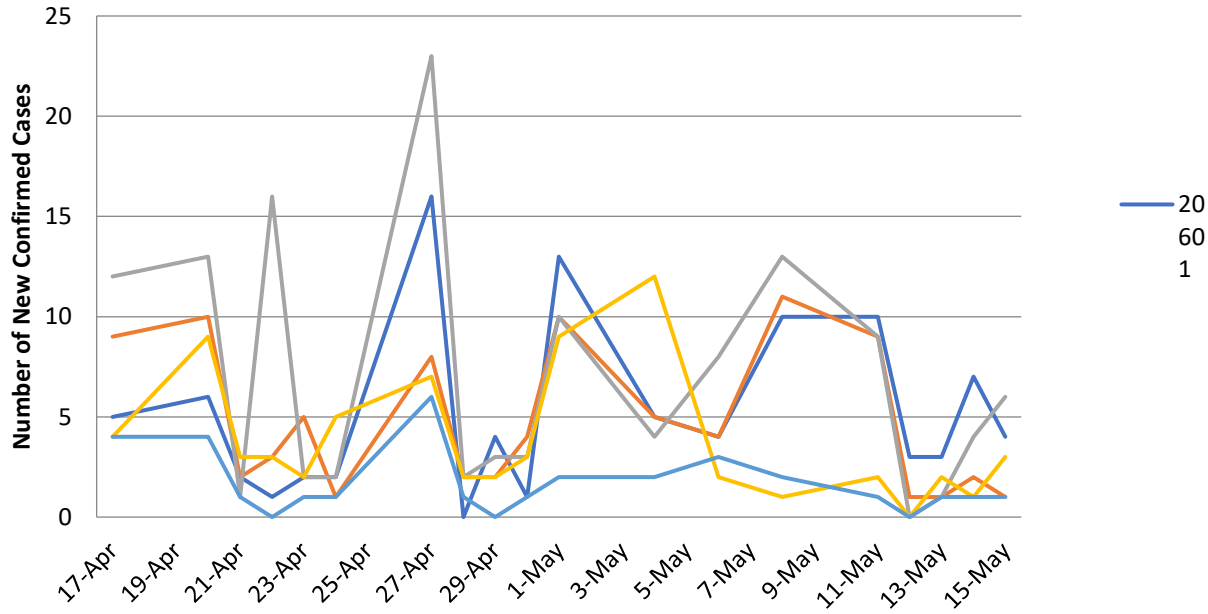
Zip code:	5/6	5/8	5/11	5/12	5/13	5/14	5/15
20601	102	112	122	125	128	135	139
20602	117	128	137	138	139	141	152
20603	173	186	195	195	196	200	206
20604	2	2	2	2	2	2	2
20611	4	4	4	4	4	4	4
20613	11	16	17	17	21	22	23
20616	23	25	25	25	26	27	28
20622	3	3	4	4	4	4	4
20632	2	2	2	2	2	2	2
20637	18	18	20	20	20	20	19
20640	28	28	30	30	30	30	32
20645	1	1	1	1	1	1	1
20646	93	94	96	96	98	99	102
20658	3	3	3	3	4	4	4
20662	9	9	9	10	10	11	11
20664	8	8	8	9	9	11	13
20675	7	7	7	7	7	7	7
20677	9	9	9	9	10	10	11
20693	3	3	3	3	3	3	2
20695	44	46	47	47	48	49	51

COVID-19 Positive Case rate per 1,000 residents as of May 15, 2020:

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

COVID-19 Positive Case Rate per 1000 residents for each zip code with 5 or more confirmed cases:	4/30	5/5	5/6	5/8	5/11	5/12	5/13	5/14	5/15
20601	3.188	4.057	4.098	4.512	4.926	5.009	5.175	5.464	5.630
20602	3.967	4.688	4.849	5.249	5.610	5.690	5.730	5.810	6.251
20603	5.316	5.834	6.041	6.490	6.801	6.801	6.835	6.973	7.181
20611	2.783	2.783	2.783	2.783	2.783	2.783	2.783	2.783	2.783
20616	2.732	3.756	3.927	4.098	4.268	4.268	4.439	4.610	4.781
20622	0	1.429	1.429	1.429	1.633	1.633	1.633	2.041	2.041
20637	2.766	3.135	3.319	3.504	3.688	3.872	3.872	3.688	3.688
20640	2.108	2.683	2.778	2.874	2.970	2.970	2.970	2.970	3.162
20646	3.759	4.817	4.923	4.976	5.082	5.082	5.188	5.241	5.400
20662	3.067	3.067	3.067	3.067	3.067	3.408	4.090	4.431	4.431
20664	1.674	2.678	2.678	3.013	3.013	3.348	3.348	4.017	4.687
20675	3.591	4.189	4.189	4.189	4.189	4.189	4.189	4.189	4.189
20677	2.153	3.445	3.876	3.876	3.876	3.876	4.307	4.307	2.737
20695	5.446	6.476	6.623	6.918	7.507	7.507	7.654	7.801	8.095

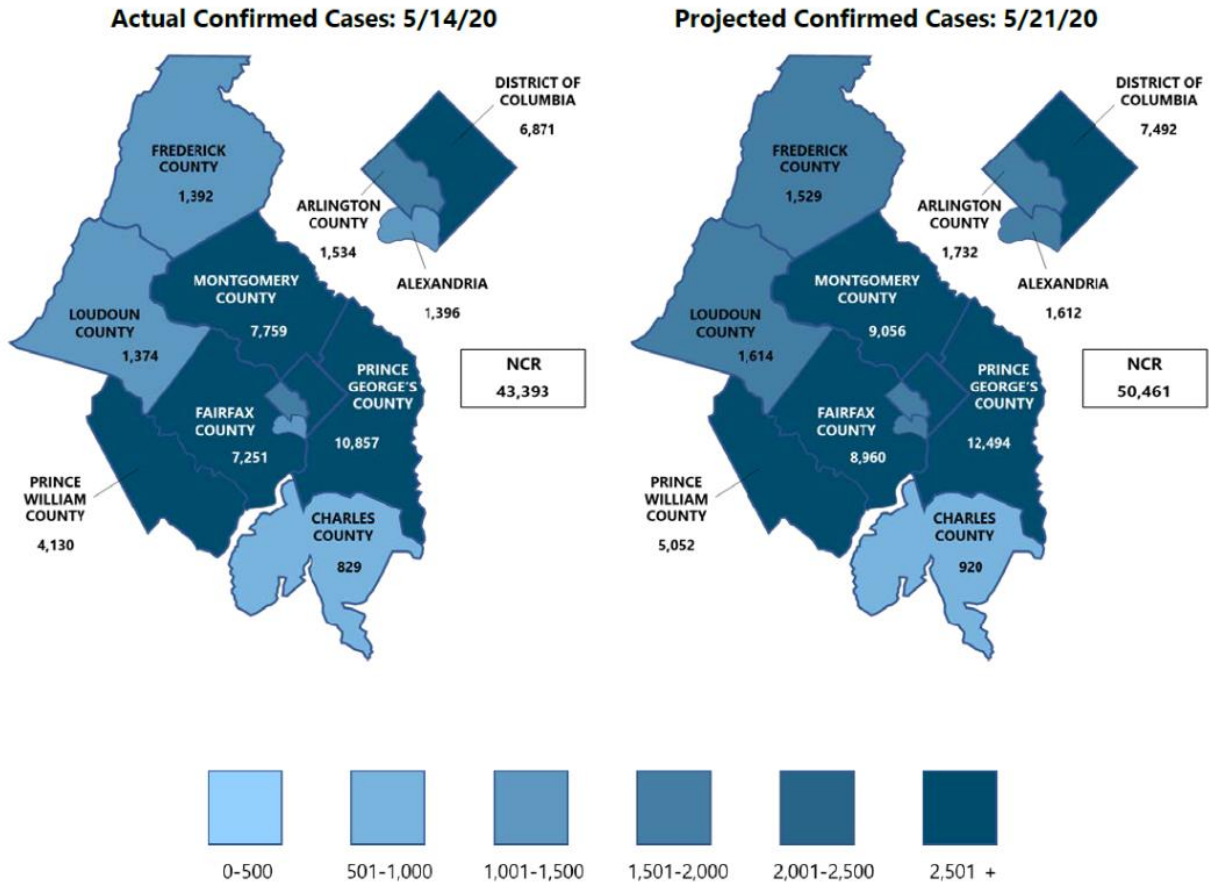
The Number of COVID-19 Positive Confirmed Cases by Date for the Top 5 Most Impacted Zip Codes



MISCELLANEOUS

ADDITIONAL INFORMATION: This includes the following:

Epidemiologist's Note: Here are the NCR MWCOG case model and medical demand projections for May 15th.



Medical Demand Projections:

	Actual Confirmed Cases On:			Projected Cases (Hospitalized) [ICU] {Ventilator} For:											
	5/12	5/13	5/14	5/21			5/28			6/4					
Washington DC	6,584	6,736	6,871	7,492	(1,498)	[360]	{180}	7,972	(1,594)	[383]	{191}	8,343	(1,669)	[400]	{200}
Charles Co., MD	778	796	829	920	(184)	[44]	{22}	993	(199)	[48]	{24}	1,053	(211)	[51]	{25}
Frederick Co., MD	1,321	1,347	1,392	1,529	(306)	[73]	{37}	1,641	(328)	[79]	{39}	1,734	(347)	[83]	{42}
Montgomery Co., MD	7,283	7,548	7,759	9,056	(1,811)	[435]	{217}	10,147	(2,029)	[487]	{244}	11,070	(2,214)	[531]	{266}
Prince George's Co., MD	10,240	10,459	10,857	12,494	(2,499)	[600]	{300}	13,855	(2,771)	[665]	{333}	14,994	(2,999)	[720]	{360}
Arlington Co., VA	1,460	1,499	1,534	1,732	(346)	[83]	{42}	1,893	(379)	[91]	{45}	2,026	(405)	[97]	{49}
Fairfax Co., VA	6,748	7,035	7,251	8,960	(1,792)	[430]	{215}	10,273	(2,055)	[493]	{247}	11,297	(2,259)	[542]	{271}
Loudoun Co., VA	1,283	1,339	1,374	1,614	(323)	[77]	{39}	1,818	(364)	[87]	{44}	1,991	(398)	[96]	{48}
Prince William Co., VA	3,792	4,036	4,130	5,052	(1,010)	[243]	{121}	5,816	(1,163)	[279]	{140}	6,456	(1,291)	[310]	{155}
Alexandria, VA	1,305	1,349	1,396	1,612	(322)	[77]	{39}	1,793	(359)	[86]	{43}	1,945	(389)	[93]	{47}
NCR	40,794	42,144	43,393	50,461	(10,092)	[2,422]	{1,211}	56,201	(11,240)	[2,698]	{1,349}	60,909	(12,182)	[2,924]	{1,462}

	Actual Confirmed Cases On:			Projected Cases For:								
	5/12	5/13	5/14	5/15	5/16	5/17	5/18	5/19	5/20	5/21	5/28	6/4
Washington DC	6,584	6,736	6,871	6,970	7,066	7,157	7,246	7,331	7,413	7,492	7,972	8,343
Charles Co., MD	778	796	829	843	857	870	883	896	908	920	993	1,053
Frederick Co., MD	1,321	1,347	1,392	1,413	1,434	1,454	1,474	1,493	1,511	1,529	1,641	1,734
Montgomery Co., MD	7,283	7,548	7,759	7,960	8,155	8,344	8,529	8,709	8,885	9,056	10,147	11,070
Prince George's Co., MD	10,240	10,459	10,857	11,112	11,358	11,598	11,831	12,058	12,279	12,494	13,855	14,994
Arlington Co., VA	1,460	1,499	1,534	1,565	1,595	1,624	1,652	1,679	1,706	1,732	1,893	2,026
Fairfax Co., VA	6,748	7,035	7,251	7,527	7,791	8,043	8,286	8,519	8,744	8,960	10,273	11,297
Loudoun Co., VA	1,283	1,339	1,374	1,411	1,447	1,482	1,516	1,550	1,582	1,614	1,818	1,991
Prince William Co., VA	3,792	4,036	4,130	4,274	4,414	4,549	4,680	4,807	4,931	5,052	5,816	6,456
Alexandria, VA	1,305	1,349	1,396	1,430	1,462	1,494	1,524	1,554	1,584	1,612	1,793	1,945
NCR	40,794	42,144	43,393	44,505	45,579	46,615	47,621	48,596	49,543	50,461	56,201	60,909

On a state level, the majority of cases surrounding the two large cities of DC and Baltimore. That is where the majority of the state population lives. Individuals in those areas live in urban settings where they live in closer proximity. The cases then disperse as you move into the western, eastern, and southern regions of the state.

The same trend can be seen on a regional level. For Southern Maryland, the towns with the highest case rates are also the towns with the highest population sizes. Those include Waldorf, La Plata, Prince Frederick, and Lexington Park.

For Charles County, the majority of the population lives in the three zip codes of Waldorf. Those areas have the highest case counts at this time. In addition, there is a clear pattern of cases along the Rt 301 corridor through the county. (Waldorf, White Plains, and La Plata) That is the region that is suburban, where the county businesses lie.

Respectfully submitted by Charles County PHEP

HOSPITAL BRIEF 5-15-2020

- 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 = 64
- 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 = 6
- Confirmed positive cases of COVID-19 patient admissions = 14
 - Of the total fourteen (14) COVID-19 positive patients, four (4) of the patients are located in the ICU. Ten (10) are located in the 3 South dedicated COVID-19 unit.
- PUI admissions = 6
- Ventilated COVID-19 positive patients = 7
- Ventilators not in use = 13
- COVID-19 related deaths = 34 (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 Thursday, 05/14/2020 = Two (2) known COVID positive patients.
- CMCR total Lab tests to date = 1287
- Total COVID-19 positive Lab results to date = 263

Intelligence Briefing 5-15-2020
 COVID Charles County
 Week 9

Updated Infection Numbers: As of 1005 hrs.

Total worldwide: 4,474,757 **+91,397 since the 5-14-20 brief.**

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

5-5/6	5-6/7	5-7/8	5-8/9	5-9/10	5-10/11	5-11/12	5-12/13	5-13/14	5-14/15
79,091	90,538	90,975	107,394	79,665	68,472	93,341	82,755	85,091	91,397

Total fatalities worldwide: 303,304 **+5,109 since the 5-14-20 brief**

Total confirmed cases in the US: 1,419,863 **+28,625 since the 5-14-20 brief**

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

5-5/6	5-6/7	5-7/8	5-8/9	5-9/10	5-10/11	5-11/12	5-12/13	5-13/14	5-14/15
23,841	24,616	27,883	34,128	20,823	17,276	21,449	21,607	18,383	28,625

Total fatalities in US: 85,964 **+1,820 since 5-14-2020**

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

Total confirmed cases in State in of MD: 36,986 **+1083 since the 5-14-20 brief**

Total tested in the State of MD: 145,840 **+3,289 over 5-14-20**

Percent of those test that test positive: **25.3%**

Total Fatalities in State of MD: 1,792 **+44 change since the 5-14-20 brief**

Number of probable deaths: 119

Total Ever Hospitalized: 6,679

Persons currently hospitalized: **1,496 -42 since 5-13-2020**

5-2/3	5-3/4	5-4/5	5-5/5	5-6/7	5-7/8	5-8/9	5-9/10	5-10/11	5-11/12	5-12/13	5-13/14	5-15/16
-22	+14	+44	+14	-24	-33	-9	-25	-96	+19	-13	-12	-42

First Responder Numbers in Charles County: NUMBERS AS OF 5-15-2020 @1230

7 Quarantine: means exposed and they can't come to work **+1 since last report**

2 Self Isolation: means sick or tested positive **-1 since the last report**

Weather:

Sat 80-57 sun, Sunday 71-58 clouds, Monday 76-55 storms

Local:

No stores were visited this AM
County Commissioners vote 3-2 to keep Charles County closed until 5-29-2020
Protest planned from 1700-1830 at the County Government Building

Maryland Update:

The State of Maryland issued an emergency order that allows court clerks to issue marriage licenses and conduct marriage oaths remotely. [Maryland](#)
Maryland stay at home order lifted as of Friday at 1700
ReOpenMD protest scheduled in Annapolis Friday 1430 - 1700. Locations listed are Church Circle and or State Circle in Annapolis.

Region:

Over 42,593 cases in the NCR as of 1000 5-15-2020,
72,529 cases in Maryland, DC, and Virginia as of 1100 on 5-15-2020.
Everbridge is hosting a two-day virtual symposium Coronavirus: The Road to Recovery, May 20-21 from 11:00AM-3:00PM (1100-1500), where comprehensive presentations will address strategic initiatives and key success factors for navigating the impacts of COVID-19 and preparing for the next phase of recovery – bringing employees back to work and citizens back to public spaces. [Everbridge](#)

National:

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

The CDC provided background information on several cases of a recently reported multisystem inflammatory syndrome in children (MIS-C) associated with COVID-19; and a case definition for this syndrome. CDC recommends healthcare providers report any patient who meets the case definition to local, state, and territorial health departments to enhance knowledge of risk factors, pathogenesis, clinical course, and treatment of this syndrome. This information was distributed via the CDC Health Alert Network. [CDC](#)

DHS continues to warn about the possibility of domestic terrorism (see attached)
Meat processing is at 73% capacity, creating a backlog of 300,000 pigs that need to be depopulated. Depopulation will need to begin by May 18. FEMA Region V (May 13)
Gasoline demand has risen nearly 5%, causing gasoline prices to rise as supply remains low. The industry has raised refinery utilization to 70.5% suggesting that gas prices will continue to rise with increased consumer demand until supply reaches parity. NBEOC (May 12)

Local critical infrastructure:

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

Predications/ Analysis:

- The cascading effects of the prolonged closures, along with community fear and anxiety have led to unintended consequences that we likely have not explored. The recent reports of increasing measles outbreaks due to children not being inoculated likely due to fear and limited availability is a terrific example. It would be wise if task forces or committees were established to better identify, develop proactive frameworks for future responses, and potential solutions prior to full reopening.
- Pediatric Multi-system Inflammatory Syndrome is receiving increasing media coverage (100+ cases in NY, 3 at WDC Children's). We are likely to see increased reports from fearful parents who have limited knowledge but high fear. Factual information spread is needed, ongoing and open channel communication with local pediatricians must start now, redistribution of PPE may be needed, and we should likely begin adding them to EOC operations.
- 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 inequity and racial disproportionality of infections is causing increased polarization, anger, 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” (Nutley and Marcus, 2019, Harvard Business Review)

Respectfully submitted by Jason Stoddard

Law Enforcement Branch Briefing

COVID-19 Charles County IMT

May 15th, 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:

- 1 Sworn Officer quarantined
 - 1 Officer who had contact with COVID positive person off-duty, estimated return date of 05/27/20.
- 2 Sworn Officers isolated
 - Officers isolated based on symptoms and doctor order for testing.
- 2 Correctional Officer quarantined
 - 1 Correctional Officer who has family members who is sick with symptoms. Estimated return date - 05/19/20.
 - 1 Correctional Officer who has family member with a positive test. Estimated return date - 05/25/20.
- 0 Correctional Officers isolated.
- 0 civilians quarantined.

- 0 civilians isolated.

Charles County Detention Center Population:

- 117 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: 57

Warnings: 54

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 5-15-2020
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:

Thursday, 5/14/20 CCPS served 3819 meals at the 11 meal distribution sites. This is the lowest numbers that we have had since we opened all 11 sites. The total is -822 from the meals served on Wednesday, 5/13/20.

Closure:

Nothing new to report.

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:

Nothing new to report.

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:

The CDC has released a flowchart with prerequisites that schools should consider while deciding whether to reopen for Fall 2020. The very first column asks, "Are you able to screen students

and employees upon arrival for symptoms and history of exposure?” If the answer is “NO”, then unable to open. For CCPS that would be screening approximately 30,000 people daily.

Respectfully submitted by Jason Stoddard and Michael Meiser

SCHOOLS DURING THE COVID-19 PANDEMIC



The purpose of this tool is to assist administrators in making (re)opening decisions regarding K-12 schools during the COVID-19 pandemic. It is important to check with state and local health officials and other partners to determine the most appropriate actions while adjusting to meet the unique needs and circumstances of the local community.

Should you consider opening?

- ✓ Will reopening be consistent with applicable state and local orders?
- ✓ Is the school ready to protect children and employees at [higher risk](#) for severe illness?
- ✓ Are you able to screen students and employees upon arrival for symptoms and history of exposure?

ANY
NO



ALL
YES



Are recommended health and safety actions in place?

- ✓ Promote [healthy hygiene practices](#) such as [hand washing](#) and [employees wearing a cloth face covering](#), as feasible
- ✓ Intensify [cleaning, disinfection](#), and ventilation
- ✓ Encourage [social distancing](#) through increased spacing, small groups and limited mixing between groups, if feasible
- ✓ Train all employees on health and safety protocols

ANY
NO



ALL
YES



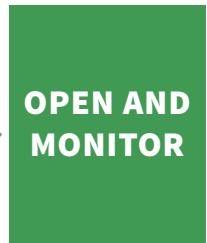
Is ongoing monitoring in place?

- ✓ Develop and implement procedures to check for [signs and symptoms](#) of students and employees daily upon arrival, as feasible
- ✓ Encourage anyone who is sick to [stay home](#)
- ✓ Plan for if students or employees get sick
- ✓ Regularly communicate and monitor developments with local authorities, employees, and families regarding cases, exposures, and updates to policies and procedures
- ✓ Monitor student and employee absences and have flexible leave policies and practices
- ✓ Be ready to consult with the local health authorities if there are cases in the facility or an increase in cases in the local area

ANY
NO



ALL
YES





Charles County Volunteer Firemen's Association, Inc.

Post Office Box #21, La Plata, Maryland 20646

May 15th, 2020

Re: Volunteer Fire/EMS Brief

Items Being Worked On:

- Reduction of Force Policy – *Information gathering occurring.*
- After Action Items being compiled.

Stations/Apparatus:

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

Personnel – 1 Members across 1 Stations:

- EMS Station 3 – 1 Quarantined due to a Family Member testing positive.

Incidents/Call Volume:

- No Major Incidents to Report related to COVID-19
- Yesterday's EMS Call Volume was average, and Fire Call Volume was below average
52 Ems Related Incidents ----- 13 Fire Related Incidents

Other Information:

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

Respectfully Submitted,

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