

Charles County COVID-19



Incident Action Plan



From
5/27/20
8:00

To
5/30/20
8:00

OPERATIONAL PERIOD

INCIDENT OBJECTIVES (ICS 202)

1. Incident Name Charles County COVID-19	2. Operational Period	Date From: 5/27/20 Date To: 5/30/20 Time From: 8:00 Time To: 8:00			
3. Objectives					
<p>A. Maximize the safety and overall health and well-being, including mental health of the residents, county employees, and responders, throughout this incident. Minimize the effects resulting from this incident on all personnel.</p> <p>B. Conduct surveillance of COVID-19 cases in collaboration with the health department, hospital, physicians, and other health care providers.</p> <p>C. Maintain timely, accurate and uniform communications with residents, employees and first responders as well as partners in the tri-County and National Capital Region and the state of Maryland.</p> <p>D. Prepare for and handle the human reaction crisis contingencies in long terms.</p> <p>E. Prepare for long term order maintenance.</p> <p>F. Prepare for and sustain our communities' hierarchy of needs throughout this incident.</p> <p>G. Ensure all practical steps to "Slow the Spread" of transmission of COVID-19.</p> <p>H. Determine trigger points for Continuity of Operations for all agencies, including government, public safety, schools, hospital, and other critical infrastructure systems.</p> <p>I. Prepare for the New Normal.</p>					
4. Operational Period Command Emphasis					
<p>After Action Analysis- Send in your 5 Ups and 5 Downs to DESPlanning@CharlesCountyMD.gov</p>					
<p>General Situational Awareness</p> <p>"Complacency is the silent killer. Stay aware, stay in focus and stay safe."</p>					
<p>5. Site Safety Plan Required? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Approved Site Safety Plan(s) Located at:</p>					
<p>6. Attachments (check if attached)</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; padding: 5px;"> <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"/> Forcast/Tides/Currents </td> <td style="width: 33%; padding: 5px; text-align: center;"> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </td> <td style="width: 33%; padding: 5px; text-align: center;"> <hr/><hr/><hr/><hr/><hr/> </td> </tr> </table> <p style="text-align: right; margin-top: -10px;">ICS 214</p>			<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"/> Forcast/Tides/Currents	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<hr/> <hr/> <hr/> <hr/> <hr/>
<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"/> Forcast/Tides/Currents	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<hr/> <hr/> <hr/> <hr/> <hr/>			
<p>7. Prepared by: Name: <u>Joe Hoffmaster</u> Position/Title: <u>PSC</u> Signature: _____</p>					
<p>8. Approved by Incident Commander: Name: <u>Michelle Lilly</u> Signature: _____</p>					
ICS 202	IAP Page <u>2</u>	Date/Time: _____ May 28, 2020 @14:00			

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name Charles County COVID-19		2. Operational Period Date From: 5/27/20 Date to: 5/30/20 Time From: 8:00 Time to: 8:00		
3. Incident Commander and Staff		7. Operations Section		
UC	Dr. Howard Haft	Chief		
UC	Michelle Lilly	Deputy		
Deputy	Melanie Gardiner			
Deputy	Tony Rose			
Safety Officer	John Filer	a. Branch I	Public Health	
Public Information Office	Jennifer Harris	Branch Director	Ranston Harvey	
Intell Officer	Jason Stoddard	Deputy	Mary Lilly	
4. Agency Representative		DSS		
Agency	Name	Liaison Officer	Tom Brown	Robbie Jones
Intell officer Deputy	Mike Meiser	Hospital	Bill Grimes	John Filer
Lifestyles	Sandy Washington	Nursing Homes	Tiffany Brown	
Public Schools	Mike Meiser	Health Care Providers	Melanie Gardiner	
		Rehab Centers	Eddie Kratzer	
		Assisted Living	Rosalinda Horton	
		Funeral Services	Cataria Patterson	
		b. Branch II	Public Safety	
		Branch Director	Mark Kaufmann Jr.	
		Deputy	Scott Herbert	D J Mills
		DES EMS	Steve Finch	
		Vol EMS	Andrew Spalding	Mitchell Lewis
		Vol Fire	Scott Herbert	
		Logistics	Scott Herbert	
5. Planning Section		c. Branch III	Law Enforcement	
Chief	Joe Hoffmaster	Branch Director, CCSO	Chris Schmidt	
Deputy	Bill Smith	Deputy, CCSO	Cari Baker	
Resource Unit		La Plata Police	Chris Becker	
Situation Unit	Jen Adams	MD State Police	Thomas Quade	
Documentation Unit	Bill Smith	DNR	Catherine Meddelin	
Demobilization Unit		MdTA	Brian Lawrence	
Human Resources				
Technical Specialists	(name / specialty)	d. Branch IV	Infrastructure	
		Branch Director		
		Deputy		
		SMECO	Jennifer Raley	
		Grocery		
6. Logistics Section		Propane		
Chief	Nick Ellis	Natural Gas		
Deputy	need to fill			
Support Branch				
Donations	Ed Tucker			
Supply Unit				
Facilities Unit	Nick Ellis	10. Finance Section		
Ground Support Unit		Chief	Jennifer Adams	
Service Branch		Deputy		
Service Branch Dir.		Time Unit		
Communications Unit	Jeffrey Clements	Procurement Unit		
Medical Unit		Comp/Claims Unit		
Security Unit		Cost Unit		
Food Unit				
9. Prepared by: Name: Joe Hoffmaster		Position>Title: PSC	Signature:	
ICS 203	IAP Page 3	Date/Time:	May 28, 2020 @ 14:00	

ORGANIZATION ASSIGNMENT LIST (ICS 203)

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3. Incident Commander and Staff		7. Operations Section	
UC	Dr. Howard Haft	Chief	
UC	Michelle Lilly	Deputy	
Deputy	Melanie Gardiner		
Deputy	Tony Rose		
Safety Officer	John Filer	a. Branch V	Governance
Public Information Office	Jennifer Harris	Donna Fuqua	Linda Warner
Intell Officer	Jason Stoddard		
4. Agency Representative		Charles County Govern.	Michele Lilly
Agency	Name	Town of LaPlata	Chris Becker
Intell officer Deputy	Mike Meiser	Town of Indian Head	Ryan Hicks
Lifestyles	Sandy Washington		
CC Public Schools	Michael Meiser		
		b. Branch VI	Business
		Branch Director	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 28, 2020 @14:00

COMMUNICATIONS LIST (ICS 205A)

1. Incident Name Charles County	2. Operational Period: COVID-19	Date From: Time From:	5/27/20 8:00	Date to: Time to:	5/30/2020 8:00
3. Basic Local Communications Information:					
Name - Last	Name-First	Representing	Email	Phone	
Adams	Jennifer	DES FSC	AdamsJen@Charlescountymd.gov		
Baker	Cari	CCSO	bakerce@ccso.us		
Becker	Chris	La Plata Police	cbecker@townoflaplata.org		
Brown	Darrell	Business Director Econ Dev	Brownd@charlescountymd.gov		
Cress	Lauri	Charles Regional Medical Center	lauri.cress@umm.edu		
Ellis	Nick	DES- Logistics	DESLogistics@charlescountymd.gov		
Filer	John	DES- Liaison	FilerJ@charlescountymd.gov		
Finch	Stephen	DES	FinchS@charlescountymd.gov		
Fuqua	Donna	PIO	Fuquad@CharlesCountyMD.gov		
Harris	Jennifer	PIO	HarrisJ@CharlesCountyMD.gov		
Hoffmaster	Joe	Planning Section	DESPlanning@charlescountymd.gov HoffmasJ@CharlesCountyMD.gov		
Kaufmann	Mark Jr	PS Branch Dir. Vol Fire Chief	markeng1trk@hotmail.com		
Konschak	Matt	NSWC IHD	matthew.konschak@navy.mil		
Lilly	Michelle	CCDES Director, Unified Command	LillyM@charlescountymd.gov		
Lilly	Mary	C C Dept. of Health	Mary.Lilly@maryland.gov		
Lowry	Susan	MDH	suzan.lowry@maryland.gov		
Mills	D.J.	Vol Fire- Special Operations Chief	djm31_9@hotmail.com		
O'Malley Simpson	Katie	CCBOE PIO	Komalley@ccboe.com		
Proctor	Destiny	DES	proctord@charlescountymd.gov		
Quade	Thomas	MSP	Thomas.Quade@maryland.gov		
Rose	Tony	DES Deputy Director, Unified	RoseT@charlescountymd.gov		
Russell	Cindy	DSS	cindy.russell@maryland.gov		
Schmidt	Louis Chris III	CCSO	schmidtlo@ccso.us		
Seaman	Kevin	CCEMS	seamank@charescountymd.gov		
Smith	Bill	CCVFA/CCAEMS	Smithb@ccvfireems.org		
Spalding	Andrew	Volunteer EMS Chief	chiefems@ccvfireems.org		
6. Prepared by: Name: <u>Joe Hoffmaster</u> Title: <u>PSC</u> Signature: _____					
ICS 205A	IAP Page <u>5</u>	Date/Time: <u>May 28, 2020 @14:00</u>			

COMMUNICATIONS LIST (ICS 205A)

1. Incident Name Charles County	2. Operational Period: COVID-19	Date From: Time From:	5/27/20 8:00	Date to: Time to:	5/30/2020 8:00
3. Basic Local Communications Information:					
Name - Last	Name-First	Representing	Email	Phone	
Stoddard	Jason	Intell	jstoddard@ccboe.com		
Ranston	Harvey	CCDOH	Ranston.harvey@maryland.gov		
Laschatt	Lisa	CCDOH	lisa.laschatt@maryland.gov		
Meiser	Michael	CCPS	mlmeiser@ccboe.com		
EOC- CC		CCEOCC	DESEOC@charlescountymd.gov		
Cherry	Lori	LOGS- Deputy	Cherry@charlescountymd.gov		
Herbert	Scott	PS LOGS	sherbert@hvdems.org		
Haft	Howard	CCDH	Howard.haft@maryland.gov		
Raley	Jennifer	SMECO	Jennifer.Raley@SMECO.Coop		
Farr	Courtney	SMECO	Courtney.Farr@SMECO.Coop		
Law	Natasha	SMECO	Natsha.Law@SMECO.Coop		
Teleconference #			1-872-240-3212		
Tucker	Ed	Donations	DESDonations@Charlescountymd.gov Etucker@Charlescountymd.gov		
Barnes	Raena	DH-Liaison	raena.barnes@maryland.gov		
Wolf	Theresa	PH-DSS	Therese.Wolf@maryland.gov		
Higgins	David	Safety Officer-Assistant	HigginsD@charlescountymd.gov		
Jones	Robbie	HD-Liaison	JonesRob@Charlescountymd.gov		
Hicks	Ryan	Indian Head	ryan@townofindianhead.org		
Lewis	Mitchell	Volunteer EMS Chief, Assistant	mlewis@WaldorfVFD.com		
Mott	Robert (Bob)	VEIP Manager Document Facil.	capt302a@gmail.com		
Rands	Ray	VEIP Manager	raymond.rands@maryland.gov		
Edge	Bill	CCSO-Safety			
Peer	Support	Peer Support Team	DESPeersupport@charlescountymd.gov		
Courtney	Shannon	Peer Support Team Leader	Shannonc@charlescountymd.gov		

SAFETY MESSAGE/PLAN (ICS 208)

1. Incident Name Charles County COVID-19	2. Operational Period	Date From: 5/27/20 Time From: 8:00	Date To: 5/30/20 Time To: 8:00
3. Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan: <p style="text-align: center;">"Complacency is the silent killer. Stay Aware, stay in Focus and stay Safe."</p>			
<p>1. Total identified PUI's transported as of 5/28: 826 Total # of patients testing positive : 138</p> <p>2. PPE stockpiles remain stable with an estimated supply range of 10+ days based on current call volumes.</p> <p>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.</p> <p>4. As this is a rapidly changing landscape, leaders should review any changes with their personnel each morning.</p> <p>5. Speical Order 2020-04 Version 1.1 was released on 05-05-2020. New guidelines for personnel at the beginning of their shift, end of their shift and at the station.</p> <p>6. Personnel who report having a fever, sore throat, cough or other respiratory related symptoms should stay at home and self-isolate until they are symptom free for a period of 72 hours.</p> <p>7. The County's Peer Support Team has been activated and will make weekly wellness checks with our County's first responders.</p> <p>8. Please remember that PPE caches are for EVERYONE. We are all in this TOGETHER so there is NO career and volunteer PPE caches.</p> <p>9. Special Order 2020-03 V2.1 was updated on 05-06-20. New guidelines added on employee return to work procedures.</p> <p>10. Ambulance and cruiser decon services at CRMC have been extended through June 30th.</p>			
Site Safety Plan(s) Located At: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
5. Prepared by: Name: <u>John Filer</u> Title: <u>Safety Officer</u> Signature: _____			
ICS 208	IAP Page <u>7</u>	Date/Time: <u>May 28, 2020 @14:00</u>	

ACTIVITY LOG (ICS 214)

ACTIVITY LOG (ICS 214)



Safety Officer's Report

Charles County EOC

05-28-20

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

Today's Safety Message: "Complacency is the silent killer. Stay aware, stay in focus and stay safe."

Total number of PUI's transported to date: 826

Total number of patients transported by EMS testing + for COVID: 138

Total number of first responders on self-isolation: 0

Total number of first responders on quarantine: 0

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

Total number of first responders out for COVID related mental health: 1

Total number of fire stations sanitized: 6

Daily Estimated PPE Burn Rate: 15 sets/day



10425 Audie Lane
La Plata, MD 20646



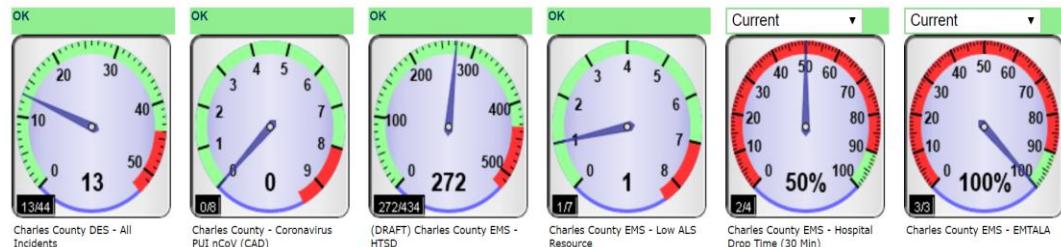
301-399-1143



DESSafety@charlescountymd.gov



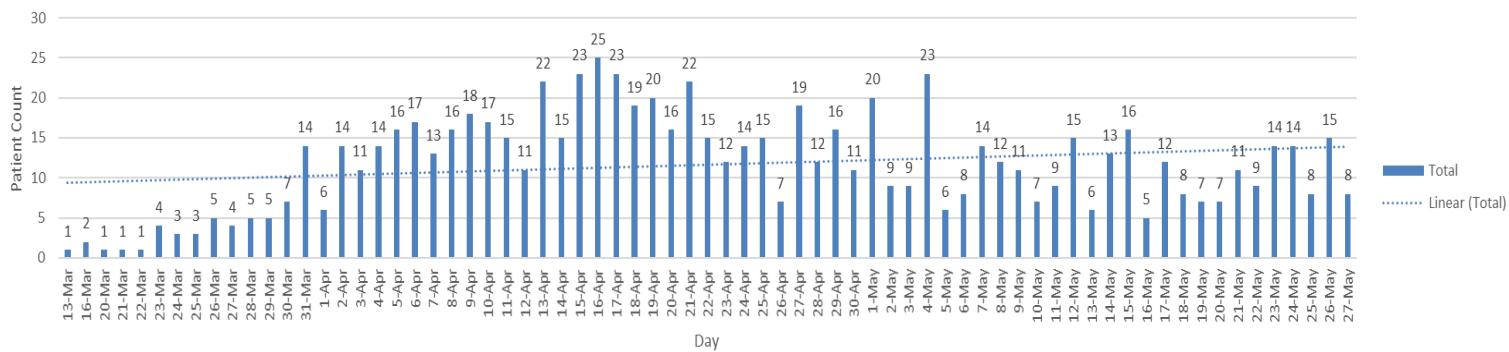
www.charlescountymd.gov



ePCR

Count of Incident Number

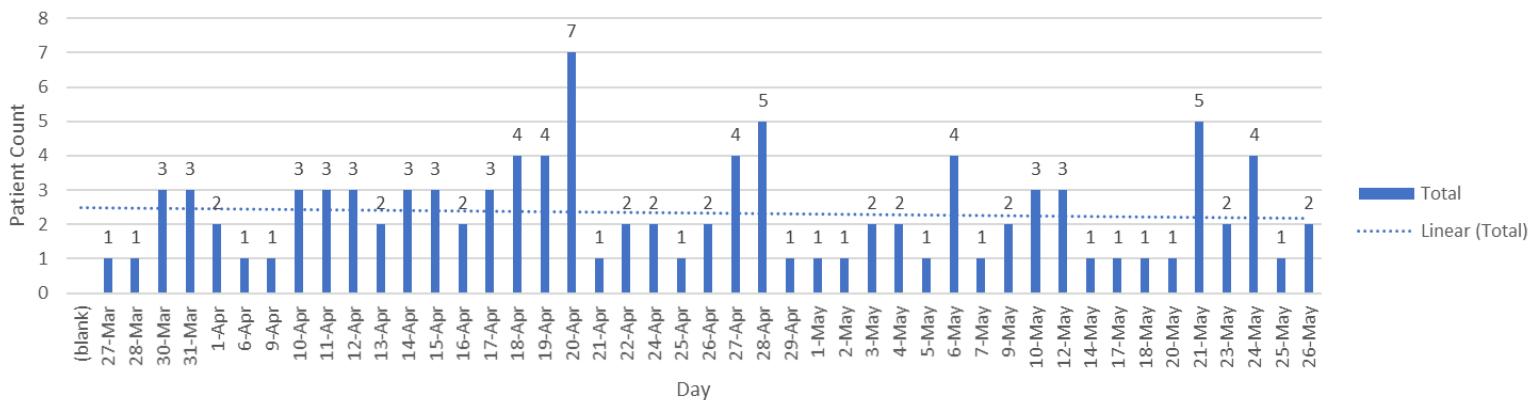
PUI Incidents - 03-13-20 thru 05-28-20 @ 0924



Sent to Queue

Count of Patient Name

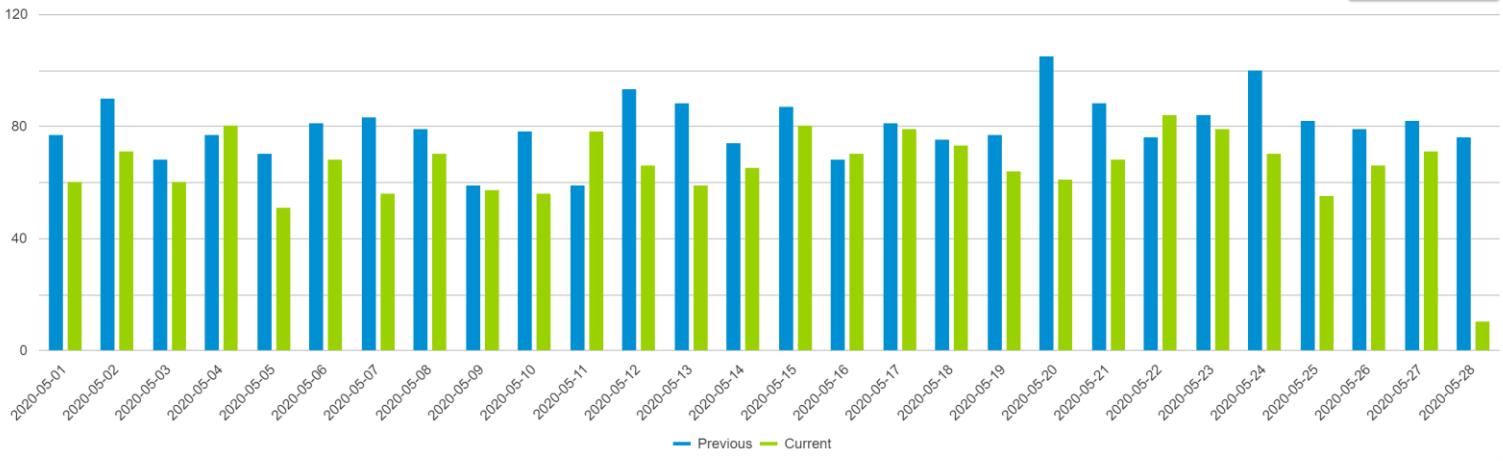
YTD COVID+ Patients Transported by EMS



Date of EMS Transport ▾

Count of Incident Reported

Compare To: One Year ▾





**Complacency
is the silent
killer.**

Stay aware, stay in focus and stay safe!



PUBLIC HEALTH BRANCH BRIEFING COVID-19 PANDEMIC RESPONSE May 27, 2020

GENERAL REPORTING INFORMATION

INFECTIOUS DISEASE

CASE COUNT—CHARLES COUNTY

As of 5/27/2020, total case count for Charles County is 1,011.

- *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 Phase I re-opening multimedia campaign.

PARTNER/STAKEHOLDER OUTREACH

LTC/AL

- The Long-Term Care and Assisted Living call will be held May 28 at 3 p.m. by CCDOH nurse liaisons.

ALL-PARTNER

- Dr. Haft hosted a Phase I reopening coalition webinar today from 11-12 p.m. by Dr. Haft.

EPI SURVEILLANCE PROFILE FOR STATE

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

- 1) Latest case counts – total: 48,423 (213,672 negative)
- 2) New cases: 736
 - a) Age distribution:
 - i) under 18 years - 2 %
 - ii) in 19-64 age range 74%
 - iii) in 65+ age range 24%
 - b) Geographic distribution:
 - i) National Capital 53%
 - ii) Baltimore Metro area 41%
 - iii) Eastern Shore 3%
 - iv) Southern 2%
 - v) Western 1%
 - c) Of cases, 53% female; 47% male
 - d) Hospitalizations (23 last 24 hours); total current 1,338; total ever 8,281
 - e) Deaths -- Total 2,270 (53 last 24 hours)
 - f) Release from isolation – 3,401

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

- 5 requests received and filled, plus 2 filled on an emergency basis (2 Dentists, 3 LTCs, 1 Other – serves community meals on Fridays and 1 Congregate home).

VOLUNTEERS

MARYLAND MEDICAL RESERVE CORPS

- 1 new responder was accepted into MMRC today

CAREGIVER SERVICE CORPS

- Nothing new to report.

TESTING

VEIP TESTING SITE UPDATE

- Tested to Date: 1,321
- VEIP Testing on May 26 – 32 appointments in CRISP. Facilitated 19 Wa
- At this time, Waldorf VEIP remains an appointment only site. Please do not advertise that we are testing ‘no appointments’. 52 patients with appointments were tested and 19 ‘no appointments’ were tested.
- The ‘no appointment’ situation is being discussed/determined at state for sites that were not announced as the walk-up sites.

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 5/27 at 900 am, total case count for Charles County was 1011 cases. (There was a total of 7 new cases in the last 24 hours.)

There have been 70 confirmed deaths associated with COVID-19. This equates to 6.9% of total confirmed cases. The Charles County death rate of 6.9% is higher than the MD state average death rate of 4.7%. However, it should be noted that the majority of deaths in Charles County are associated with outbreaks in skilled nursing facilities. The death rate for Charles County is going down from a high of 7.3% now that the outbreaks at skilled nursing facilities have been contained and/or reduced. There has been a small uptick in nursing homes related deaths due to the current outbreak at the Charlotte Hall Veterans Home where some Charles County residents reside.

There was 1 probable COVID-19 death. COVID-19 is listed as the cause of death, but laboratory testing has not yet confirmed.

Average age of fatalities: 77.3 years

Age Distribution of Fatalities:

- 0-39 years: 0
- 40-69 years: 14 (19.7%)
- 70-79 years: 31 (43.7%)
- 80+ years: 26 (36.6%)

Gender breakdown among fatalities: 44 or 62.0% Female, 27 or 38.0% Male

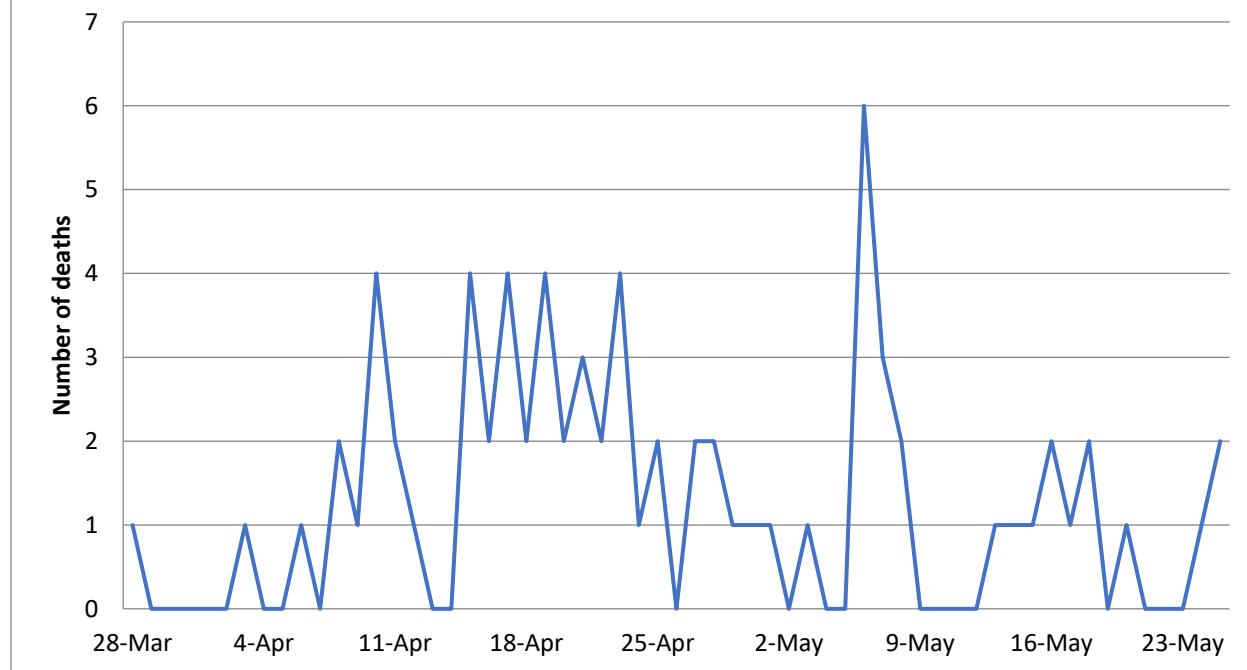
Racial breakdown among fatalities:

- 43.7% Non-Hispanic White
- 46.5% Non-Hispanic Black
- 4.2% Non-Hispanic Asian
- 4.2% Hispanic
- 1.4% Unknown

Location of deaths:

- Hospital Inpatient: 60.6%
- Nursing Home: 25.4%
- Other/Home/Emergency Room/Outpatient: 14%

**Charles County COVID-19 Deaths by Date March
28-May 25, 2020**



- Number of negative lab results: 5410
- Positivity Rate: 15.7% (State positivity rate: 18.5%)
- Recovered and released from isolation: 270
- Partially recovered with improved symptoms: 58
- Known asymptomatic cases: 19
- 187 or 18.5% required hospitalization. Hospitalization rate is steadily decreasing. Peak in hospitalization rate coincided with the peak in the skilled nursing facility outbreaks.
- Among confirmed cases, 569 (56.3%) Female; 442 (43.7%) Male
- 13% Healthcare Workers
- 1.6% First Responders: EMS, Fire, Law Enforcement
- 27% have underlying health conditions
- Age range of positive COVID-19 cases: 0-100 years

Age Distribution for Charles County cases:

- Under 18 years: 28 (2.8%)
- 18-64 years: 790 (78.1%)
- 65+ years: 193 (19.1%)

Surveillance of ED Hospital Data and Urgent Care through ESSENCE

- ESSENCE data for urgent care utilization at Patient First in Waldorf had no alerts for Tuesday May 26th. Patient volume was 43 patients. Patient volume has increased over the last month since they began offering COVID-19 tests. All were discharged to home for self-care.
- On 5/26, 19 patients presented with ILI or at least one COVID-19 like symptoms (44% of total patient volume).
- Most ILI presented for a COVID-19 test (13/19).
- Diagnoses for ILI patients on Tuesday included contact with and exposure to other viral communicable diseases, encounter for screening for viral disease, acute pharyngitis, dyspnea (shortness of breath), cough, COVID-19, bronchitis with or without tracheitis, acute upper respiratory illness, and encounter for screening for respiratory tuberculosis.
- On 5/26, there were 8 “Visit of Interest” CDC Classifier tags. They were due to COVID-19 exposure to a positive case, and all cases presented for a COVID-19 test. There were no other CDC Classifier tags. They completed a total of 13 COVID-19 tests in their drive-up testing site on 5/26.

Surveillance of EMS call data and alerts

The epidemiologist monitors the Charles County DES First Watch trigger alerts. The number of daily trigger alerts for COVID-19 cases or COVID-19 persons under investigation was 19 for 5/26. PUI EMS call volume has some fluctuation but remains low.

- 5/23: 15
- 5/24: 15
- 5/25: 9
- 5/26: 19

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 5/27 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: 1011 cases on 5/27 at 9 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: 15 (1.5%)
- Black/African American: 400 (39.6%)
- White: 234 (23.1%)
- Other or 2+ races: 82 (8.1%)
- Data not available/Declined to Answer: 280 (27.7%)

Ethnicity Breakdown

- Hispanic 67 (6.6%)
- Non-Hispanic 624 (61.7%)
- Data not available/Declined to Answer: 320 (31.7%)

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: 56
- 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: 3
- Total currently hospitalized: 3
- Deaths: 48
- Pending tests for residents or staff at Skilled Nursing Facilities/Assisted Living Facilities: 3 residents, 92 staff
- The outbreak at Genesis Waldorf was closed on 5/4 after 14 days with no new positive cases among residents or staff. The outbreak at Sagepoint was closed on 5/19 after 14 days with no new positive cases among residents or staff.

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.*
- Genesis La Plata and Waldorf tested their staff on Friday, 5/15. There were 2 positive staff members at Genesis Waldorf and 3 positive staff at Genesis La Plata. One case was a previous positive and has not worked since the first positive test.
- Restore tested all of their staff on Friday, 5/22. We are still awaiting results.
- All Sagepoint and Genesis La Plata residents and staff will be tested this week by the National Guard.

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 (60.7%) 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 5/27 at 9 a.m. (*Zip code level data with counts less than 7 cases cannot be shared publicly and must remain confidential. NA: Not Available. Case rates per 1000 residents are not calculated for zip codes with less than 5 cases and for zip codes with small populations due to rate instability.*)

Confirmed cases by zip code:

Zip code:	Total number of positive cases	Number of new positive cases in the last 5 days	Number of new negative lab results in the last 5 days	Case Rate per 1000 residents
20601	176	16	61	7.162
20602	192	8	65	7.894
20603	246	6	79	8.561
20604	3	0	3	NA
20611	5	0	3	3.711
20613	23	0	0	NA
20616	38	6	14	6.488
20617	1	0	1	NA
20622	6	0	0	2.041
20625	0	0	4	NA
20632	2	0	3	NA
20637	24	2	13	4.610
20640	39	3	23	3.832
20645	2	0	2	NA
20646	123	5	61	6.458
20658	5	0	1	NA
20662	14	0	4	4.772
20664	17	0	11	6.026
20675	8	0	4	4.788
20677	11	0	6	4.737
20693	3	0	6	2.757
20695	59	2	25	9.126

- Charles County Cases Rates by Date

Case rates are only calculated for zip codes with 4 or more confirmed COVID-19 Cases.

COVID-19 Positive Case Rate per 1000 residents for each zip code with 5 or more confirmed cases:	5/18	5/19	5/20	5/21	5/22	5/27
20601	5.796	6.044	6.375	6.458	6.541	7.162
20602	6.652	6.932	7.213	7.453	7.534	7.894
20603	7.422	7.767	7.940	8.182	8.320	8.561
20611	2.783	2.783	2.783	2.783	3.711	3.711
20616	4.951	5.122	5.293	5.293	5.464	6.488
20622	2.041	2.041	2.041	2.041	2.041	2.041
20637	3.872	3.872	3.872	4.057	4.241	4.610
20640	3.257	3.449	3.449	3.545	3.545	3.832
20646	5.453	5.506	5.714	6.088	6.141	6.458
20662	4.431	4.722	4.772	4.772	4.772	4.772
20664	5.022	5.691	5.691	6.026	6.026	6.026
20675	4.788	4.788	4.788	4.788	4.788	4.788
20677	4.737	4.737	4.737	4.737	4.737	4.737
20695	8.537	8.537	8.537	8.684	8.831	9.126

Case Rates for Zip Codes Shared by Charles County and Prince George's County:

- 20607, Accokeek: 9.28
- 20613, Brandywine: 10.54

(These are two of the lowest rates in Prince George's County. These rates are much closer to Waldorf and White Plains case rates.)

Case rates for other Prince George's County Zip Codes that are near Charles County:

- 20623, Rosaryville: 9.48
- 20772, Upper Marlboro: 10.11
- 20744, Fort Washington: 11.04

MISCELLANEOUS

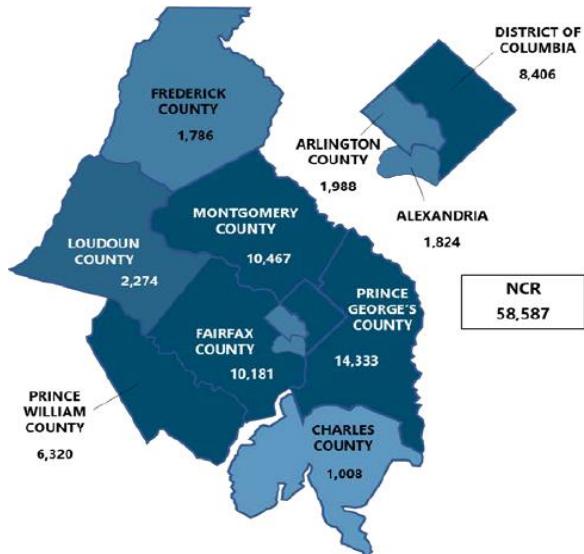
ADDITIONAL INFORMATION: Here are the MCR MWCOG case and medical demand projections for May 27th

	Actual Confirmed Cases On:			Projected Cases For:									
	5/24	5/25	5/26	5/27	5/28	5/29	5/30	5/31	6/1	6/2	6/9	6/16	
Washington DC	8,119	8,334	8,406	8,544	8,680	8,815	8,948	9,080	9,210	9,339	10,204	11,007	
Charles Co., MD	997	1,001	1,008	1,020	1,032	1,044	1,055	1,067	1,078	1,089	1,158	1,219	
Frederick Co., MD	1,731	1,746	1,786	1,809	1,832	1,856	1,880	1,905	1,930	1,955	2,145	2,359	
Montgomery Co., MD	10,111	10,291	10,467	10,726	10,987	11,250	11,516	11,784	12,055	12,328	14,313	16,429	
Prince George's Co., MD	14,039	14,240	14,333	14,595	14,855	15,114	15,373	15,630	15,886	16,141	17,900	19,611	
Arlington Co., VA	1,897	1,935	1,988	2,025	2,062	2,099	2,135	2,171	2,207	2,243	2,487	2,719	
Fairfax Co., VA	9,587	9,947	10,181	10,440	10,700	10,961	11,221	11,482	11,744	12,006	13,854	15,725	
Loudoun Co., VA	2,047	2,186	2,274	2,331	2,390	2,451	2,513	2,578	2,644	2,712	3,247	3,900	
Prince William Co., VA	5,812	6,225	6,320	6,531	6,745	6,964	7,185	7,411	7,640	7,874	9,622	11,585	
Alexandria, VA	1,754	1,785	1,824	1,864	1,904	1,944	1,983	2,022	2,061	2,099	2,359	2,604	
NCR	56,094	57,690	58,587	59,885	61,187	62,498	63,809	65,130	66,455	67,786	77,289	87,158	

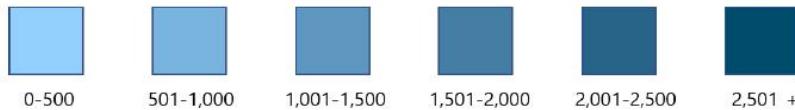
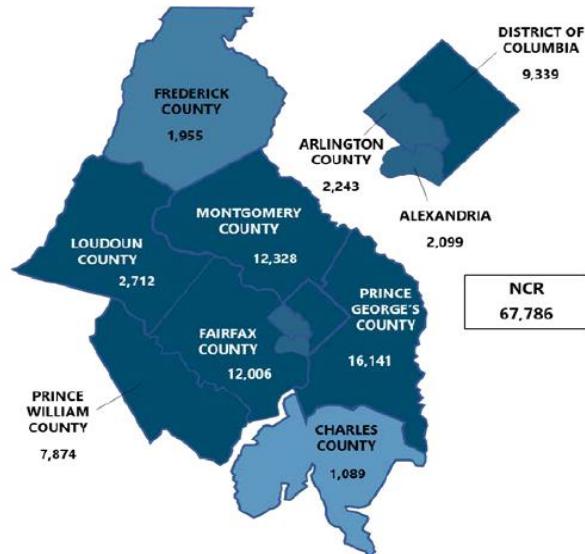
Medical Demand Projections:

	Actual Confirmed Cases On:			Projected Cases (Hospitalized) [ICU] {Ventilator} For:			
	5/24	5/25	5/26	6/2	6/9	6/16	
Washington DC	8,119	8,334	8,406	9,339 (1,868) [448] {224}	10,204 (2,041) [490] {245}	11,007 (2,201) [528] {264}	
Charles Co., MD	997	1,001	1,008	1,089 (218) [52] {26}	1,158 (232) [56] {28}	1,219 (244) [58] {29}	
Frederick Co., MD	1,731	1,746	1,786	1,955 (391) [94] {47}	2,145 (429) [103] {51}	2,359 (472) [113] {57}	
Montgomery Co., MD	10,111	10,291	10,467	12,328 (2,466) [592] {296}	14,313 (2,863) [687] {344}	16,429 (3,286) [789] {394}	
Prince George's Co., MD	14,039	14,240	14,333	16,141 (3,228) [775] {387}	17,900 (3,580) [859] {430}	19,611 (3,922) [941] {471}	
Arlington Co., VA	1,897	1,935	1,988	2,243 (449) [108] {54}	2,487 (497) [119] {60}	2,719 (544) [130] {65}	
Fairfax Co., VA	9,587	9,947	10,181	12,006 (2,401) [576] {288}	13,854 (2,771) [665] {332}	15,725 (3,145) [755] {377}	
Loudoun Co., VA	2,047	2,186	2,274	2,712 (542) [130] {65}	3,247 (649) [156] {78}	3,900 (780) [187] {94}	
Prince William Co., VA	5,812	6,225	6,320	7,874 (1,575) [378] {189}	9,622 (1,924) [462] {231}	11,585 (2,317) [556] {278}	
Alexandria, VA	1,754	1,785	1,824	2,099 (420) [101] {50}	2,359 (472) [113] {57}	2,604 (521) [125] {63}	
NCR	56,094	57,690	58,587	67,786 (13,557) [3,254] {1,627}	77,289 (15,458) [3,710] {1,855}	87,158 (17,432) [4,184] {2,092}	

Actual Confirmed Cases: 5/26/20



Projected Confirmed Cases: 6/2/20

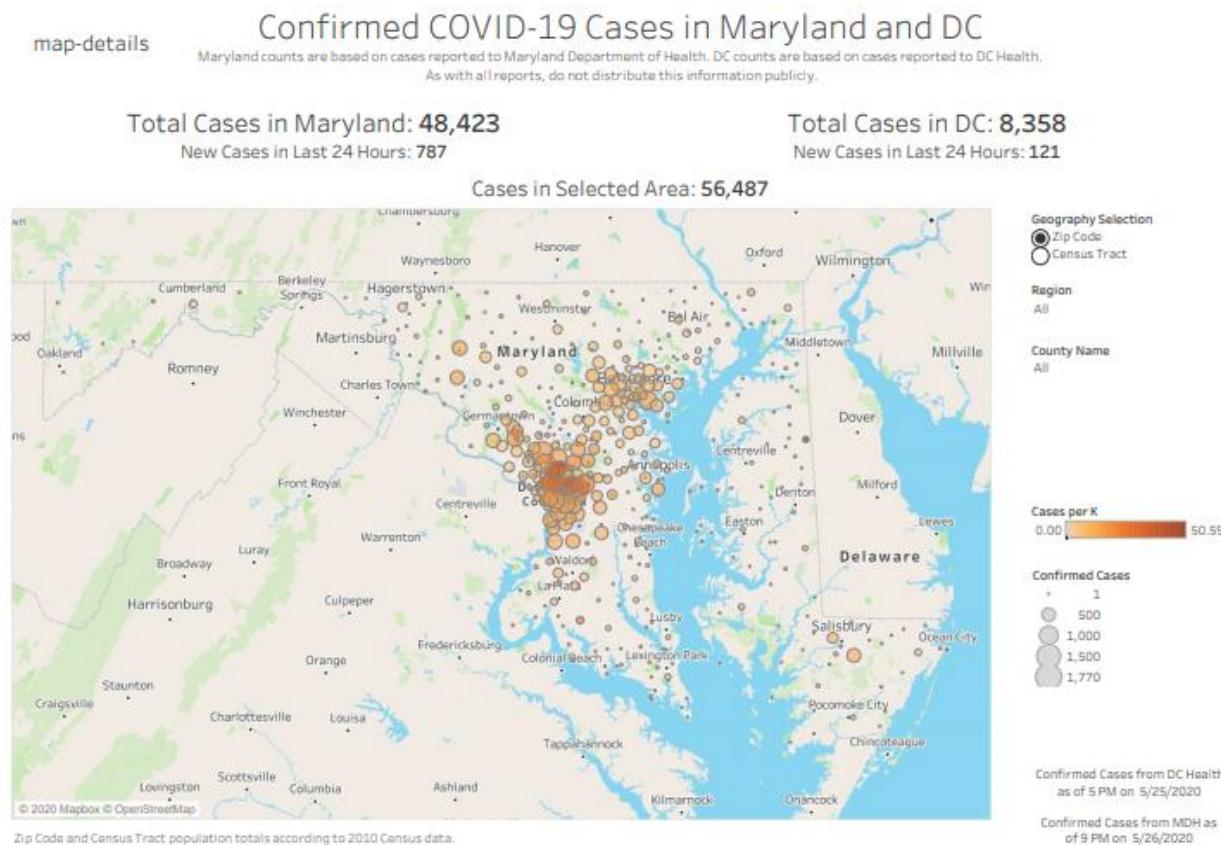


Epidemiologist's Note: Here are the confirmed case maps for Maryland, Southern Maryland, and Charles County. On a state level, the highest case rates are clustered around Baltimore City and Washington DC. Most of the cases in Maryland come from Montgomery, Prince George's, Baltimore City, and Baltimore County.

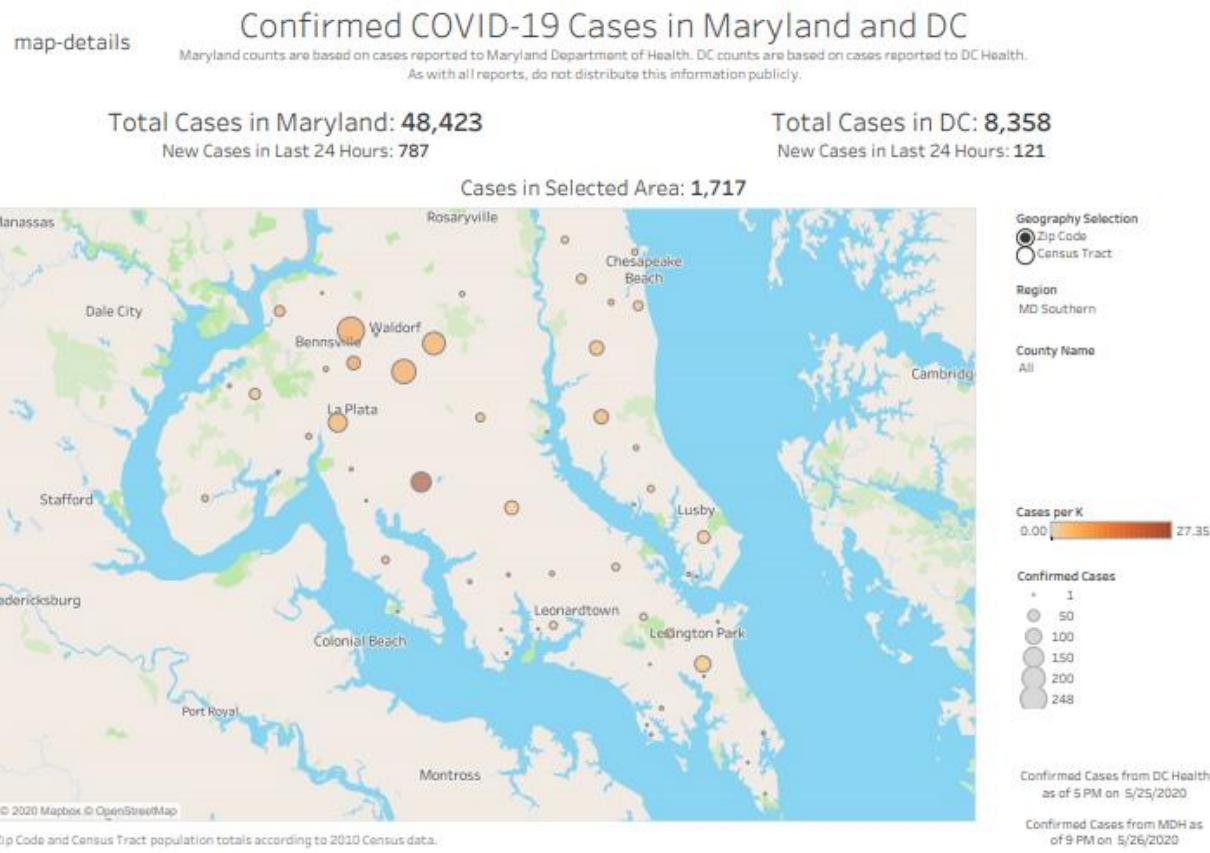
For Southern Maryland, the highest confirmed case rate is in the zip code 20622, Charlotte Hall. This zip code is shared between Charles and St Mary's counties. Charlotte Hall is also home to the Charlotte Hall Veteran's Home which currently has an active outbreak.

For Charles County, the largest number of cases continue to be along the Rt 301 corridor where the majority of the county population lives and where most of the businesses reside.

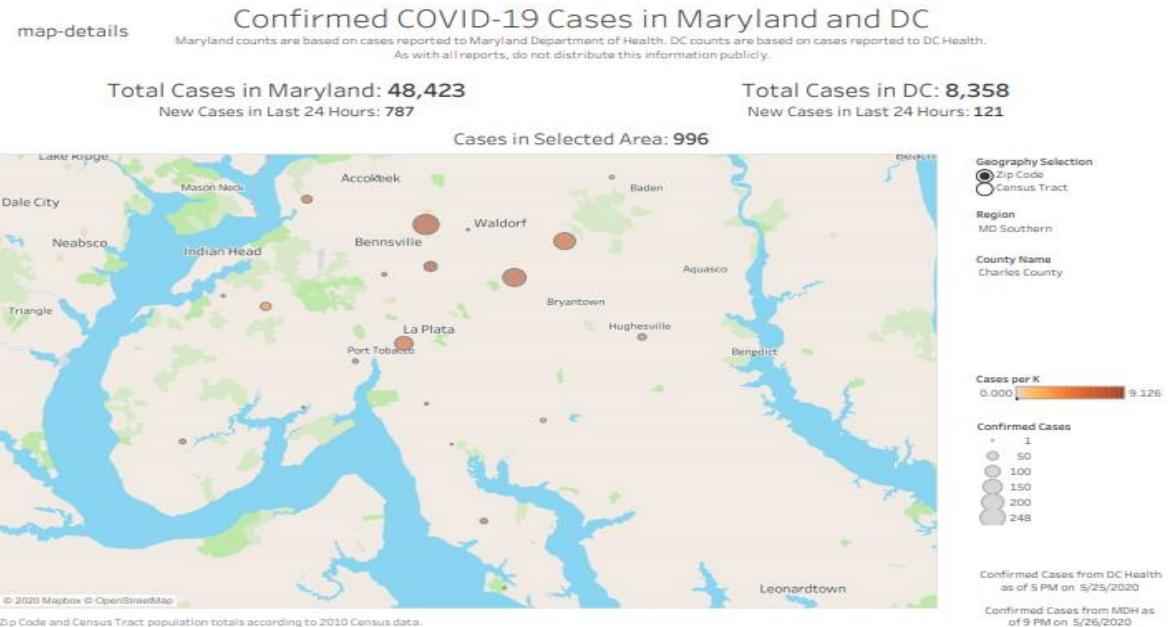
- **Heat map of COVID cases in Maryland by zip code – provided through the Chesapeake Regional Information System for our Patients (CRISP)**



- Heat Map of Southern Maryland



- Heat Map of Charles County



- **Maryland Case Map**

Confirmed COVID-19 Cases in Maryland and DC

Maryland counts are based on cases reported to Maryland Department of Health. DC counts are based on cases reported to DC Health.
As with all reports, do not distribute this information publicly.

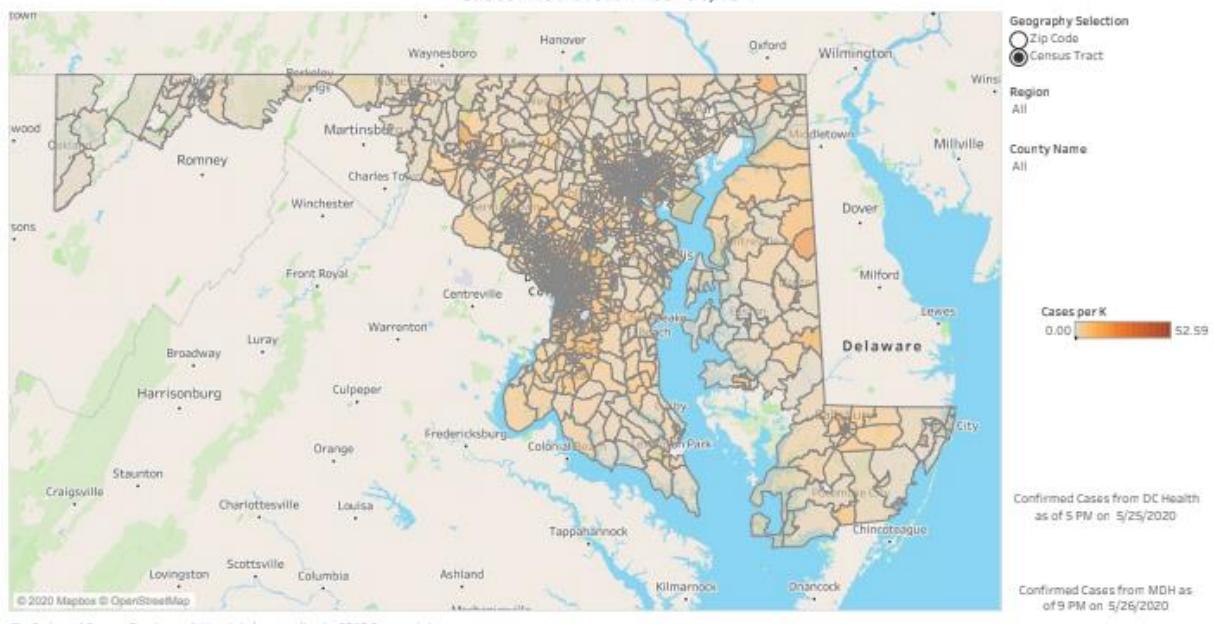
Total Cases in Maryland: 48,423

New Cases in Last 24 Hours: 787

Total Cases in DC: 8,358

New Cases in Last 24 Hours: 121

Cases in Selected Area: 56,487



- **Southern Maryland Case Map**

Confirmed COVID-19 Cases in Maryland and DC

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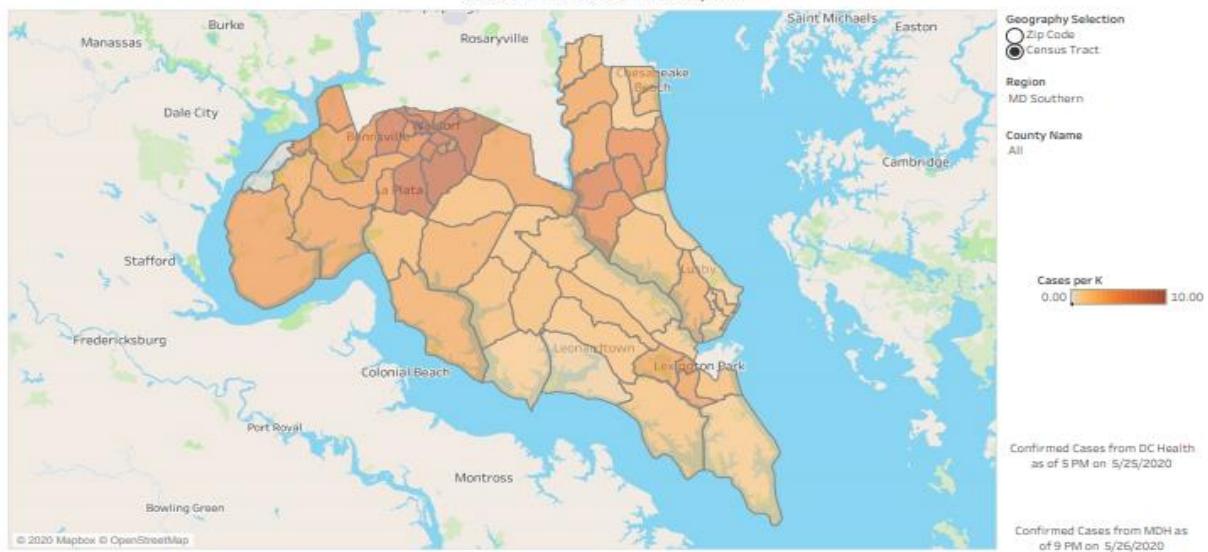
Total Cases in Maryland: 48,423

New Cases in Last 24 Hours: 787

Total Cases in DC: 8,358

New Cases in Last 24 Hours: 121

Cases in Selected Area: 1,717



- Charles County Case Map

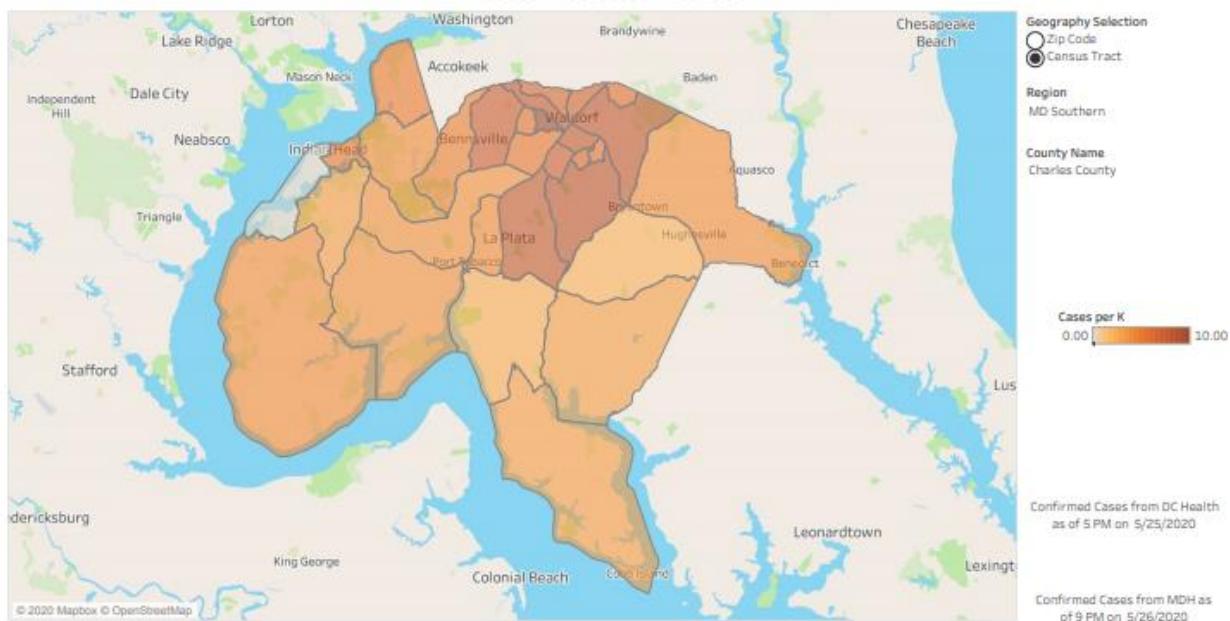
Confirmed COVID-19 Cases in Maryland and DC

Maryland counts are based on cases reported to Maryland Department of Health. DC counts are based on cases reported to DC Health.
As with all reports, do not distribute this information publicly.

Total Cases in Maryland: 48,423
New Cases in Last 24 Hours: 787

Total Cases in DC: 8,358
New Cases in Last 24 Hours: 121

Cases in Selected Area: 996



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

Epidemiologist's Note: Here are the epi curves that show the confirmed cases by date for Maryland, Southern Maryland, and Charles County. The blue lines are the cumulative total of cases. You can observe how the blue lines on the state, regional, and county graphs are all starting to flatten out. The orange lines represent the new cases by date. For Maryland and Charles County, the peak in confirmed cases can be seen in late April. For Southern Maryland, it was the beginning of May. On the state, regional, and local level, the number of confirmed cases each day is beginning to decline.

- **Statewide Cases by Date**

Maryland Confirmed COVID-19 Cases by Day

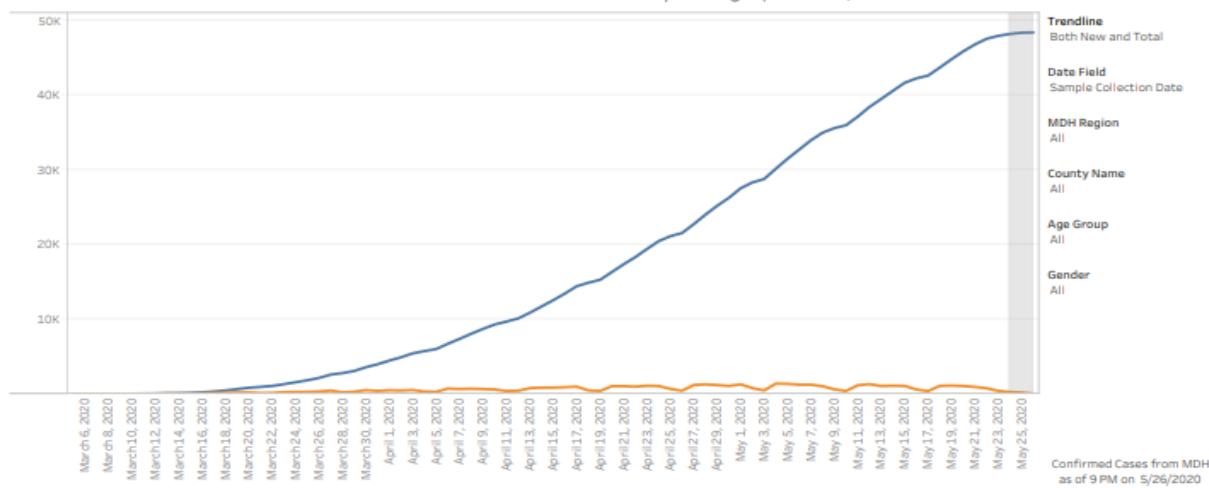
Maryland counts are based on cases reported to Maryland Department of Health.
As with all reports, do not distribute this information publicly.

Total Cases in Maryland: 48,423

New Cases in Last 24 Hours: 787

Number of Cases for Selected Area/Demographics: 48,423

This graph:



When Date Field is Sample Collection Date, the daily totals may change as pending tests are reported. Grey shading indicates days pending additional data.

Maryland Confirmed COVID-19 Cases by Day

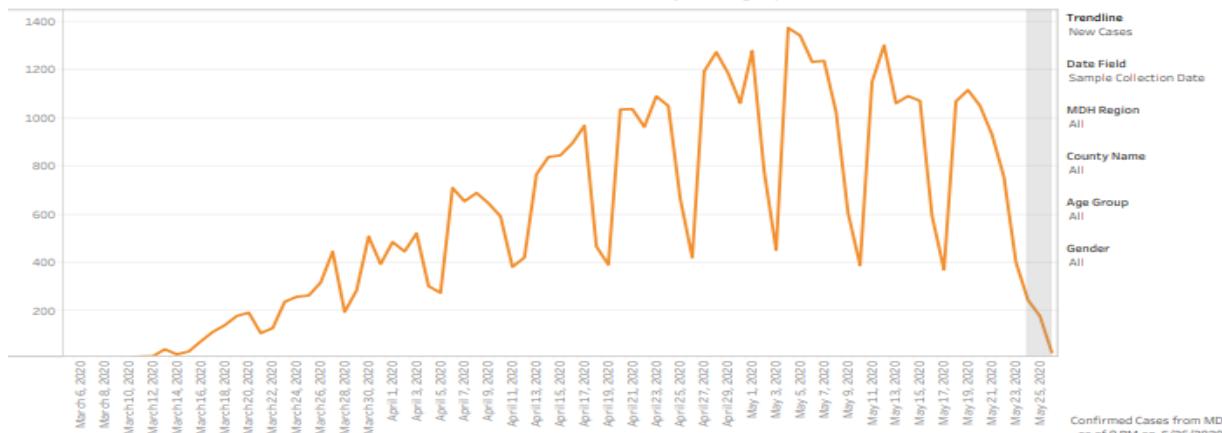
Maryland counts are based on cases reported to Maryland Department of Health.
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Total Cases in Maryland: 48,423

New Cases in Last 24 Hours: 787

Number of Cases for Selected Area/Demographics: 48,423

This graph:



When Date Field is Sample Collection Date, the daily totals may change as pending tests are reported. Grey shading indicates days pending additional data.

- **Southern Maryland Cases by Date**

Maryland Confirmed COVID-19 Cases by Day

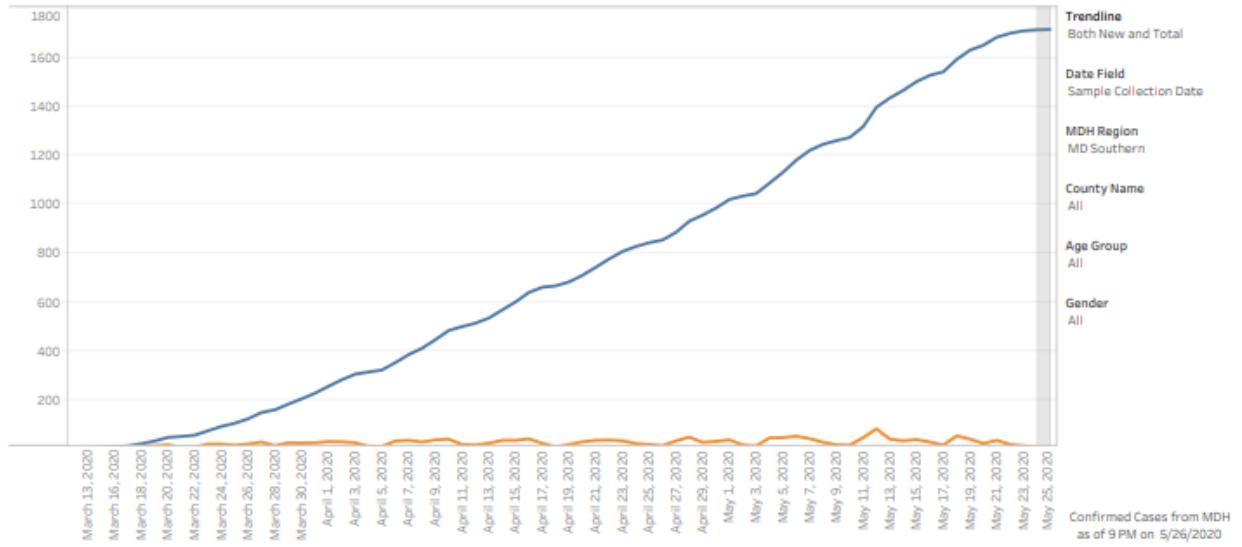
Maryland counts are based on cases reported to Maryland Department of Health.
As with all reports, do not distribute this information publicly.

Total Cases in Maryland: 48,423

New Cases in Last 24 Hours: 787

Number of Cases for Selected Area/Demographics: 1,717

This graph:



Maryland Confirmed COVID-19 Cases by Day

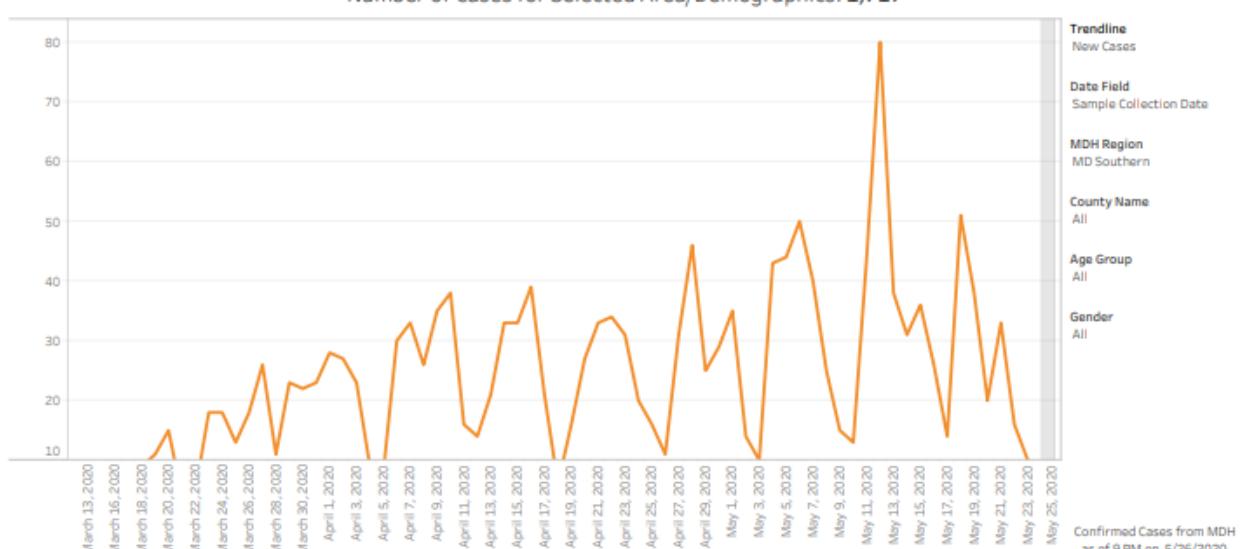
Maryland counts are based on cases reported to Maryland Department of Health.
As with all reports, do not distribute this information publicly.

Total Cases in Maryland: 48,423

New Cases in Last 24 Hours: 787

Number of Cases for Selected Area/Demographics: 1,717

This graph:



- Charles County Cases by Date

Maryland Confirmed COVID-19 Cases by Day

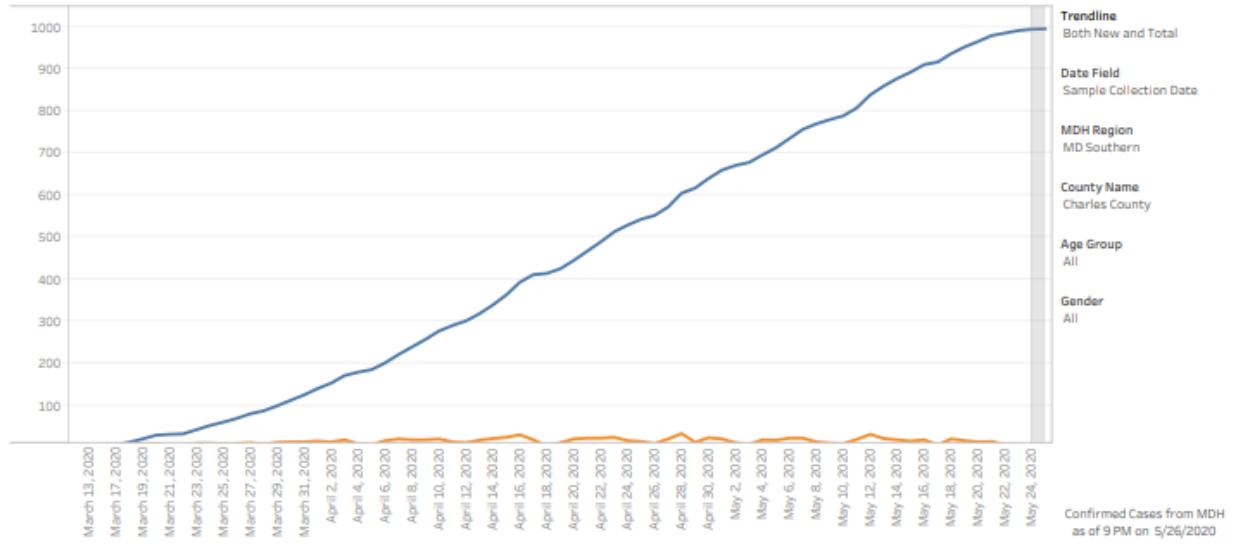
Maryland counts are based on cases reported to Maryland Department of Health.
As with all reports, do not distribute this information publicly.

Total Cases in Maryland: 48,423

New Cases in Last 24 Hours: 787

Number of Cases for Selected Area/Demographics: 996

This graph:



Maryland Confirmed COVID-19 Cases by Day

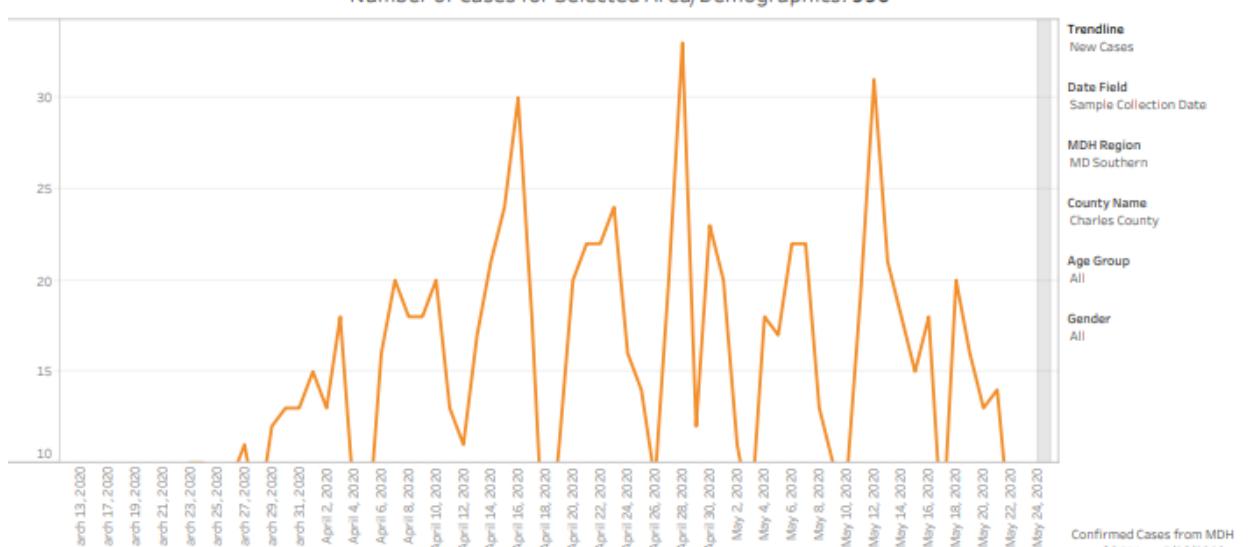
Maryland counts are based on cases reported to Maryland Department of Health.
As with all reports, do not distribute this information publicly.

Total Cases in Maryland: 48,423

New Cases in Last 24 Hours: 787

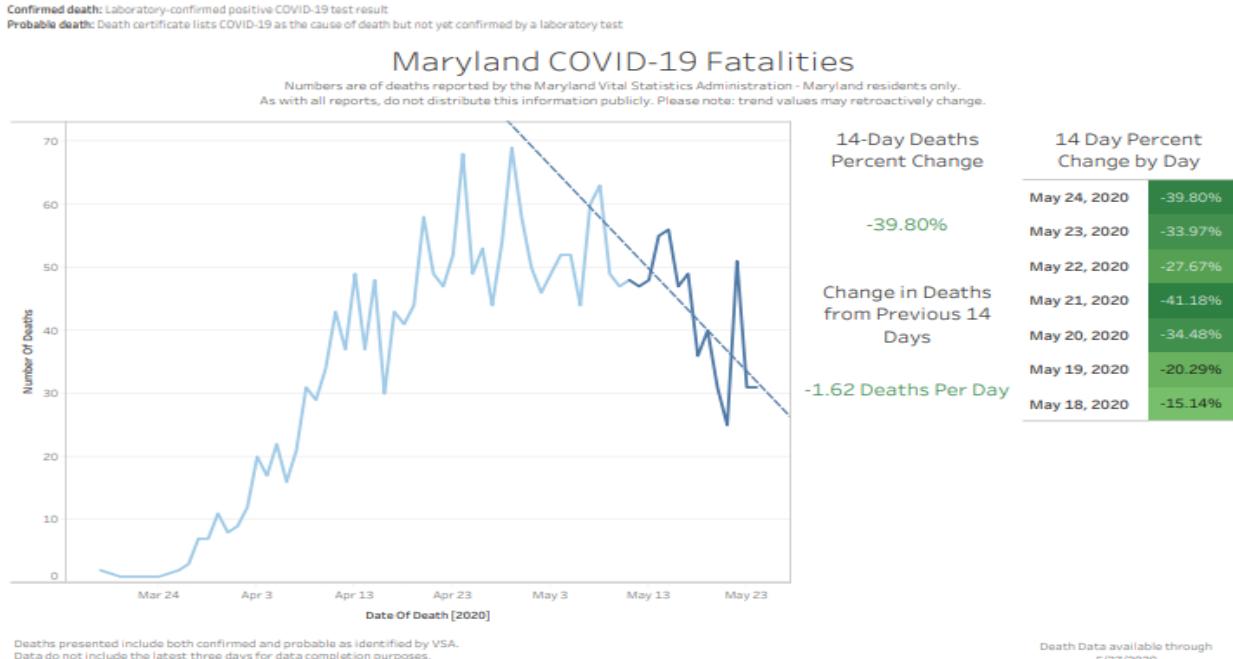
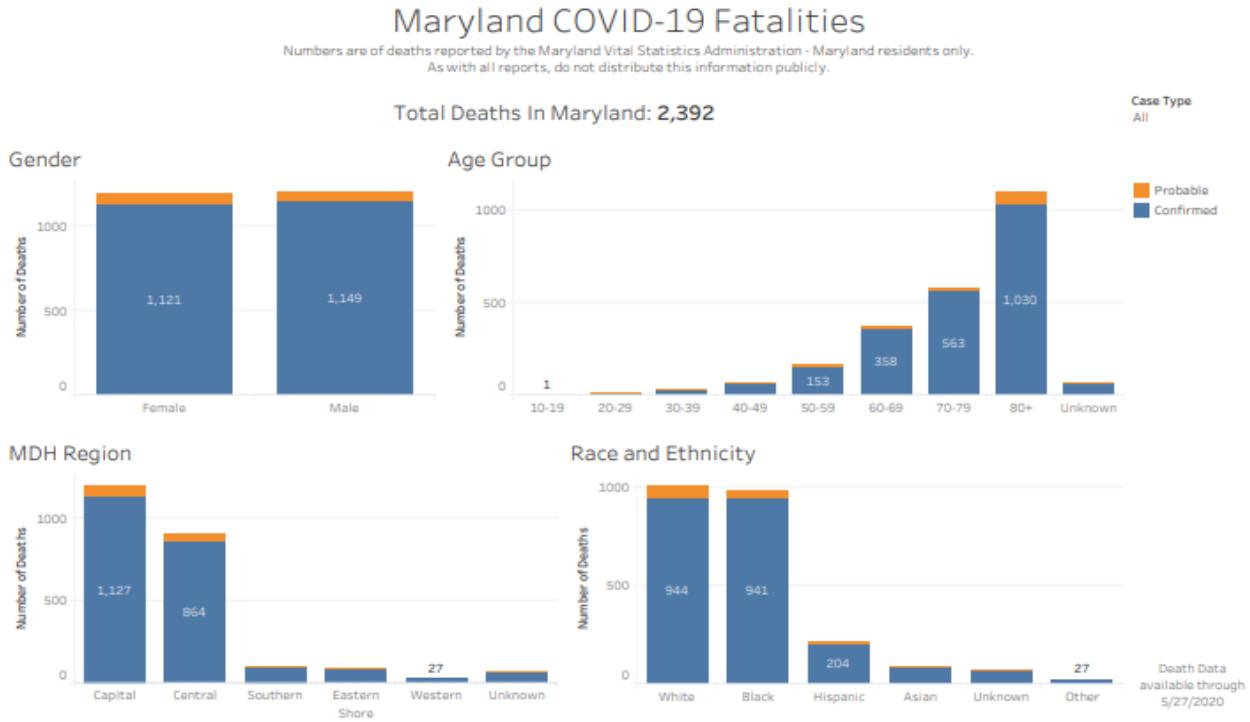
Number of Cases for Selected Area/Demographics: 996

This graph:



Epidemiologist's Note: Here are the graphs looking at case demographics on a state and regional level. For Maryland and Southern Maryland, there are slightly more females than males. This is also true for Charles County. For Maryland, the age group with the most cases are those 30-39 years. For Southern Maryland, the age group with the most cases are those 50-59 years. Most of the cases in the state of Maryland are in the Central and Capital regions.

- **Maryland Demographic Fatalities**



- **Maryland Case Demographics**

Confirmed COVID-19 Cases by Demographics in Maryland and DC

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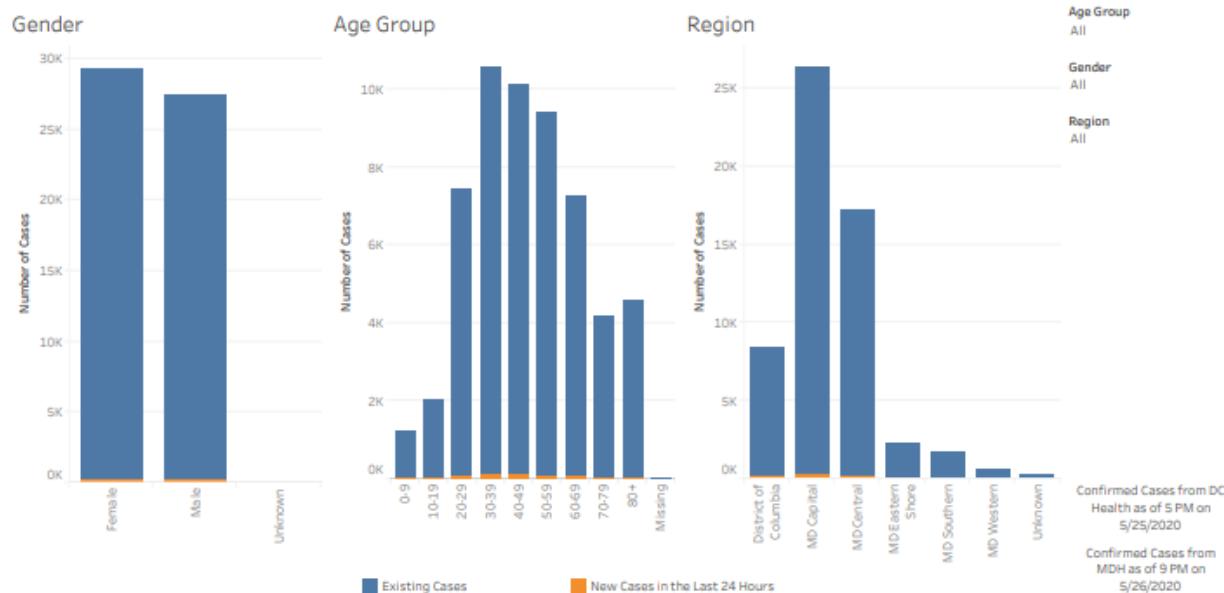
Total Cases in Maryland: 48,423

New Cases in Last 24 Hours: 787

Total Cases in DC: 8,358

New Cases in Last 24 Hours: 121

Number of Cases for Selected Area/Demographics: 56,781



- **Southern Maryland Case Demographics**

Confirmed COVID-19 Cases by Demographics in Maryland and DC

Maryland counts are based on cases reported to Maryland Department of Health. DC counts are based on cases reported to DC Health.

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

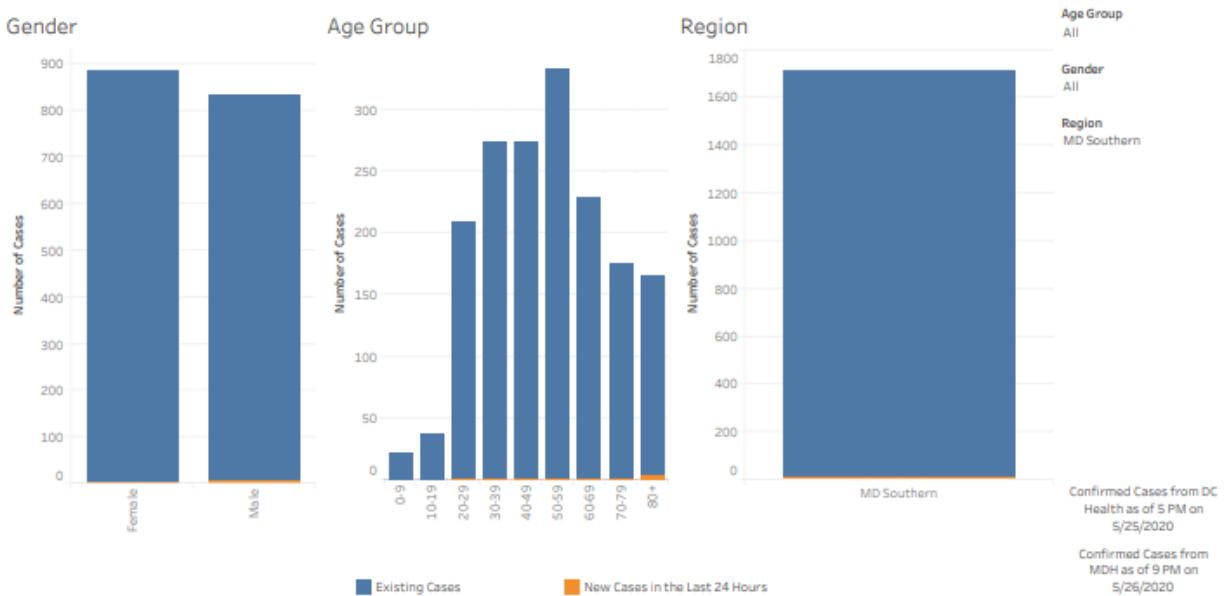
Total Cases in Maryland: 48,423

New Cases in Last 24 Hours: 787

Total Cases in DC: 8,358

New Cases in Last 24 Hours: 121

Number of Cases for Selected Area/Demographics: 1,717



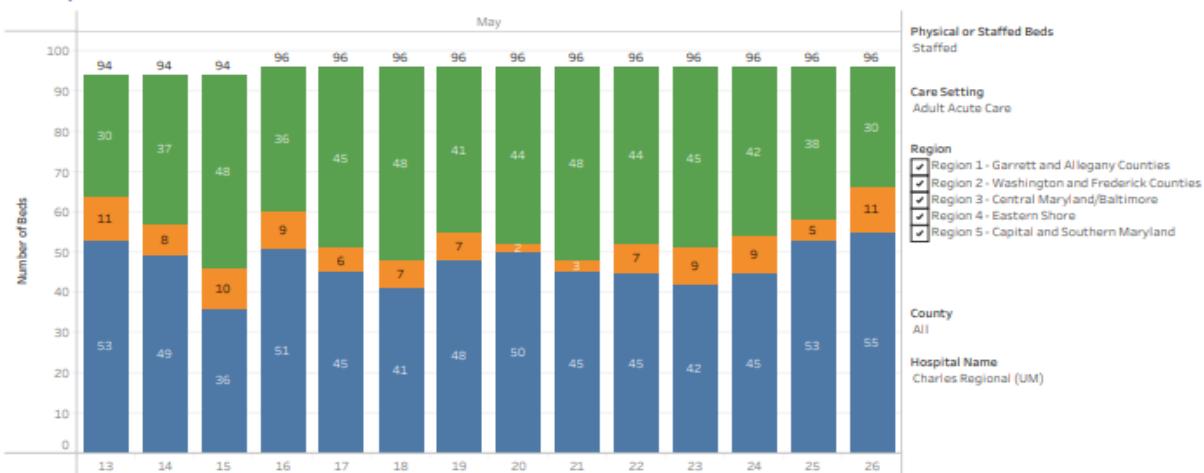
Epidemiologist's Note: The next graphs look at the trends in Acute Care and ICU occupancy over the last 14 days for CRMC and all of the Region 5 hospitals. The number of COVID-19 patients in acute care has increased at CRMC after seeing decreases over the last 2 weeks. The number of COVID-19 patients in the ICU has remained low.

• Maryland Occupied Staff Adult Acute Care

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/26/2020

Occupied Staffed - Adult Acute Care



Occupied Staffed by Hospital - Adult Acute Care

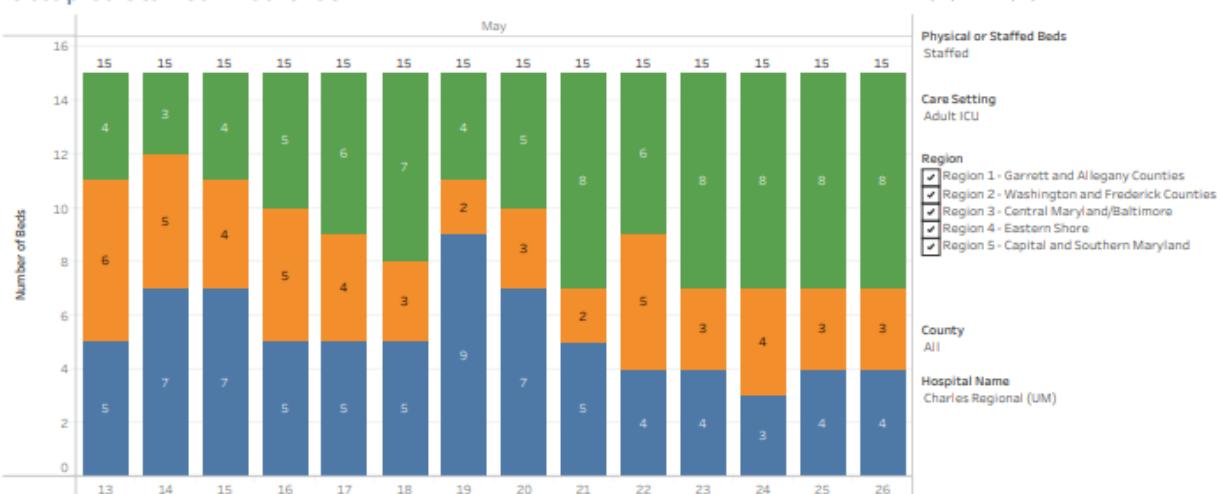


• Maryland Occupied Staff Adult ICU

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/26/2020

Occupied Staffed - Adult ICU



Occupied Staffed by Hospital - Adult ICU



• Maryland Capacity Overview

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/26/2020

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):

1,523

(1523/7664) = 20%

Ventilators Available:

1,351

(1351/2021) = 67%

Patients in the Emergency Department:

876

(876/2021) = 43%

Change from day before:	+23 beds	Change from day before:	-13 vents	Change from day before:	+117 patients
-------------------------	----------	-------------------------	-----------	-------------------------	---------------

Hospitalized Confirmed COVID-19 Patients

Staffed Acute Care Beds Occupied by COVID-19 Patients:

818

(818/6277) = 13%

Staffed ICU Beds Occupied by COVID-19 Patients:

520

(520/1387) = 37%

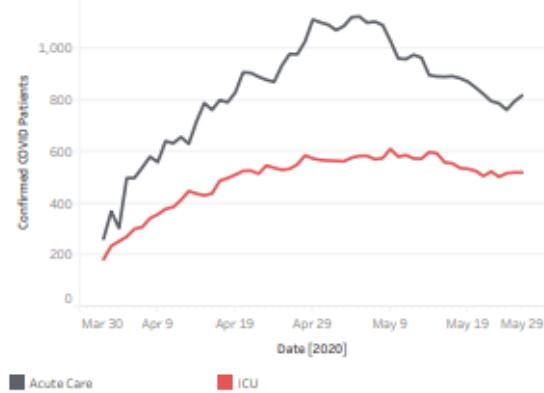
Change from day before:	+23 patients	Change from day before:	
7-Day Trend	-4.68%	7-Day Trend	
14-Day Trend	-17.12%	14-Day Trend	-14.23%

Bed Summary

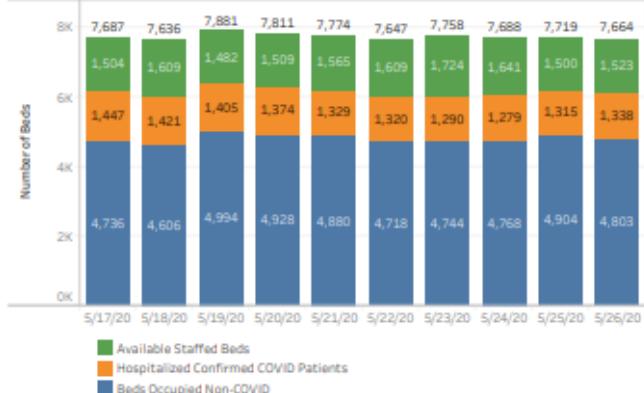
	Physical Beds	Staffed Beds	Occupied Beds	% Occupied Physical Bed	% Occupied Staffed Bed
Adult Acute Care	7,933	6,277	5,016	63%	80%
Adult ICU	1,777	1,387	1,125	63%	81%
Pediatric Acute Care	327	238	112	34%	47%
Pediatric ICU	65	55	40	62%	73%

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.



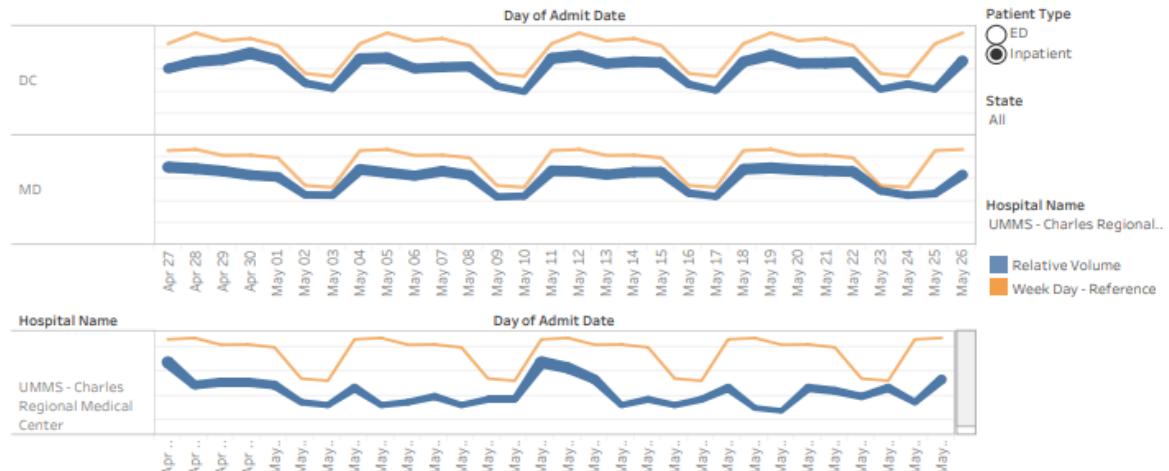
Epidemiologist's Note: CRMC has seen increases in ED and Inpatient Hospital Volume in the last couple days. There was an increase from 5 COVID-19 positive patients in acute care to 11 patients. The increase in ED utilization did not appear to be due to COVID-19. I will continue to closely monitor the hospital utilization data for trends and changes.

- **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.

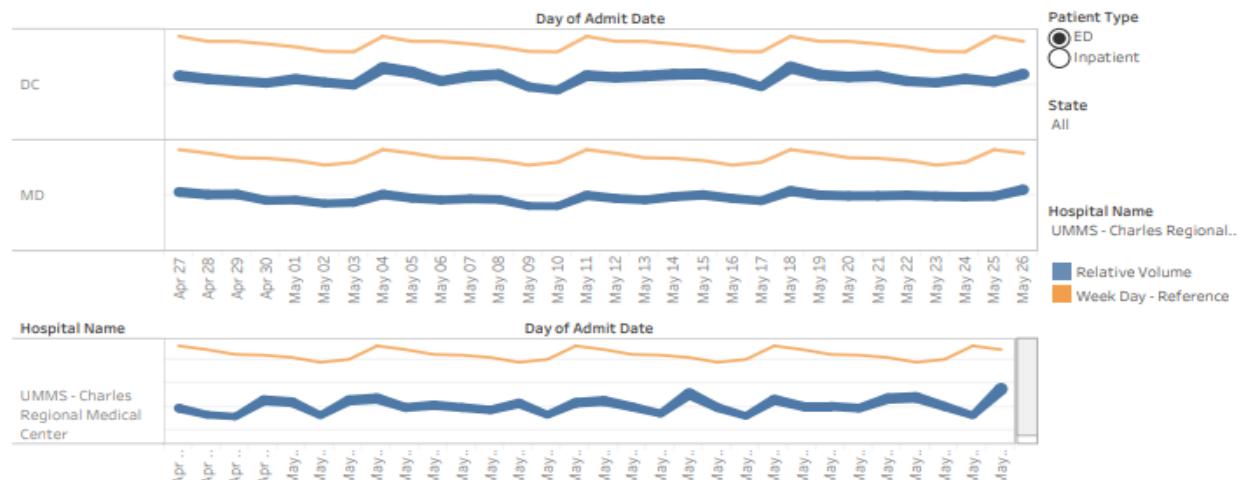


- **Maryland Hospital ED Volume**

Hospital Volume Trend Lines

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.



Epidemiologist's Note: Here is the surge capacity for acute care and ICU at CRMC and MD.

- **Surge Bed Capacity**

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/26/2020

Hospital surge capacity information provided by MDH. These numbers are constant.

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.

The occupied, staffed, and physical beds will update daily with the MIEMSS numbers, the surge beds will be fixed.

Acute Care Surge Beds

	Occupied Beds	Staffed Beds	Physical Beds	Peak Surge Acute Care Beds	Incremental Acute Beds with ..	Total Acute Beds at Peak Surge
Statewide	5,016	6,277	7,933	9,585	479	10,064
Charles Regional (UM)	66	96	96	162	7	169

Region

- Region 1 - Garrett and Allegany Counties
- Region 2 - Washington and Frederick Counties
- Region 3 - Central Maryland/Baltimore
- Region 4 - Eastern Shore
- Region 5 - Capital and Southern Maryland

County

All

Hospital Name

Charles Regional (UM)

ICU Surge Beds

	Occupied Beds	Staffed Beds	Physical Beds	Peak Surge ICU Beds	Incremental ICU Beds with Tents	Total ICU Beds at Peak Surge
Statewide	1,125	1,387	1,777	3,382	251	3,633
Charles Regional (UM)	7	15	15	26	4	30

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



Epidemiologist's Note: CRMC trends in acute care and ICU occupancy are better than Region 5 and many other parts of the state.

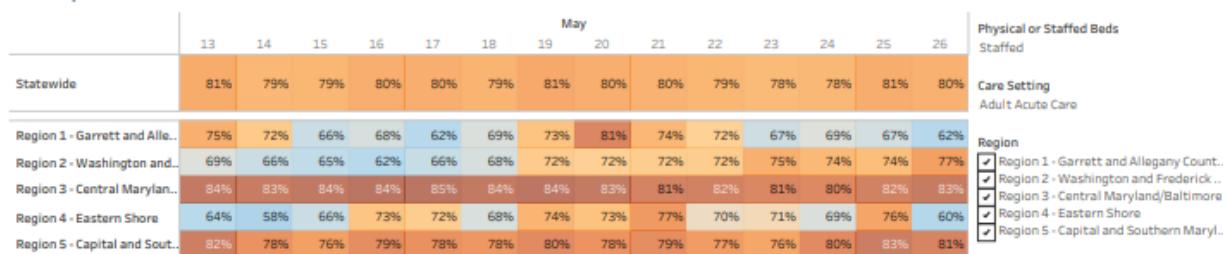
- **Regional Occupancy Trends Adult Acute Care**

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/26/2020

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Occupied Staffed Beds - Adult Acute Care

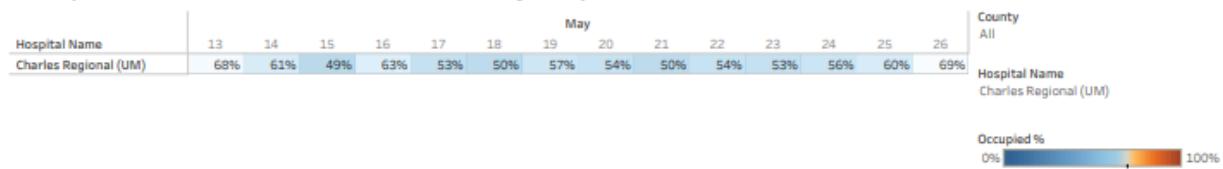


Date
5/13/2020 to 5/27/2020

Care Setting
Adult Acute Care

Region
 Region 1 - Garrett and Allegany Count..
 Region 2 - Washington and Frederick ..
 Region 3 - Central Maryland/Baltimore
 Region 4 - Eastern Shore
 Region 5 - Capital and Southern Maryl..

Occupied Staffed Beds - Adult Acute Care by Hospital



Hospital Name
Charles Regional (UM)

Occupied %
0%  100%

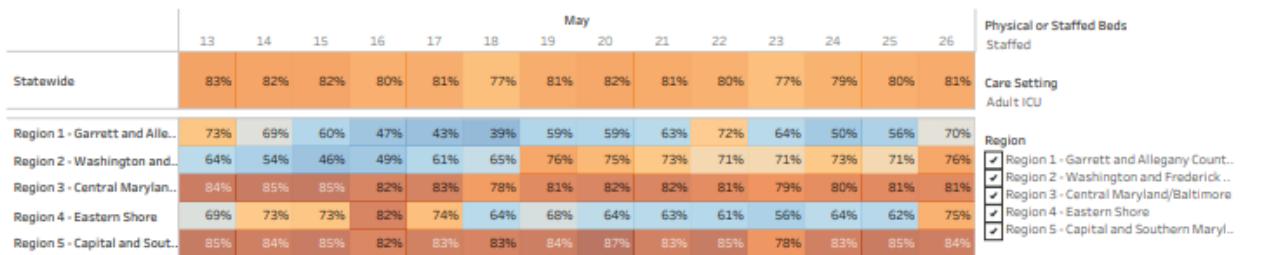
- **Regional Occupancy Trends Adult ICU**

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/26/2020

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 ICU

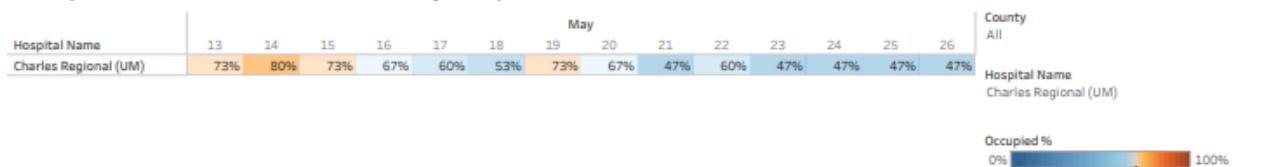


Date
5/13/2020 to 5/27/2020

Care Setting
Adult ICU

Region
 Region 1 - Garrett and Allegany Count..
 Region 2 - Washington and Frederick ..
 Region 3 - Central Maryland/Baltimore
 Region 4 - Eastern Shore
 Region 5 - Capital and Southern Maryl..

Occupied Staffed Beds - Adult ICU by Hospital



Hospital Name
Charles Regional (UM)

Occupied %
0%  100%

Epidemiologist's Note: Occupied Bed Capacity Maps for Maryland, Region 5, and Charles County.

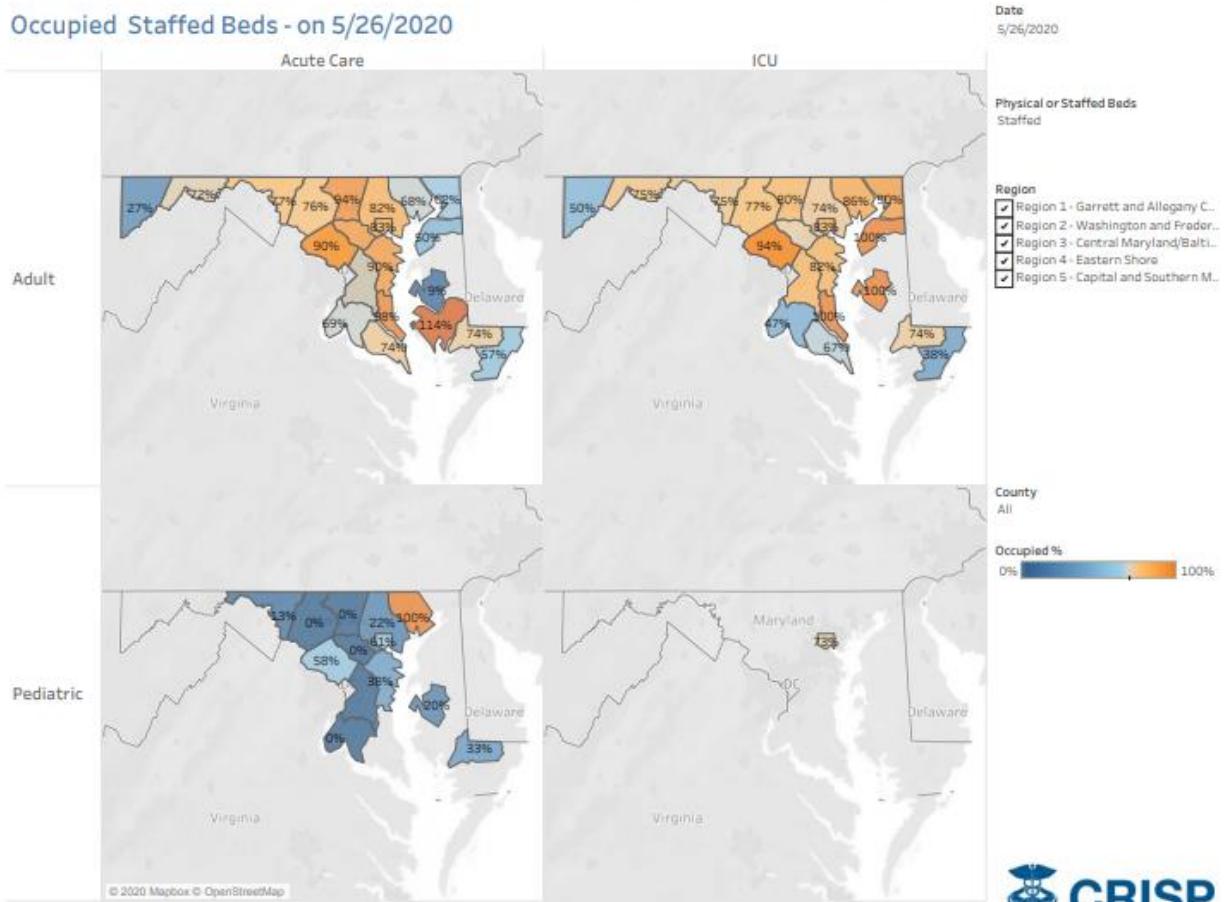
- **Maryland Occupied Bed Capacity**

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/26/2020

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 5/26/2020



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

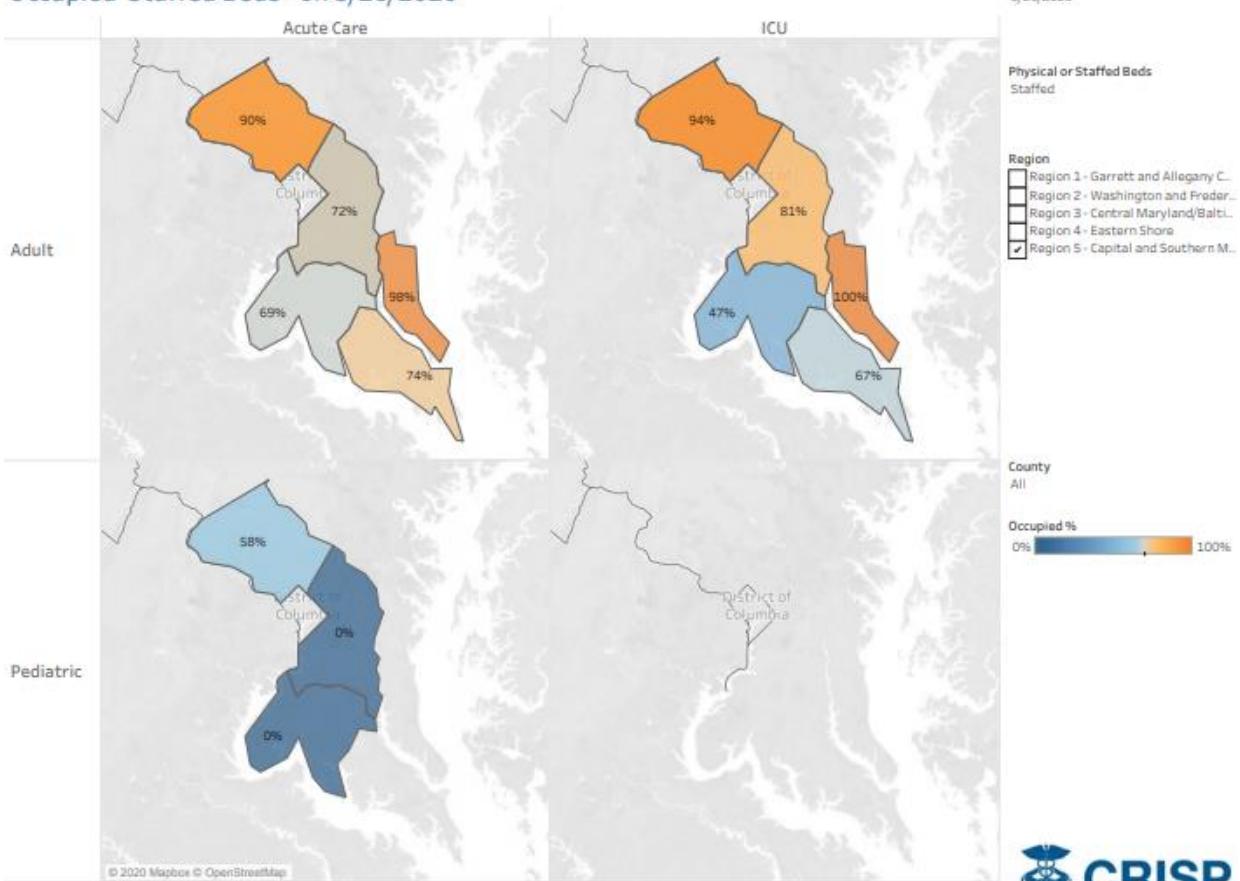
• Regional Maryland Occupied Bed Capacity

MiEMSS Facility Resources Emergency Database (FRED)

Data as of 5/26/2020

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 5/26/2020



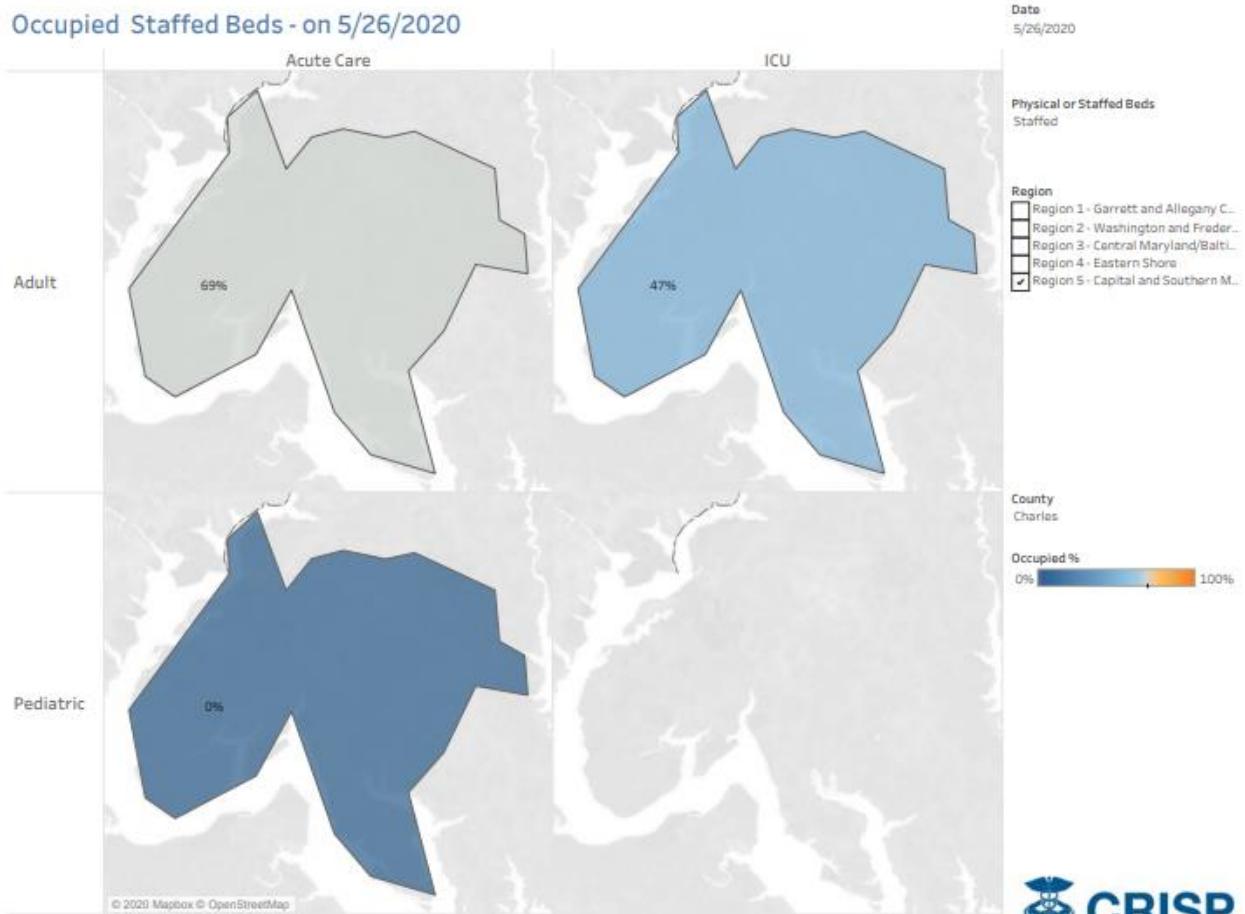
Source: CRISP, 2020. CRISP MiEMSS FRED SmartSheet Download.

- Charles County Occupied Bed Capacity

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/26/2020

Occupied Staffed Beds - on 5/26/2020



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



• Occupied Beds COVID-19 Patients

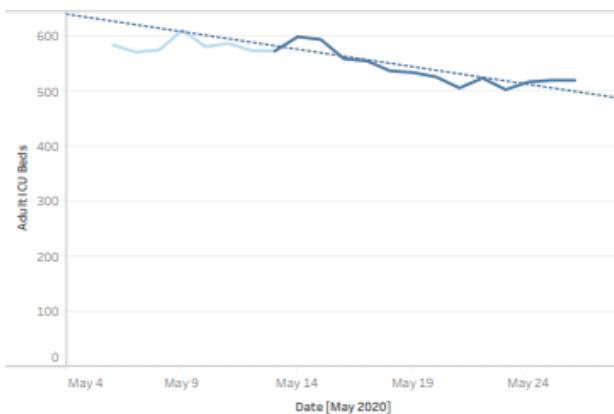
MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/26/2020

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.

Adult ICU Beds Occupied by Confirmed COVID-19 Patients

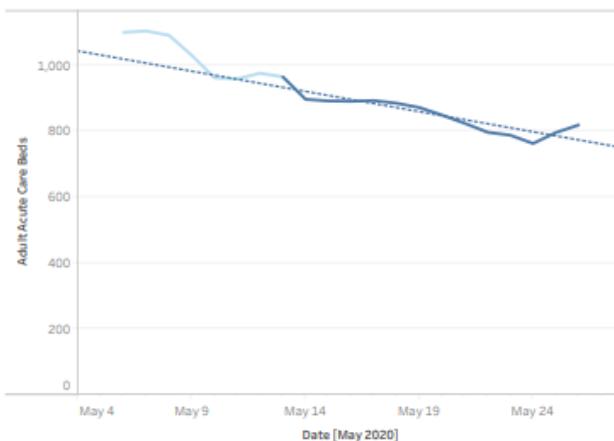
14 Day Trend



14-Day ICU Beds Occupied Percent Change:	7-Day ICU Beds Occupied Percent Change:	14-Day Daily Percent Change
-14.23%	+0.12%	May 26, 2020 -14.23%
		May 25, 2020 -14.72%
		May 24, 2020 -15.44%
		May 23, 2020 -15.02%
		May 22, 2020 -14.76%
		May 21, 2020 -12.99%
		May 20, 2020 -9.27%
		May 19, 2020 -7.05%
		May 18, 2020 -4.84%
		May 17, 2020 -1.90%
		May 16, 2020 1.06%
		May 15, 2020 3.75%
		May 14, 2020 3.80%
		May 13, 2020 3.05%

Adult Acute Care Beds Occupied by Confirmed COVID-19 Patients

14 Day Trend



14-Day Acute Care Beds Occupied Percent Change:	7-Day Acute Care Beds Occupied Percent Change:	14-Day Daily Percent Change
-17.12%	-4.68%	May 26, 2020 -17.12%
		May 25, 2020 -19.95%
		May 24, 2020 -20.32%
		May 23, 2020 -18.58%
		May 22, 2020 -19.06%
		May 21, 2020 -20.56%
		May 20, 2020 -21.96%
		May 19, 2020 -22.77%
		May 18, 2020 -23.90%
		May 17, 2020 -24.23%
		May 16, 2020 -22.87%
		May 15, 2020 -20.15%
		May 14, 2020 -17.23%
		May 13, 2020 -13.81%

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



Epidemiologist's Note: The trends in COVID-19 acute care and ICU graphs for Maryland. Ventilator availability looks good and has remained fairly consistent on a state, regional, and county level.

• Maryland Ventilator Availability

MIEMSS Facility Resources Emergency Database (FRED)

Data as of 5/26/2020

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Ventilators Availability



Additional Ventilators Supplied by Federal and State Government

Data as of 5/11/2020

Type	Source	Requested	Received	Distributed
Federal Ventilators	EMAC	100	100	0
	SNS	470	470	333
DGS Procured	Blue Door Pharma	400	0	
	Energy Audit	142	0	
	Percussionaire (mobile)	250	180	
	Percussionaire TXPS	200	50	
	Res Med Astral (mobile)	176	176	
	Vanguard	1,150	0	
Grand Total		2,888	976	333

Ventilators in Use by Hospital

Highlighting Indicates Percentage of Ventilators in Use



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

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

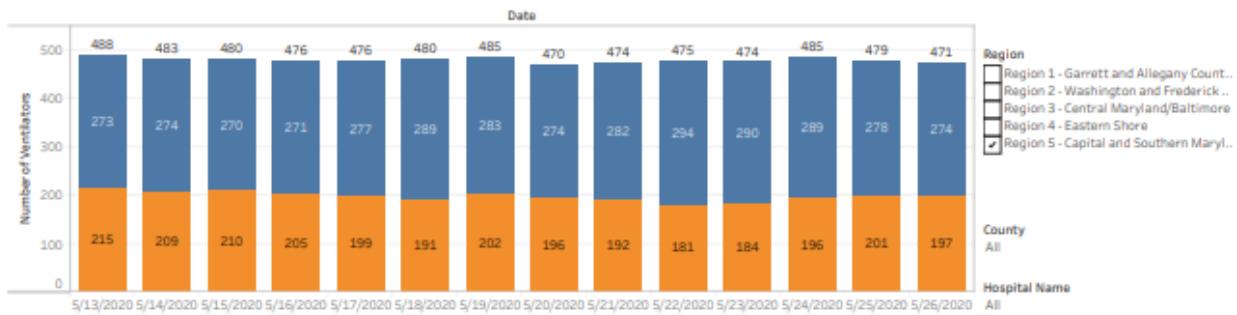


• Regional Ventilator Availability

MIEMSS Facility Resources Emergency Database (FRED)
Data as of 5/26/2020

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



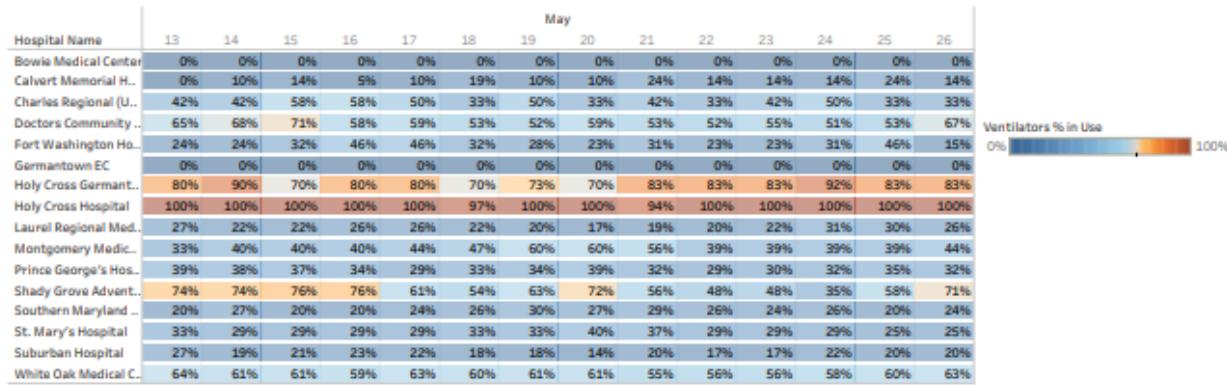
Additional Ventilators Supplied by Federal and State Government

Data as of 5/11/2020

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Federal Ventilators	EMAC	100	100	0
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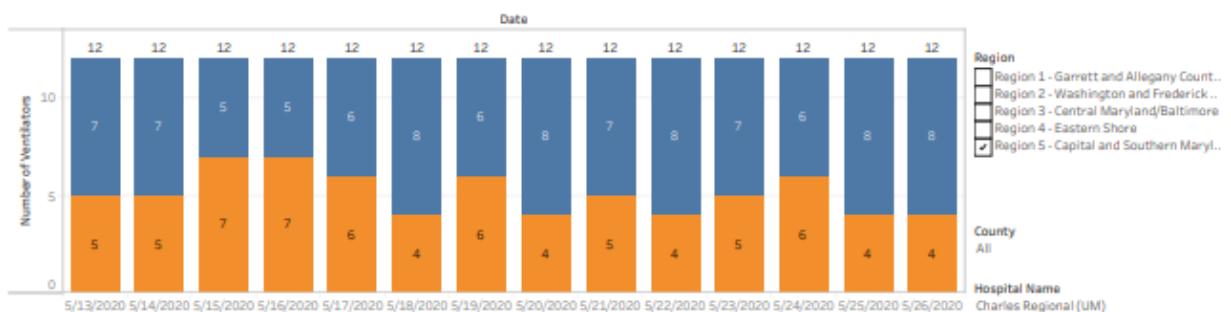
Source: CRISP, 2020. CRISP MIEMSS FRED SmartSheet Download and Maryland Department of Health.

- Charles County Ventilator Availability

MIEMSS Facility Resources Emergency Database (FRED)
Data as of 5/26/2020

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 5/11/2020

Type	Source	Requested	Received	Distributed
Federal Ventilators	EMAC	100	100	0
	SNS	470	470	333
DGS Procured	Blue Door Pharma	400	0	
	Energy Audit	142	0	
	Percussionaire (mobile)	250	180	
	Percussionaire TXPS	200	50	
	Res Med Astral (mobile)	176	176	
	Vanguard	1,150	0	
Grand Total		2,888	976	333

Ventilators in Use by Hospital

Highlighting Indicates Percentage of Ventilators in Use

Hospital Name	May													
	13	14	15	16	17	18	19	20	21	22	23	24	25	26
Charles Regional (U..	42%	42%	58%	58%	50%	33%	50%	33%	42%	33%	42%	50%	33%	33%

Ventilators % in Use
0% 100%

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

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



Respectfully submitted by Charles County PHEP



PUBLIC HEALTH BRANCH BRIEFING COVID-19 PANDEMIC RESPONSE May 28, 2020

GENERAL REPORTING INFORMATION

INFECTIOUS DISEASE

CASE COUNT—CHARLES COUNTY

As of 5/28/2020, total case count for Charles County is 1,034.

- *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 re-opening coalition multimedia campaign.

PARTNER/STAKEHOLDER OUTREACH

LTC/AL

- The Long-Term Care and Assisted Living call will be held today, May 28 at 3 p.m. by CCDOH nurse liaisons.

ALL-PARTNER

- Dr. Haft hosted a reopening coalition webinar May 27 from 11-12 p.m.

EPI SURVEILLANCE PROFILE FOR STATE

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

- 1) Latest case counts – total: 49,709 (225,149 negative)
- 2) New cases: 1,286
 - 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 (-4 last 24 hours); total current 1,334; total ever 8,392
 - e) Deaths -- Total 2,307 (37 last 24 hours)
 - f) Release from isolation – 3,468

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

- 5 requests picked up today

VOLUNTEERS

MARYLAND MEDICAL RESERVE CORPS

- Nothing new to report.

CAREGIVER SERVICE CORPS

- Nothing new to report.

TESTING

VEIP TESTING SITE UPDATE

- Tested to Date: 1,321
- VEIP Testing ongoing today, May 28.
- At this time, Waldorf VEIP remains an appointment only site. Please do not advertise that we are testing ‘no appointments’.
- The ‘no appointment’ situation is being discussed/determined at state for sites that were not announced as the walk-up sites.

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 5/28 at 8:30 am, total case count for Charles County was 1034 cases. (There was a total of 7 new cases in the last 24 hours.)

There have been 71 confirmed deaths associated with COVID-19. This equates to 6.8% of total confirmed cases. The Charles County death rate of 6.8% is higher than the MD state average death rate of 4.6%. However, it should be noted that the majority of deaths in Charles County are associated with outbreaks in skilled nursing facilities. The death rate for Charles County is going down from a high of 7.3% now that the outbreaks at skilled nursing facilities have been contained and/or reduced. There has been a small uptick in nursing homes related deaths due to the current outbreak at the Charlotte Hall Veterans Home where some Charles County residents reside.

There was 1 probable COVID-19 death. COVID-19 is listed as the cause of death, but laboratory testing has not yet confirmed.

Average age of fatalities: 77.3 years

Age Distribution of Fatalities:

- 0-39 years: 0
- 40-69 years: 14 (19.5%)
- 70-79 years: 32 (44.4%)
- 80+ years: 26 (36.1%)

Gender breakdown among fatalities:

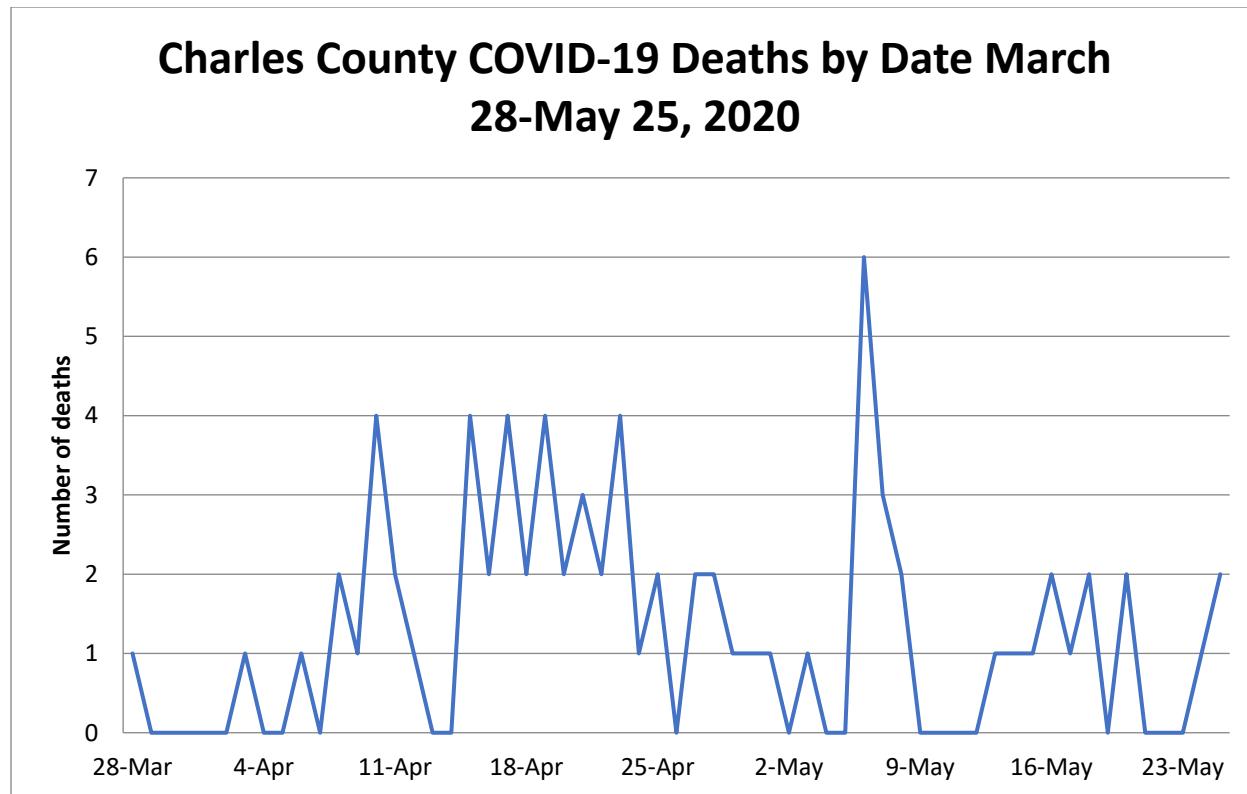
- 44 or 61.1% Female
- 28 or 38.9% Male

Race breakdown among fatalities:

- 43.1% Non-Hispanic White
- 47.2% Non-Hispanic Black
- 4.2% Non-Hispanic Asian
- 4.2% Hispanic
- 1.3% Unknown

Location of deaths:

- Hospital Inpatient: 61.1%
- Nursing Home: 25.0%
- Other/Home/Emergency Room/Outpatient: 13.9%



- Total Number of positive lab results: 1034
- Number of positive lab results in the last 24 hours: 23
- Total Number of negative lab results: 5753
- Number of negative lab results in the last 24 hours: 343
- There were a large number of negative lab results received in the last 24 hours due to the staff testing at Restore Health that occurred on Friday, 5/22.
- Total Positivity Rate for all lab results thus far: 15.2% (state 15.7%)
- Positivity Rate for all lab results in the last 24 hours: 6.3%
- Recovered and released from isolation: 270
- Partially recovered with improved symptoms: 58
- Known asymptomatic cases: 19
- 189 or 18.3% required hospitalization. Hospitalization rate is steadily decreasing. Peak in hospitalization rate coincided with the peak in the skilled nursing facility outbreaks.
- Among confirmed cases, 581 (56.2%) Female; 453 (43.8%) Male
- 12% Healthcare Workers
- 1.4% First Responders: EMS, Fire, Law Enforcement
- 27% have underlying health conditions
- Age range of positive COVID-19 cases: 0-100 years

Age Distribution for Charles County cases:

- Under 18 years: 31 (3.0%)
- 18-64 years: 806 (77.9%)
- 65+ years: 197 (19.1%)

Surveillance of ED Hospital Data and Urgent Care through ESSENCE

ESSENCE data for urgent care utilization at Patient First in Waldorf had a yellow alert for Wednesday May 27th. Patient volume was 52 patients. Patient volume has increased over the last month since they began offering COVID-19 tests. All were discharged to home for self-care. On 5/27, 20 patients presented with ILI or at least one COVID-19 like symptoms (38% of total patient volume). Most ILI presented for a COVID-19 test (15/20). Diagnoses for ILI patients on Wednesday included contact with and exposure to other viral communicable diseases, encounter for screening for viral disease, acute frontal sinusitis, other allergy initial encounter, unspecified pneumonia, and unspecified viral infection. On 5/27, there were 9 "Visit of Interest" CDC Classifier tags. They were due to COVID-19 exposure to a positive case, and all cases presented for a COVID-19 test. They may be the reason for the yellow alert along with the increased patient volume. There were 2 CDC Classifier tags for Pneumonia and 1 case with tags for Coronavirus and Negative Influenza. They completed a total of 15 COVID-19 tests in their drive-up testing site on 5/27.

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 8 for 5/27.

- 5/23: 15
- 5/24: 15
- 5/25: 9
- 5/26: 19
- 5/27: 8

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 5/28 at 8:30 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: 1034 cases on 5/28 at 8:30 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: 15 (1.5%)
- Black/African American: 402 (38.9%)
- White: 235 (22.7%)
- Other or 2+ races: 82 (7.9%)
- Data not available/Declined to Answer: 300 (29.0%)

Ethnicity Breakdown

- Hispanic 67 (6.5%)
- Non-Hispanic 625 (60.4%)
- Data not available/Declined to Answer: 342 (33.1%)

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: 56
- 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: 3
- Total currently hospitalized: 3

- Deaths: 48
- Pending tests for residents or staff at Skilled Nursing Facilities/Assisted Living Facilities: 4 residents, 92 staff
- The outbreak at Genesis Waldorf was closed on 5/4 after 14 days with no new positive cases among residents or staff. The outbreak at Sagepoint was closed on 5/19 after 14 days with no new positive cases among residents or staff.

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.*
- Genesis La Plata and Waldorf tested their staff on Friday, 5/15. There were 2 positive staff members at Genesis Waldorf and 3 positive staff at Genesis La Plata. One case was a previous positive and has not worked since the first positive test.
- Restore tested all of their staff on Friday, 5/22. We are still awaiting results.
- All Sagepoint and Genesis La Plata residents and staff will be tested this week by the National Guard.

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 (60.9%) 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 5/28 at 8:30 a.m. (Zip code level data with counts less than 7 cases cannot be shared publicly and must remain confidential. NA: Not Available. Case rates per 1000 residents are not calculated for zip codes with less than 5 cases and for zip codes with small populations due to rate instability.)

Confirmed cases by zip code:

Zip code:	Total number of positive cases	Number of new positive cases in the last 24 hours	Number of new negative lab results in the last 24 hours	Case Rate per 1000 residents
20601	181	5	49	7.245
20602	195	3	48	8.014
20603	254	8	54	8.596
20604	3	0	0	NA
20611	5	0	0	3.711
20613	23	0	0	NA
20616	38	0	13	6.488
20617	1	0	2	NA
20622	6	0	0	2.041
20625	0	0	2	NA
20632	2	0	0	NA
20637	24	0	6	4.610
20640	39	0	13	3.832
20645	2	0	2	NA
20646	126	3	28	6.511
20658	5	0	0	NA
20662	14	0	3	4.772
20664	18	1	2	6.026
20675	8	0	1	4.788
20677	12	1	5	5.168
20693	3	0	0	2.757
20695	61	2	114	9.273

- Charles County Cases Rates by Date

Case rates are only calculated for zip codes with 4 or more confirmed COVID-19 Cases.

COVID-19 Positive Case Rate per 1000 residents for each zip code with 5 or more confirmed cases:	5/18	5/19	5/20	5/21	5/22	5/27	5/28
20601	5.796	6.044	6.375	6.458	6.541	7.162	7.245
20602	6.652	6.932	7.213	7.453	7.534	7.894	8.014
20603	7.422	7.767	7.940	8.182	8.320	8.561	8.596
20611	2.783	2.783	2.783	2.783	3.711	3.711	3.711
20616	4.951	5.122	5.293	5.293	5.464	6.488	6.488
20622	2.041	2.041	2.041	2.041	2.041	2.041	2.041
20637	3.872	3.872	3.872	4.057	4.241	4.610	4.610
20640	3.257	3.449	3.449	3.545	3.545	3.832	3.832
20646	5.453	5.506	5.714	6.088	6.141	6.458	6.511
20662	4.431	4.722	4.772	4.772	4.772	4.772	4.772
20664	5.022	5.691	5.691	6.026	6.026	6.026	6.026
20675	4.788	4.788	4.788	4.788	4.788	4.788	4.788
20677	4.737	4.737	4.737	4.737	4.737	4.737	5.168
20695	8.537	8.537	8.537	8.684	8.831	9.126	9.273

Case Rates for Zip Codes Shared by Charles County and Prince George's County:

- 20607, Accokeek: 9.28
- 20613, Brandywine: 10.71
- These are two of the lowest rates in Prince George's County. These rates are much closer to Waldorf and White Plains case rates.

Case rates for other Prince George's County Zip Codes that are near Charles County:

- 20623, Rosaryville: 9.48
- 20772, Upper Marlboro: 10.21
- 20744, Fort Washington: 11.32

Highest Case Rates among Zip Codes in Prince George's County are in the northern region of the county that surrounds Washington DC, including Hyattsville, Riverdale, Lanham, Brentwood, and Bladensburg. They are the areas of Prince George's County that are the furthest from Charles County.

Zip Code	Case Rate per 1000 residents
20783	40.33
20782	26.44
20781	25.35
20737	35.05
20784	29.17
20706	25.10
20722	31.34
20710	23.84

MISCELLANEOUS

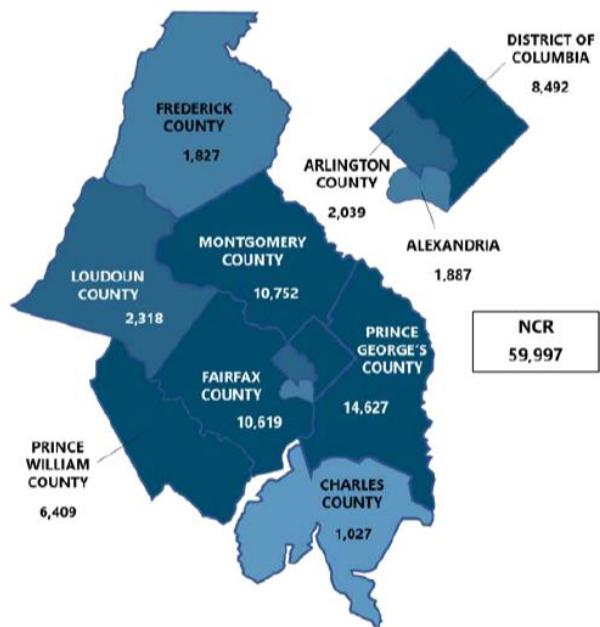
ADDITIONAL INFORMATION: *Here are the MCR MWCOG case and medical demand projections for May 28th.*

	Actual Confirmed Cases On:			Projected Cases For:								
	5/25	5/26	5/27	5/28	5/29	5/30	5/31	6/1	6/2	6/3	6/10	6/17
Washington DC	8,334	8,406	8,492	8,649	8,805	8,959	9,111	9,261	9,410	9,557	10,544	11,458
Charles Co., MD	1,001	1,008	1,027	1,040	1,052	1,064	1,076	1,088	1,100	1,111	1,187	1,256
Frederick Co., MD	1,746	1,786	1,827	1,848	1,870	1,892	1,914	1,937	1,960	1,983	2,155	2,343
Montgomery Co., MD	10,291	10,467	10,752	11,026	11,304	11,583	11,866	12,151	12,440	12,731	14,850	17,116
Prince George's Co., MD	14,240	14,333	14,627	14,867	15,107	15,346	15,584	15,822	16,059	16,295	17,924	19,512
Arlington Co., VA	1,935	1,988	2,039	2,073	2,108	2,143	2,177	2,212	2,247	2,282	2,530	2,782
Fairfax Co., VA	9,947	10,181	10,619	10,876	11,135	11,396	11,660	11,926	12,194	12,464	14,412	16,463
Loudoun Co., VA	2,186	2,274	2,318	2,377	2,437	2,500	2,565	2,631	2,700	2,771	3,332	4,025
Prince William Co., VA	6,225	6,320	6,409	6,573	6,739	6,905	7,073	7,242	7,413	7,585	8,823	10,124
Alexandria, VA	1,785	1,824	1,887	1,925	1,963	2,001	2,039	2,076	2,113	2,149	2,398	2,635
NCR	57,690	58,587	59,997	61,254	62,520	63,789	65,065	66,346	67,636	68,928	78,155	87,714

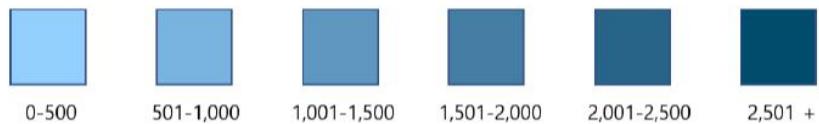
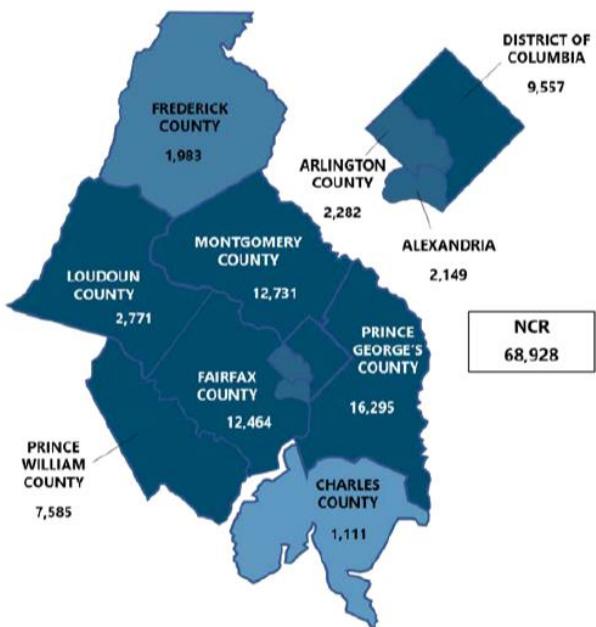
Medical Demand Projections:

	Actual Confirmed Cases On:			Projected Cases (Hospitalized) [ICU] {Ventilator} For:								
	5/25	5/26	5/27	6/3	6/10	6/17						
Washington DC	8,334	8,406	8,492	9,557 (1,911) [459] {229}	10,544 (2,109) [506] {253}	11,458 (2,292) [550] {275}						
Charles Co., MD	1,001	1,008	1,027	1,111 (222) [53] {27}	1,187 (237) [57] {28}	1,256 (251) [60] {30}						
Frederick Co., MD	1,746	1,786	1,827	1,983 (397) [95] {48}	2,155 (431) [103] {52}	2,343 (469) [112] {56}						
Montgomery Co., MD	10,291	10,467	10,752	12,731 (2,546) [611] {306}	14,850 (2,970) [713] {356}	17,116 (3,423) [822] {411}						
Prince George's Co., MD	14,240	14,333	14,627	16,295 (3,259) [782] {391}	17,924 (3,585) [860] {430}	19,512 (3,902) [937] {468}						
Arlington Co., VA	1,935	1,988	2,039	2,282 (456) [110] {55}	2,530 (506) [121] {61}	2,782 (556) [134] {67}						
Fairfax Co., VA	9,947	10,181	10,619	12,464 (2,493) [598] {299}	14,412 (2,882) [692] {346}	16,463 (3,293) [790] {395}						
Loudoun Co., VA	2,186	2,274	2,318	2,771 (554) [133] {66}	3,332 (666) [160] {80}	4,025 (805) [193] {97}						
Prince William Co., VA	6,225	6,320	6,409	7,585 (1,517) [364] {182}	8,823 (1,765) [423] {212}	10,124 (2,025) [486] {243}						
Alexandria, VA	1,785	1,824	1,887	2,149 (430) [103] {52}	2,398 (480) [115] {58}	2,635 (527) [126] {63}						
NCR	57,690	58,587	59,997	68,928 (13,786) [3,309] {1,654}	78,155 (15,631) [3,751] {1,876}	87,714 (17,543) [4,210] {2,105}						

Actual Confirmed Cases: 5/27/20



Projected Confirmed Cases: 6/3/20



Respectfully submitted by Charles County PHEP

Intelligence Briefing 5-28-2020
 COVID Charles County
 Week 11

Updated Infection Numbers: As of 1032 hrs.

Total worldwide: 5,727,629 **+120,704** since the 5-27-20 brief.

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

5-16/17	5-17/18	5-18/19	5-19/20	5-20/21	5-21/22	5-22/23	5-24/26*	5-26/27	5-27/28
75,619	150,384	99,030	94,728	96,675	100,760	123,960	267,426	87,047	120,704

Total fatalities worldwide: 356,279 **+5,417** since the 5-27-20 brief

Total confirmed cases in the US: 1,702,911 **+21,482** since the 5-27-20 brief

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

5-16/17	5-17/18	5-18/19	5-19/20	5-20/21	5-21/22	5-22/23	5-24/26*	5-26/27	5-27/28
18,650	18,870	23,541	21,224	20,382	25,164	27,121	57,889	18,650	21,482

Total fatalities in US: 100,576 **+1,647** since 5-27-2020

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

Total confirmed cases in State in of MD: 49,709 **+1286** since the 5-27-20 brief

Total tested in the State of MD: 316,797 **+16,353** over 5-27-20

Percent of those test that test positive: **15.7%** (10% drop since last report)

Total Fatalities in State of MD: 2,307 **+37** change since the 5-27-20 brief

Number of probable deaths: 121

Total Ever Hospitalized: 8,392

Persons currently hospitalized: **1,334 -4** since 5-27-2020

5-13/14	5-14/15	5-15/16	5-16/17	5-17/18	5-18/19	5-19/20	5-20/21	5-21/22	5-22/23	5-23/26*	5-26/27	5-27/28
-12	-42	+4	-40	-40	-13	-11	-36	-36	-9	-5	+23	-4

First Responder Numbers in Charles County: NUMBERS AS OF 5-27-2020 @1230

No report over the weekend.

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

3 Self Isolation: means sick or tested positive **no change** since the last report

Weather:

Friday 82-67 storms, Sat 82-58 rain, Sunday 73-51 sun

Local:

No Stores visited this morning.

Special Commissions meeting today to discuss the future reopening process.

Maryland Update:

Gov. further loosened restrictions and opened more things.

PG County starts phase 1 June 1st.

Region:

Over 58,922 cases in the NCR as of 0700 5-28-2020.

99,602 cases in Maryland, DC, and Virginia as of 0700 on 5-28-2020.

DC has announced they will start to make arrests for those who refuse to social distance.

Virginia will require face coverings in stores and public transportation statewide starting Friday, Gov. Ralph Northam announced.

DC, NO VA and Charles County will enter into Phase One of reopening on Friday, May 29, 2020.
VA Beach cancels July 4th celebration.

Gov. John Carney says he'll lift his ban on short-term rentals in Delaware and a mandatory 14-day quarantine for out-of-state travelers effective June 1

National:

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

2.3 million Americans have filed for unemployment this week. Total of 41 million Americans have filed for unemployment since March.

Local critical infrastructure:

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

Predictions/ 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 responds, 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 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” (Nutley and Marcus, 2019, Harvard Business Review)

Respectfully submitted by Jason Stoddard

Law Enforcement Branch Briefing

COVID-19 Charles County IMT

May 28th, 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 family member off-duty, estimated return date of 05/29/20
- 2 Sworn Officers isolated
 - 2 Officers isolated due to positive test
- 1 Correctional Officer quarantined
 - Contact with household member who is COVID-19 positive, estimated return date of 06/07/20
- 1 Correctional Officers isolated
 - Showing symptoms and has been tested by doctor, awaiting results.
- 0 civilians quarantined.
- 0 civilians isolated.

Charles County Detention Center Population:

- 106 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: **66**

Warnings: **63**

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 5-28-2020
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:

Wednesday, 5/27/20 CCPS served 4686 meals at the 11 meal distribution sites. The total was +267 from the meals served on Tuesday, 5/26/20.

Meal sites located at high schools are closed on the day of their graduation events. Sites will be closed at Lackey and McDonough on June 1, at Westlake on June 2 and St. Charles on June 3. All other meal sites will operate as usual. CCPS is working on arrangements to implement the summer meals program Lunch on Us. CCPS will share details as they are finalized.

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.

The final round of learning packets for elementary school students will be at meal sites starting May 28. There are no additional packets for secondary students. Starting on June 1, middle and high school teachers will use Teams for the final two weeks of instruction. Teams lessons are canceled for high school students on the day of their school's in-person graduation event. This includes Henry E. Lackey and Maurice J. McDonough high schools on June 1, Thomas Stone and Westlake high schools on June 2, La Plata and St. Charles high schools on June 3, and North Point High School on June 4.

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. New paper packets are being distributed May 18-29.

Community Wifi:

Nothing new to report.

Access point equipment has not arrived in shipping as of yet. No construction on this project has begun.

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 once equipment arrives 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:

Maryland schools will look dramatically different when students return. A 54-page report, unveiled by Maryland's state superintendent, suggests strategies for slowly moving kids back to classrooms, including:

1. One day a week in school and the rest online
2. One week on and one week off
3. Having some grades of students at home, others at school

There are also proposals to stagger in-times during the day that would require some students to attend in the morning and others early afternoon. The report has a timeline of students returning to classrooms during Phase 3 of Maryland's re-opening plan. CCPS has not determined how it will reopen in the Fall 2020 at this time.

Respectfully submitted by Jason Stoddard and Michael Meiser



Serving Charles County

Charles County Volunteer Firemen's Association, Inc.

Post Office Box #21, La Plata, Maryland 20646

May 28th, 2020

Re: Volunteer Fire/EMS Brief

Items Being Worked On:

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

Stations/Apparatus:

- No Station's with contamination issues.
- No Apparatus with any contamination issues.

Personnel Exposure – None:

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
59 EMS Related Incidents ----- 12 Fire Related Incidents

Other Information:

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

Respectfully Submitted,

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