



Incident Action Plan



From 6/16/20 8:00 To 6/23/20 8:00 -

OPERATIONAL PERIOD

INCIDENT OBJECTIVES (ICS 202)

| | | | | | | |
|--|---|---|---|---|---|---|
| 1. Incident Name Charles County COVID-19 | 2. Operational Period | Date From: 6/16/20 Time From: 8:00 | Date To: 6/23/20 Time To: 8:00 | | | |
| 3. Objectives A. Maximize the safety and overall health and well-being, including mental health of the residents, county employees, and responders, throughout this incident. Minimize the effects resulting from this incident on all personnel. <hr/> B. Conduct surveillance of COVID-19 cases in collaboration with the health department, hospital, physicians, and other health care providers. <hr/> 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. <hr/> D. Prepare for and handle the human reaction crisis contingencies in long terms. <hr/> E. Prepare for long term order maintenance. <hr/> F. Prepare for and sustain our communities' hierarchy of needs throughout this incident. <hr/> G. Ensure all practical steps to "Slow the Spread" of transmission of COVID-19. <hr/> H. Prepare for the New Normal. <hr/> I. Conduct an After Action Analysis including all divisions and functions of the COVID-19 response. | | | | | | |
| 4. Operational Period Command Emphasis <div style="background-color: #f0f0f0; padding: 5px;"> On EMS calls- one person in (minimum of gloves, and N95) investigate, if a PUI, STOP and gown up including eye protection. SO 2020-01, Section B-3. </div> | | | | | | |
| General Situational Awareness <div style="background-color: yellow; padding: 10px;"> "Protect yourself and others. Stay home if yo are sick, cover coughs and sneezes and, wash your hands often. " </div> | | | | | | |
| 5. Site Safety Plan Required? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Approved Site Safety Plan(s) Located at: | | | | | | |
| 6. Attachments (check if attached) <table style="width: 100%;"> <tr> <td style="width: 33%;"> <input checked="" type="checkbox"/> ICS 203 <input type="checkbox"/> ICS 204 <input type="checkbox"/> ICS 205 <input checked="" type="checkbox"/> ICS 205A <input type="checkbox"/> ICS 206 </td> <td style="width: 33%;"> <input type="checkbox"/> ICS 207 <input checked="" type="checkbox"/> ICS 208 <input type="checkbox"/> Map/Chart <input type="checkbox"/> Weather <input type="checkbox"/> Forecast/Tides/Currents </td> <td style="width: 33%;"> <input checked="" type="checkbox"/> ICS 214 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </td> </tr> </table> | | | | <input checked="" type="checkbox"/> ICS 203 <input type="checkbox"/> ICS 204 <input type="checkbox"/> ICS 205 <input checked="" type="checkbox"/> ICS 205A <input type="checkbox"/> ICS 206 | <input type="checkbox"/> ICS 207 <input checked="" type="checkbox"/> ICS 208 <input type="checkbox"/> Map/Chart <input type="checkbox"/> Weather <input type="checkbox"/> Forecast/Tides/Currents | <input checked="" type="checkbox"/> ICS 214 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| <input checked="" type="checkbox"/> ICS 203 <input type="checkbox"/> ICS 204 <input type="checkbox"/> ICS 205 <input checked="" type="checkbox"/> ICS 205A <input type="checkbox"/> ICS 206 | <input type="checkbox"/> ICS 207 <input checked="" type="checkbox"/> ICS 208 <input type="checkbox"/> Map/Chart <input type="checkbox"/> Weather <input type="checkbox"/> Forecast/Tides/Currents | <input checked="" type="checkbox"/> ICS 214 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | | | | |
| 7. Prepared by: Name: <u>Joe Hoffmaster</u> Position/Title: <u>PSC</u> Signature: _____ | | | | | | |
| 8. Approved by Incident Commander: Name: <u>Michelle Lilly</u> Signature: _____ | | | | | | |
| ICS 202 | IAP Page <u>2</u> | Date/Time: <u>June 17, 2020 @18:30</u> | | | | |

ORGANIZATION ASSIGNMENT LIST (ICS 203)

| 1. Incident Name Charles County COVID-19 | | 2. Operational Period Date From: 6/16/20 Date to: 6/23/20 Time From: 8:00 Time to: 8:00 | | | | | | | | | | | | | | | | | | | | | | | |
|--|------------------|---|------|-----------------------|-------------|------------|------------------|----------------|-------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 3. Incident Commander and Staff UC Dr. Howard Haft UC Michelle Lilly Deputy Melanie Gardiner Deputy Tony Rose Safety Officer John Filer Public Information Office Jennifer Harris Donna Fuqua Linda Warner Intell Officer Jason Stoddard | | 7. Operations Section Chief Deputy a. Branch I Public Health Branch Director Ranston Harvey Deputy Mary Lilly DSS Liaison Officer Tom Brown Robbie Jones Hospital Bill Grimes John Filer Nursing Homes Tiffany Brown Health Care Providers Melanie Gardiner Rehab Centers Eddie Kratzer Assisted Living Rosalinda Horton Funeral Services Catarina Patterson | | | | | | | | | | | | | | | | | | | | | | | |
| 4. Agency Representative <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;">Agency</th> <th style="width: 80%;">Name</th> </tr> </thead> <tbody> <tr><td>Intell officer Deputy</td><td>Mike Meiser</td></tr> <tr><td>Lifestyles</td><td>Sandy Washington</td></tr> <tr><td>Public Schools</td><td>Mike Meiser</td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table> | | Agency | Name | Intell officer Deputy | Mike Meiser | Lifestyles | Sandy Washington | Public Schools | Mike Meiser | | | | | | | | | | | | | | | b. Branch II Public Safety Branch Director Mark Kaufmann Jr. Deputy Scott Herbert DES EMS Steve Finch Vol EMS Andrew Spalding Mitchell Lewis Vol Fire Scott Herbert Logistics | |
| Agency | Name | | | | | | | | | | | | | | | | | | | | | | | | |
| Intell officer Deputy | Mike Meiser | | | | | | | | | | | | | | | | | | | | | | | | |
| Lifestyles | Sandy Washington | | | | | | | | | | | | | | | | | | | | | | | | |
| Public Schools | Mike Meiser | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 5. Planning Section Chief Joe Hoffmaster Deputy Bill Smith Resource Unit Situation Unit Jen Adams Documentation Unit Bill Smith Demobilization Unit Human Resources | | c. Branch III Law Enforcement Branch Director, CCSO Chris Schmidt Deputy, CCSO Cari Baker La Plata Police Chris Becker MD State Police Thomas Quade DNR Catherine Meddelin MdTA Brian Lawrence | | | | | | | | | | | | | | | | | | | | | | | |
| Technical Specialists (name / specialty) | | d. Branch IV Infrastructure Branch Director Deputy SMECO Jennifer Raley Grocery | | | | | | | | | | | | | | | | | | | | | | | |
| 6. Logistics Section Chief Nick Ellis Deputy Support Branch Donations Ed Tucker Supply Unit Facilities Unit Nick Ellis Ground Support Unit | | Propane Natural Gas | | | | | | | | | | | | | | | | | | | | | | | |
| Service Branch Service Branch Dir. Communications Unit Jeffrey Clements Medical Unit Security Unit Food Unit | | 10. Finance Section Chief Jennifer Adams Deputy Time Unit Procurement Unit Comp/Claims Unit Cost Unit | | | | | | | | | | | | | | | | | | | | | | | |
| 9. Prepared by: Name: Joe Hoffmaster | | Position/Title: PSC Signature | | | | | | | | | | | | | | | | | | | | | | | |
| ICS 203 | IAP Page 3 | Date/Time: June 17, 2020 @ 18:30 | | | | | | | | | | | | | | | | | | | | | | | |

| ORGANIZATION ASSIGNMENT LIST (ICS 203) | |
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| | | | |
|--|--|---|----------------------|
| 1. Incident Name Charles County COVID-19 | | 2. Operational Period Date From: 6/16/20 Date to: 6/23/20 Time From: 8:00 Time to: 8:00 | |
| 3. Incident Commander and Staff | | 7. Operations Section | |
| UC | Dr. Howard Haft | Chief | |
| UC | Michelle Lilly | Deputy | |
| | | | |
| Deputy | Melanie Gardiner | | |
| Deputy | Tony Rose | | |
| Safety Officer | John Filer | a. Branch V | Governance |
| Public Information Office | Jennifer Harris Donna Fuqua Linda Warner | | |
| Intell Officer | Jason Stoddard | | |
| 4. Agency Representative | | Charles County Govern. | Michele Lilly |
| | | | |
| Agency | Name | Town of LaPlata | Chris Becker |
| Intell officer Deputy | Mike Meiser | Town of Indian Head | Ryan Hicks |
| Lifestyles | Sandy Washington | | |
| CC Public Schools | Michael Meiser | | |
| | | | |
| | | b. Branch VI | Business |
| | | Branch Director | 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 | | 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 | |
| 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: | June 17, 2020 @18:30 |

COMMUNICATIONS LIST (ICS 205A)

| 1. Incident Name Charles County COVID-19 | | 2. Operational Period: | | Date From: 6/16/20 | Date to: 6/23/2020 |
|--|-------------------|---|--|------------------------------|------------------------------|
| | | | | Time From: 8:00 | Time to: 8:00 |
| 3. Basic Local Communications Information: | | | | | |
| Name - Last | Name-First | Representing | Email | Phone | |
| Adams | Jennifer | DES FSC | AdamsJen@Charlescountymd.gov | | |
| Baker | Cari | CCSO | bakerce@ccso.us | | |
| Becker | Chris | La Plata Police | cbecker@townoflaplata.org | | |
| Brown | Darrell | Business Director Econ Dev | Brownd@charlescountymd.gov | | |
| Cress | Lauri | Charles Regional Medical Center | lauri.cress@umm.edu | | |
| Ellis | Nick | DES- Logistics | DESLogistics@charlescountymd.gov | | |
| Filer | John | DES- Liaison | FilerJ@charlescountymd.gov | | |
| Finch | Stephen | DES | FinchS@charlescountymd.gov | | |
| Fuqua | Donna | PIO | Fuquad@CharlesCountyMD.gov | | |
| Harris | Jennifer | PIO | HarrisJ@CharlesCountyMD.gov | | |
| Hoffmaster | Joe | Planning Section | DESPlanning@charlescountymd.gov | | |
| Kaufmann | Mark Jr | PS Branch Dir. Vol Fire Chief | markeng1trk@hotmail.com | | |
| Konschak | Matt | NSWC IHD | matthew.konschak@navy.mil | | |
| Lilly | Michelle | CCDES Director, Unified Command | LillyM@charlescountymd.gov | | |
| Lilly | Mary | C C Dept. of Health | Mary.Lilly@maryland.gov | | |
| Lowry | Susan | MDH | suzan.lowry@maryland.gov | | |
| Mills | D.J. | Vol Fire- Special Operations Chief | djm31_9@hotmail.com | | |
| O'Malley Simpson | Katie | CCBOE PIO | Komalley@ccboe.com | | |
| Proctor | Destiny | DES | proctord@charlescountymd.gov | | |
| Quade | Thomas | MSP | Thomas.Quade@maryland.gov | | |
| Rose | Tony | DES Deputy Director, Unified | RoseT@charlescountymd.gov | | |
| Russell | Cindy | DSS | cindy.russell@maryland.gov | | |
| Schmidt | Louis Chris III | CCSO | schmidtlo@ccso.us | | |
| Seaman | Kevin | CCEMS | seamank@chalescountymd.gov | | |
| Smith | Bill | CCVFA/CCAEMS | Smithb@ccvfireems.org | | |
| Spalding | Andrew | Volunteer EMS Chief | chiefems@ccvfireems.org | | |
| 6. Prepared by: Name: _____ Joe Hoffmaster _____ Title: _____ PSC _____ Signature _____ | | | | | |
| ICS 205A | IAP Page <u>5</u> | Date/Time: _____ June 17, 2020 @18:30 _____ | | | |

COMMUNICATIONS LIST (ICS 205A)

| 1. Incident Name | | 2. Operational Period: | | Date From: | 6/16/20 | Date to: | 6/23/2020 |
|---|--------------|-----------------------------------|--|-------------------|---------|-----------------|-----------|
| Charles County COVID-19 | | | | Time From: | 8:00 | Time to: | 8:00 |
| 3. Basic Local Communications Information: | | | | | | | |
| Name - Last | Name-First | Representing | Email | Phone | | | |
| Stoddard | Jason | Intell | jestoddard@ccboe.com | | | | |
| Ranston | Harvey | CCDOH | Ranston.harvey@maryland.gov | | | | |
| Laschatt | Lisa | CCDOH | lisa.laschatt@maryland.gov | | | | |
| Meiser | Michael | CCPS | mlmeiser@ccboe.com | | | | |
| EOC- CC | | CCEOC | DESEOC@charlescountymd.gov | | | | |
| Cherry | Lori | LOGS- Deputy | CherryL@charlescountymd.gov | | | | |
| Herbert | Scott | PS LOGS | sherbert@hvfdeems.org | | | | |
| Haft | Howard | CCDH | Howard.haft@maryland.gov | | | | |
| Raley | Jennifer | SMECO | Jennifer.Raley@SMECO.Coop | | | | |
| Farr | Courtney | SMECO | Courtney.Farr@SMECO.Coop | | | | |
| Law | Natasha | SMECO | Natsha.Law@SMECO.Coop | | | | |
| 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@chalrescountymd.gov | | | | |
| Jones | Robbie | HD-Liaison | JonesRob@Charlescountymd.gov | | | | |
| Hicks | Ryan | Indian Head | ryan@townofindianhead.org | | | | |
| Lewis | Mitchell | Volunteer EMS Chief, Assistant | mlewis@WaldorfVFD.com | | | | |
| Mott | Robert (Bob) | VEIP Manager Document Facil. | capt302a@gmail.com | | | | |
| Rands | Ray | VEIP Manager | raymond.rands@maryland.gov | | | | |
| Edge | Bill | CCSO-Safety | | | | | |
| Peer | Support | Peer Support Team | DESPeersupport@charlescountymd.gov | | | | |
| Courtney | Shannon | Peer Support Team Leader | Shannonc@charlescountymd.gov | | | | |
| | | | | | | | |

SAFETY MESSAGE/PLAN (ICS 208)

| | | | |
|---|------------------------------|---|---|
| 1. Incident Name Charles County COVID-19 | 2. Operational Period | Date From: 6/16/20 Time From: 8:00 | Date To: 6/23/20 Time To: 8:00 |
| 3. Safety Message/Expanded Safety Message, Safety Plan, Site Safety Plan: | | | |
| <p>"Protect yourself and others. Stay home if yo are sick, cover coughs and sneezes and, wash your hands often. "</p> | | | |
| 1. Total identified PUI's transported as of 6/5: 991 Total # of patients testing positive : 152 | | | |
| 2. PPE stockpiles remain stable with an estimated supply range of 10+ days based on current call volumes. | | | |
| 3.Special Order 2020-01 Version 4.1 has been updated to include new travel guidance from MIEMSS as well as out of County decon best practices. | | | |
| 4. PPE is for EVREYONE. Share, we have plenty. | | | |
| 5. Speical Order 2020-03 Version 2.1 was updated on 05-06-20-2020. New guidelines added on employee return to work procedures. | | | |
| 6. Personnel who report having a fever, sore throat, cough or other respiratory related symptoms should stay at home and self-isolate until they are symptom free for a period of 72 hours. | | | |
| | | | |
| 7. Instructional video for self decon of apparatus is located at the link below. | | | |
| https://youtu.be/QYMLHwkQNVY | | | |
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| | | | |
| 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>June 17, 2020 @18:30</u> | |

ACTIVITY LOG (ICS 214)

[illegible]

ACTIVITY LOG (ICS 214)

[illegible]



Safety Officer's Report Charles County EOC

06-17-20

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

Today's Safety Message: "Protect yourself and others. Stay home if you are sick, cover coughs and sneezes and, wash your often."

Total number of PUI's transported to date: 991

Total number of patients transported by EMS testing + for COVID: 152

Total number of first responders on self-isolation: 0

Total number of first responders on quarantine: 1

Total number of first responders + for COVID-19: 10

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

Total number of fire stations sanitized: 6

Daily Estimated PPE Burn Rate: 14 sets/day



10425 Audie Lane
La Plata, MD 20646



301-399-1143



DESsafety@charlescountymd.gov



www.charlescountymd.gov



Charles County DES - All Incidents



Charles County - Coronavirus PUI nCoV (CAD)



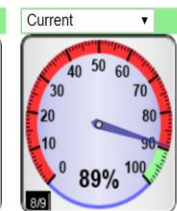
(DRAFT) Charles County EMS - HTSD



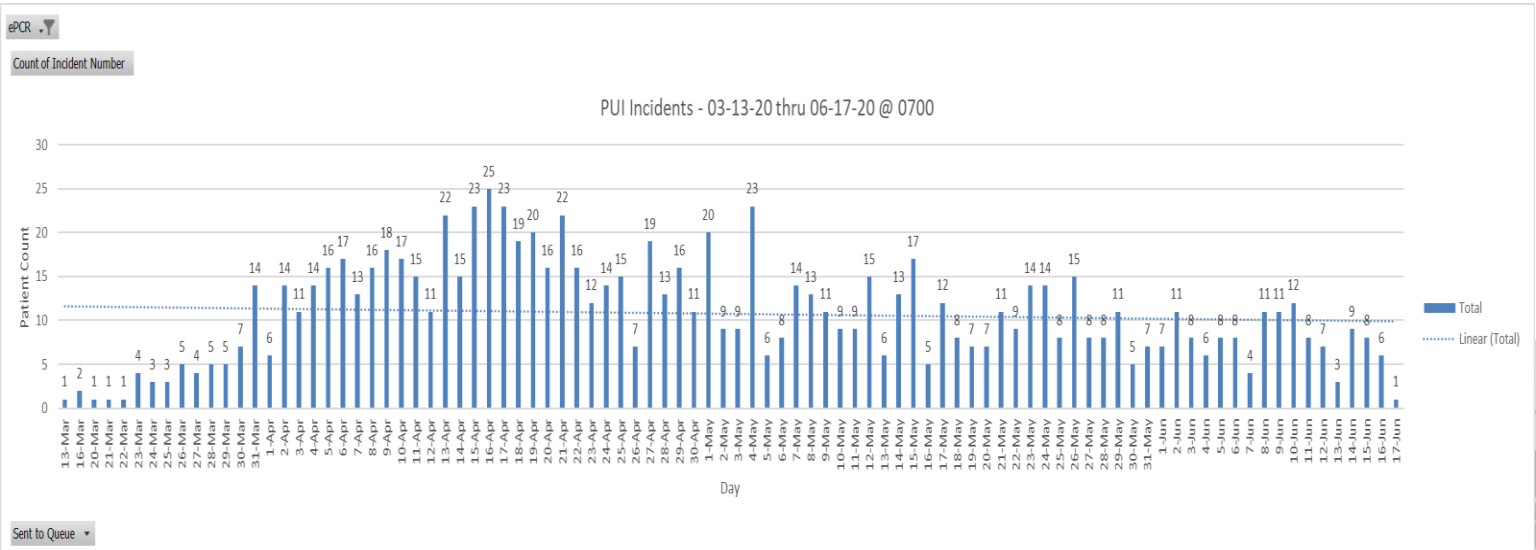
Charles County EMS - Low ALS Resource



Charles County EMS - Hospital Drop Time (30 Min)

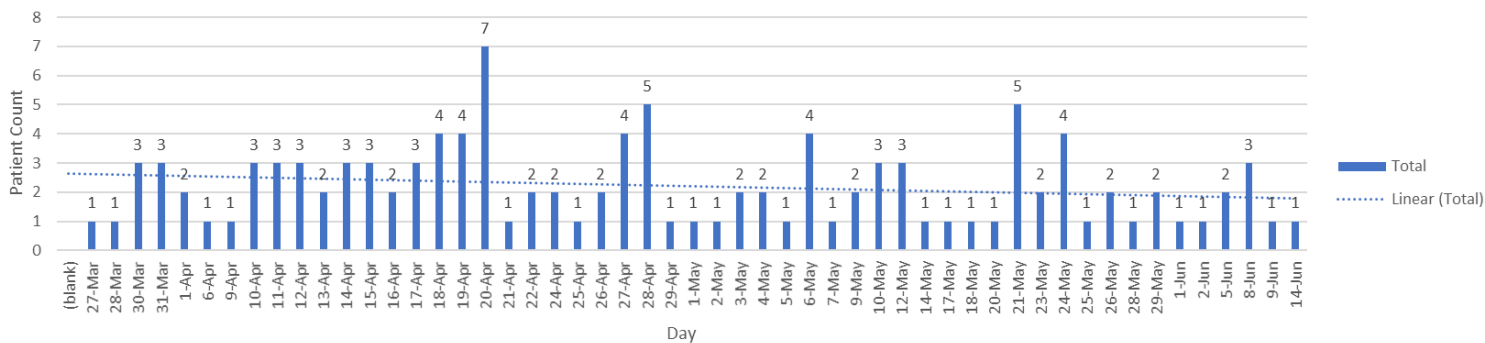


Charles County EMS - EMTALA



Count of Patient Name

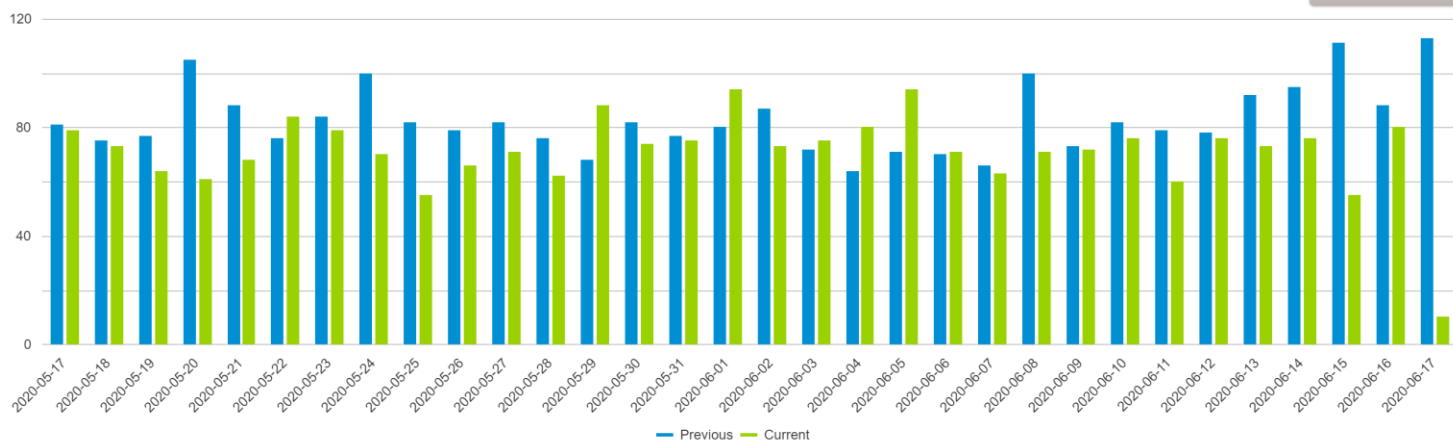
YTD COVID+ Patients Transported by EMS



Date of EMS Transport

Count of Incident Reported

Compare To: One Year



PROTECT YOURSELF AND OTHERS



Stay home if you're sick.



Cover coughs and sneezes.



Wash your hands often.



For more information: cdc.gov/COVIDtravel



PUBLIC HEALTH BRANCH BRIEFING

COVID-19 PANDEMIC RESPONSE

June 17, 2020

GENERAL REPORTING INFORMATION

INFECTIOUS DISEASE

CASE COUNT—CHARLES COUNTY

As of 6/17/2020, total case count for Charles County is **1,296**.

- *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 June 18 at 3 p.m. by CCDOH nurse liaisons.

ALL-PARTNER

- Now included in weekly coalition webinar with Dr. Haft.

MARYLAND EPIDEMIOLOGY & SURVEILLANCE PROFILE

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

- 1) **Latest case counts** – total: 62,969 (378,374 negative)
- 2) **New cases:** 560
 - 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 (-40 last 24 hours); total current 702; total ever 10,309

- e) Deaths -- Total 2,866 (15 last 24 hours)
- f) Release from isolation – 4,596

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

RESOURCE DISTRIBUTION

- 14 orders received were received and filled June 16.
- A new PPE from state arrived today.

VOLUNTEERS

MARYLAND MEDICAL RESERVE CORPS

- 2 volunteers performed COVID-19 testing at a local facility last Thursday. Total hrs.: 8
- An MRC nurse will test tomorrow at a local facility.

CAREGIVER SERVICE CORPS

- Nothing new to report.

TESTING

VEIP TESTING SITE UPDATE

- Tested to Date: 1,563
- The Waldorf VEIP operation runs Tuesday/Thursday from 8:00 am - Noon by appointment only. Next test date is Tuesday, June 16.
- State is working towards having sites become 'no provider'. Meaning that anyone would be able to set their own appointment without a doctor's order.
- CCDOH is working out the process internally to actually use 'our' provider number to allow the health department help any positive resulting tests to the care they will need.
- We are hoping that this will increase testing numbers at sites.
- Appointments can also be entered by providers.

CHARLES COUNTY EPIDEMIOLOGY & SURVEILLANCE PROFILE

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 6/15 at 9 a.m., total case count for Charles County was 1296 cases. *(There was a total of 14 new cases in the last 24 hours).*

There have been 83 confirmed deaths associated with COVID-19. This equates to 6.4% of total confirmed cases. The Charles County death rate of 6.4% 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. We continue to see nursing homes related deaths due to the current outbreak at the Charlotte Hall Veterans Home where some Charles County residents reside. There were 2 probable COVID-19 deaths. COVID-19 is listed as the cause of death, but laboratory testing has not yet confirmed.

Average age of fatalities: 76.8 years

Age Distribution of Fatalities:

- 0-39 years: 0
- 40-69 years: 22 (25.9%)
- 70-79 years: 38 (44.7%)
- 80+ years: 29 (29.4%)

Gender breakdown among fatalities:

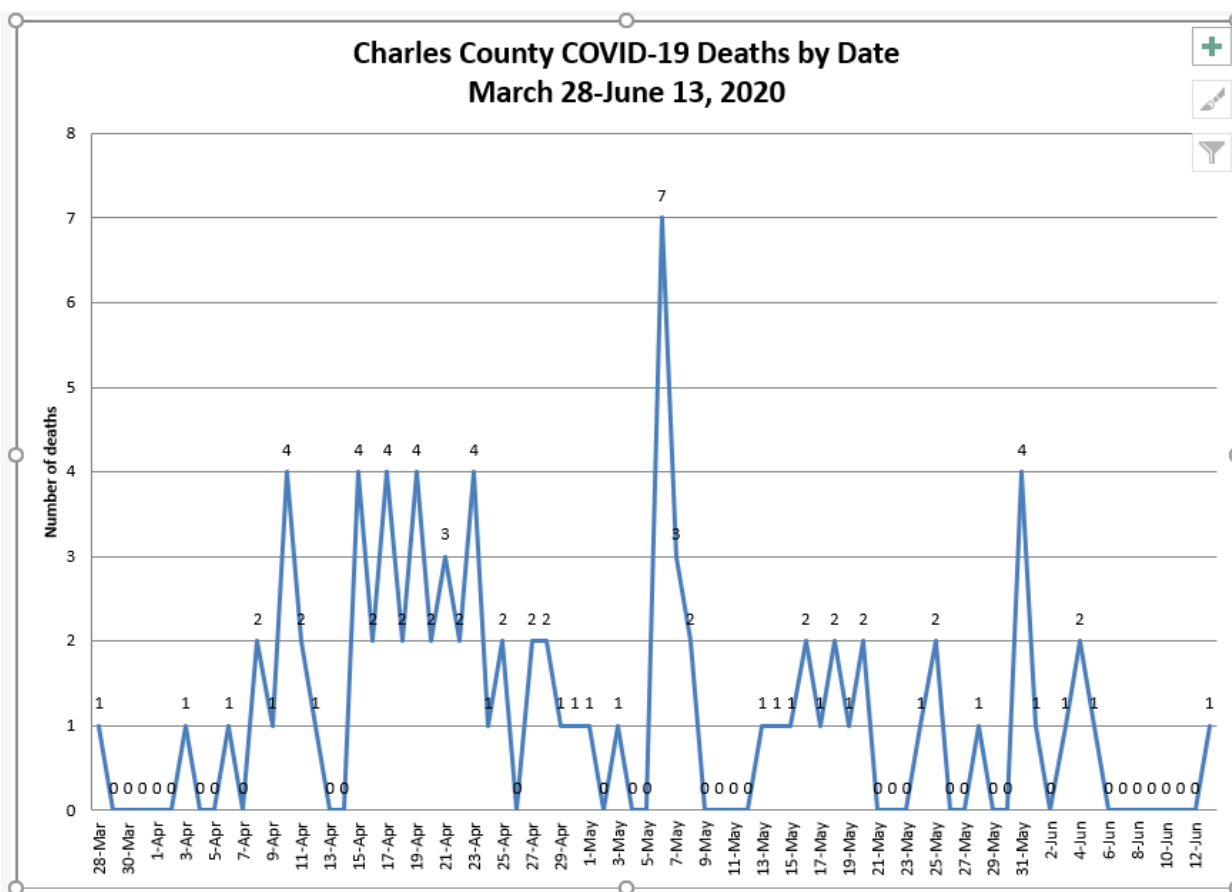
- 47 or 55.3% Female
- 38 or 44.7% Male

Race breakdown among fatalities:

- 44.7% Non-Hispanic White
- 48.3% Non-Hispanic Black
- 3.5% Non-Hispanic Asian
- 3.5% Hispanic

Location of deaths:

- Hospital Inpatient: 52 or 61.2%
- Nursing Home: 22 or 25.9%
- Other/Home/Emergency Room/Outpatient: 11 or 12.9%



- Total Number of positive lab results: 1296
- Number of positive lab results in last 24 hours: 14
- Total Number of negative lab results: 9100
- Number of negative lab results in last 24 hours: 427
- Total testing volume for Charles County (positive and negative): 10396
- Total Positivity Rate for all lab results thus far: 12.4% (state 12.0%)
- Positivity Rate for all lab results in last 24 hours: 3.2%
- Average number of days from specimen collection date to reporting to public health for all positive and negative lab results (N=1292) between June 4-10: 2.40 days
- Average number of days from specimen collection date to reporting to public health for all positive lab results (N=71) between June 4-10: 2.97 days
- Data on average number of days from specimen collection date to public health reporting will be done on a weekly basis and reported on the Friday report.
- Recovered and released from isolation: 349
- Partially recovered with improved symptoms: 57
- Known asymptomatic cases: 36
- 223 or 17.2% required hospitalization. Hospitalization rate is steadily decreasing. Peak in hospitalization rate coincided with the peak in the skilled nursing facility outbreaks.

- Among confirmed cases, 730 (56.3%) Female; 562 (43.7%) Male
- 11% Healthcare Workers
- 1.0% First Responders: EMS, Fire, Law Enforcement
- 30% have underlying health conditions
- Age range of positive COVID-19 cases: 0-100 years

Age Distribution for Charles County cases:

- Under 18 years: 49 (3.8%)
- 18-64 years: 1006 (77.6%)
- 65+ years: 241 (18.6%)

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 Monday, June 15th and no alert for Tuesday, June 16th. Patient volume was 67 patients on 6/15 and 53 patients on 6/16. Patient volume drops slightly over the weekend and increases on weekdays. Patient volume was high on 6/15. All were discharged to home for self-care.
- On 6/15, 27 patients presented with ILI or at least one COVID-19 like symptoms (40% of total patient volume). 16 out of 27 ILI were there for either a COVID-19 test or COVID-19 Antibody test. Diagnoses for ILI patients on Monday included contact with and exposure to other viral communicable diseases, encounter for screening for other viral diseases, migraine, acute pharyngitis, shortness of breath, encounter for screening for respiratory tuberculosis, unspecified viral infection, pneumonia, COVID-19, and acute maxillary sinusitis. 2 patients were diagnosed as COVID-19. There were 10 Visit of Interest tags. 9 cases had exposure to a COVID-19 positive case and presented for a COVID-19 test. The other Visit of Interest tag was also due to contact with and exposure to other viral communicable disease, but the disease agent was not specified and a COVID-19 test was not administered. They completed 14 COVID-19 tests and 2 antibody tests on 6/15.
- On 6/16, 20 patients presented with ILI or at least one COVID-19 like symptoms (38% of total patient volume). 15 ILI presented for a COVID-19 test or antibody test (75%). Diagnoses for ILI patients on Tuesday included contact with and exposure to other viral communicable diseases, encounter for screening for other viral diseases, unspecified chest pain, and mild intermittent asthma with exacerbation. On 6/16, there were 15 “Visit of Interest” CDC Classifier tags that were due to COVID-19 exposure to a positive case, and all cases presented for a COVID-19 test. There were 2 additional Visit of Interest tags. One presented with COVID-19 probable symptoms but administration of a COVID-19 test was not indicated. The other Visit of Interest tag was for a Hepatitis screening. They completed a total of 15 COVID-19 tests and 0 COVID-19 antibody tests on 6/16.

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:

- 6/13: 3
- 6/14: 9
- 6/15: 8
- 6/16: 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 6/17 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: 1,296 cases on 6/17 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 (1.1%)
- Black/African American: 435 (33.6%)
- White: 260 (20.1%)
- Other /2+ races/American Indian/Alaskan Native: 90 (6.9%)
- Data not available/Declined to Answer: 496 (38.3%)

Ethnicity Breakdown

- Hispanic 66 (5.1%)
- Non-Hispanic 626 (48.3%)
- Data not available/Declined to Answer: 604 (46.6%)

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: 57
- 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: 2
- Deaths: 48

- Pending tests for residents or staff at Skilled Nursing Facilities/Assisted Living Facilities: 3 residents and 2 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 Sage Point 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. All staff results were negative.
- All Sagepoint and Genesis La Plata residents and staff was tested by the National Guard. All staff results from Genesis La Plata have come back negative. That outbreak will be closed.
- The health department will be working next to help the assisted living facilities in testing all of their staff and residents. We will start with Morningside Assisted Living since they have had an outbreak.
- The health department is seeing more cases in other congregate living settings such as group homes for those with developmental disabilities. We are recommending that all staff and residents at these facilities be tested as well.
- Both Genesis La Plata and Genesis Waldorf have agreed to do regular testing of residents and staff on a voluntary basis.
- CMS recommends regular testing of staff and residents at long term care facilities. It is expected that an executive order will come from the state for routine testing of staff members and possibly residents in the near future.

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 (60.4%) 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 6/17 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 last 24 hours | Number of new negative lab results in last 24 hours | Case Rate per 1000 residents |
|-----------|--------------------------------|---|---|------------------------------|
| 20601 | 243 | 4 | 51 | 9.85 |
| 20602 | 246 | 2 | 49 | 10.10 |
| 20603 | 294 | 1 | 53 | 10.08 |
| 20604 | 3 | 0 | 2 | NA |
| 20611 | 6 | 0 | 3 | 4.64 |
| 20612 | 1 | 1 | 1 | NA |
| 20613 | 23 | 0 | 1 | NA |
| 20616 | 48 | 0 | 15 | 8.20 |
| 20617 | 1 | 0 | 2 | NA |
| 20622 | 15 | 0 | 0 | 3.88 |
| 20625 | 0 | 0 | 1 | NA |
| 20632 | 2 | 0 | 1 | NA |
| 20637 | 32 | 0 | 6 | 6.27 |
| 20640 | 50 | 2 | 24 | 4.89 |
| 20645 | 4 | 1 | 0 | NA |
| 20646 | 155 | 1 | 176 | 8.15 |
| 20658 | 5 | 0 | 1 | NA |
| 20662 | 18 | 0 | 8 | 6.13 |
| 20664 | 21 | 0 | 2 | 7.37 |
| 20675 | 10 | 0 | 7 | 5.98 |
| 20677 | 11 | 0 | 3 | 4.74 |
| 20693 | 3 | 0 | 1 | 2.76 |
| 20695 | 84 | 2 | 19 | 12.66 |

- **Charles County Cases Rates by Date**

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

| COVID-19 Positive Case Rate per 1000 residents for each zip code with 5 or more confirmed cases: | 6/1 | 6/3 | 6/5 | 6/8 | 6/9 | 6/10 | 6/12 | 6/15 | 6/17 |
|--|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| 20601 | 8.36 | 8.40 | 8.61 | 8.94 | 9.11 | 9.19 | 9.36 | 9.69 | 9.85 |
| 20602 | 8.74 | 8.94 | 9.22 | 9.38 | 9.34 | 9.62 | 9.74 | 9.98 | 10.10 |
| 20603 | 9.22 | 9.36 | 9.60 | 9.67 | 9.67 | 9.74 | 9.77 | 9.94 | 10.08 |
| 20611 | 4.64 | 4.64 | 4.64 | 4.64 | 4.64 | 4.64 | 4.64 | 4.64 | 4.64 |
| 20616 | 6.488 | 7.34 | 7.51 | 7.85 | 7.85 | 7.85 | 8.02 | 8.20 | 8.20 |
| 20622 | NA | 3.06 | 3.06 | 3.47 | 3.47 | 3.67 | 3.88 | 3.88 | 3.88 |
| 20637 | 5.35 | 5.35 | 5.72 | 5.72 | 5.90 | 5.90 | 6.27 | 6.27 | 6.27 |
| 20640 | 4.22 | 4.41 | 4.50 | 4.60 | 4.60 | 4.69 | 4.69 | 4.69 | 4.89 |
| 20646 | 6.72 | 7.20 | 7.52 | 7.78 | 7.78 | 7.94 | 8.05 | 8.05 | 8.15 |
| 20662 | 5.11 | 5.79 | 6.13 | 6.13 | 6.13 | 6.13 | 6.13 | 6.13 | 6.13 |
| 20664 | 6.70 | 7.37 | 7.37 | 7.37 | 7.37 | 7.37 | 7.37 | 7.37 | 7.37 |
| 20675 | 5.39 | 5.39 | 5.39 | 5.39 | 5.98 | 5.98 | 5.98 | 5.98 | 5.98 |
| 20677 | 5.17 | 5.17 | 5.17 | 5.17 | 4.74 | 4.74 | 4.74 | 4.74 | 4.74 |
| 20695 | 10.16 | 10.89 | 11.04 | 11.19 | 11.33 | 11.33 | 11.92 | 12.36 | 12.66 |

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

- 20607, Accokeek: 10.92
- 20613, Brandywine: 13.15
- 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: 11.30
- 20772, Upper Marlboro: 11.94
- 20744, Fort Washington: 14.08

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.

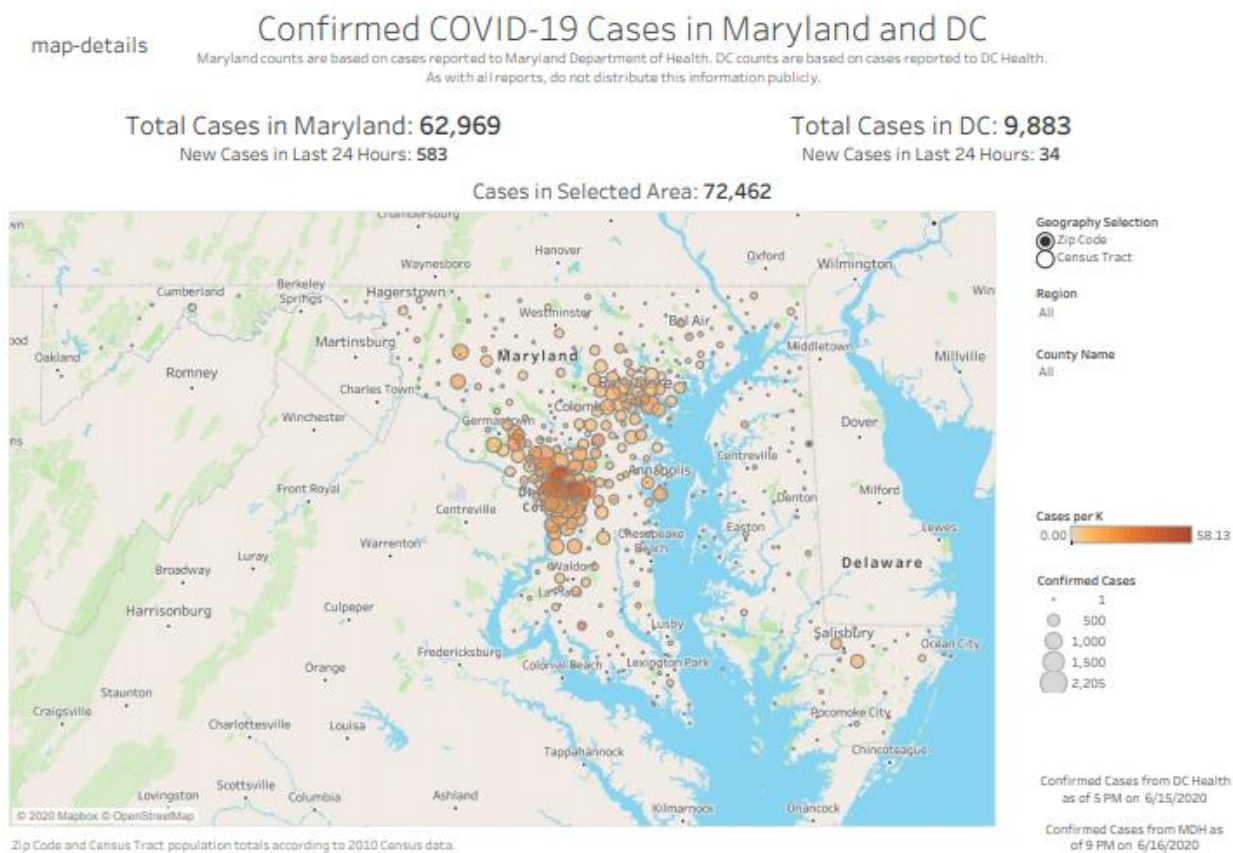
| Zip Code | Case Rate per 1000 residents |
|----------|------------------------------|
| 20783 | 49.57 |
| 20782 | 34.75 |
| 20781 | 32.60 |
| 20737 | 44.87 |
| 20784 | 36.50 |
| 20706 | 30.99 |
| 20722 | 37.82 |
| 20710 | 28.78 |

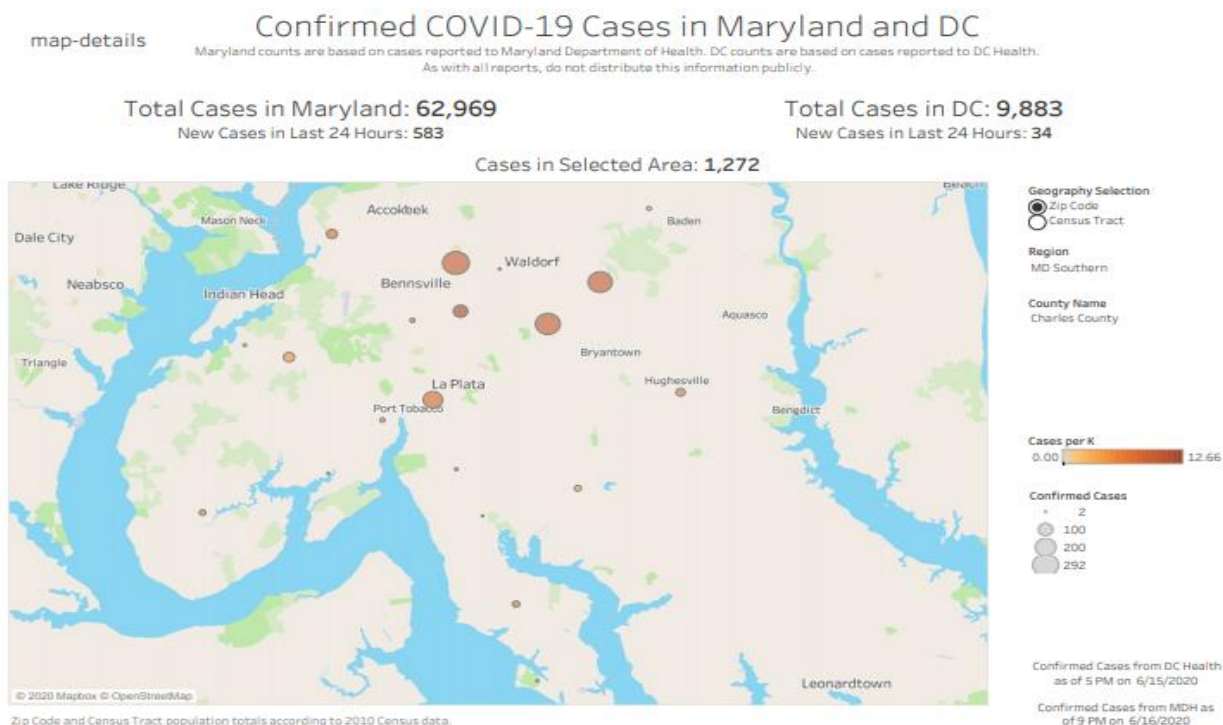
MISCELLANEOUS

Epidemiologist's Note: Here are the COVID-19 heat maps for Maryland, Southern Maryland, and Charles County. For Maryland, the majority of cases are clustered around the large cities (DC and Baltimore). The counties most impacted include Prince George's, Montgomery, Baltimore City, Baltimore County, and Anne Arundel. For Southern Maryland, the towns with the largest populations have been impacted greater than the more rural areas.

Towns such as La Plata, Waldorf, Prince Frederick, and Lexington Park have larger case counts and rates. The zip code with the highest COVID-19 case rate is Charlotte Hall. This is largely due to the outbreak at the Charlotte Hall Veterans Home. For Charles County, the locations most impacted by COVID-19 include Waldorf, White Plains, and La Plata. The majority of the county population lives in the 5 zip codes that represent these towns. They are also located along Rt 301 where the majority of residents live and where many of the county businesses reside.

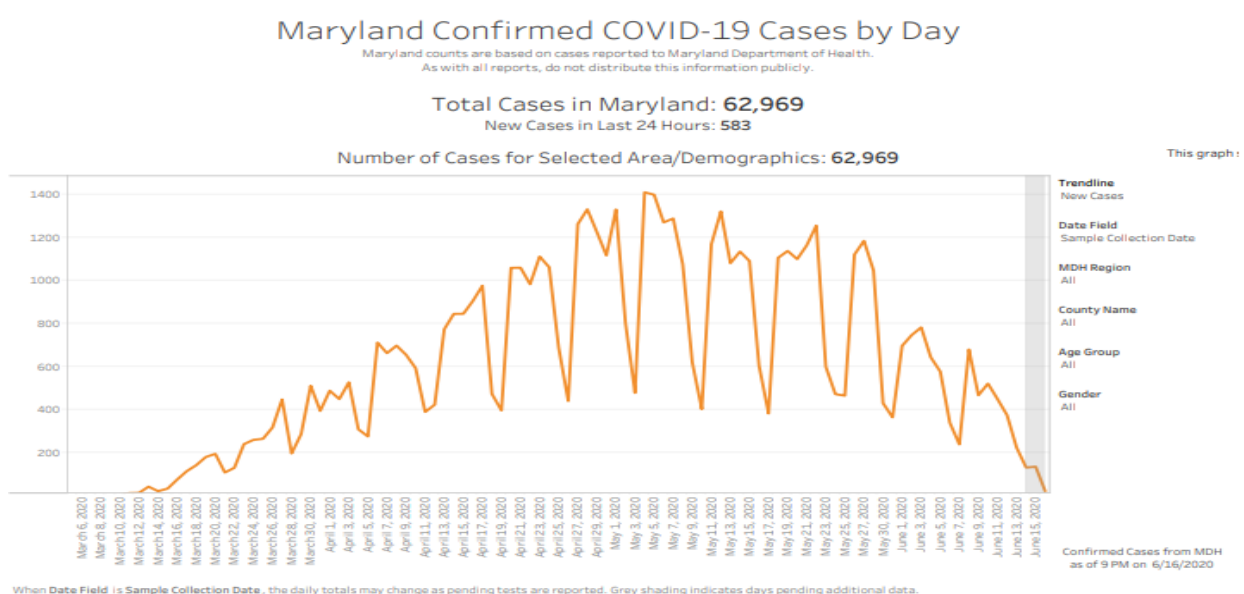
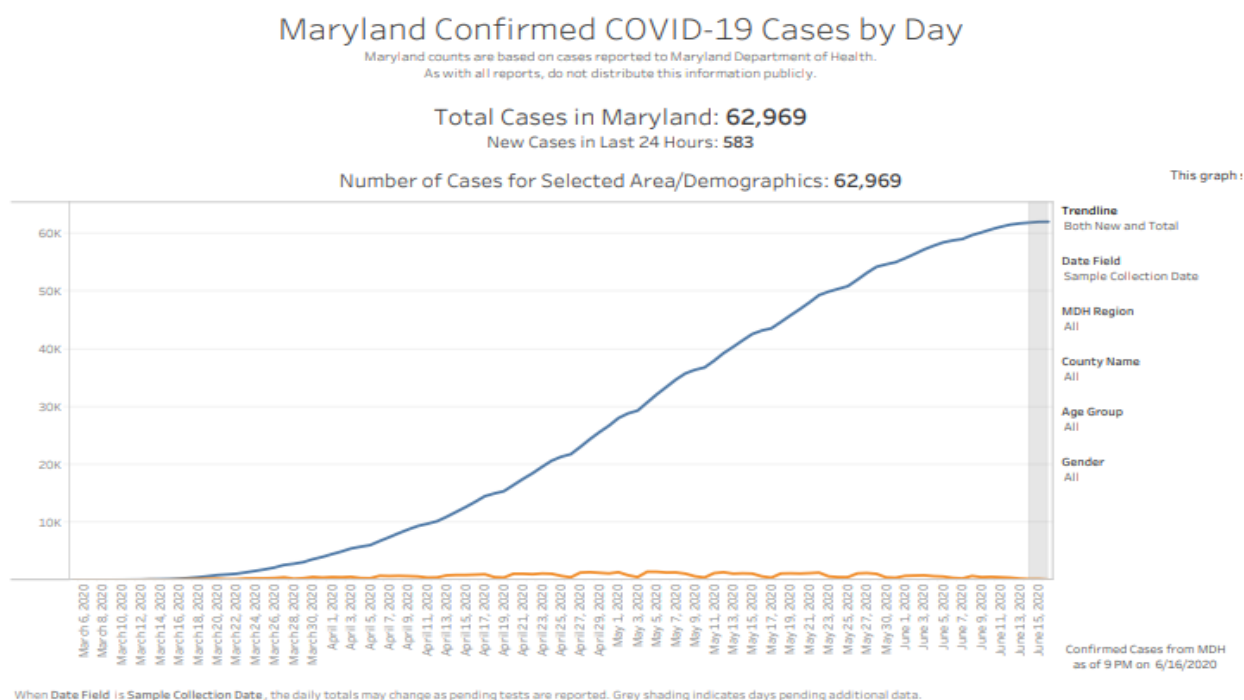
- **Heat Map of Maryland**





Epidemiologist's Note: The following include the epi curves for all total cases and for all new cases for Maryland, Southern Maryland, and Charles County. When you look at the graphs for new cases only, you will see that the peaks are different for all 3 regions. For Maryland, the peak in new cases occurred in the first week of May. For Southern Maryland, the peak was much later in May and corresponds to the Charlotte Hall outbreak. The Charles County new case graph shows a peak in late April. This is when the outbreaks at the skilled nursing facilities were highest. The lines with the total number of cases for all three graphs are starting to level out.

- **Charles County Confirmed Cases by Date**



Maryland Confirmed COVID-19 Cases by Day

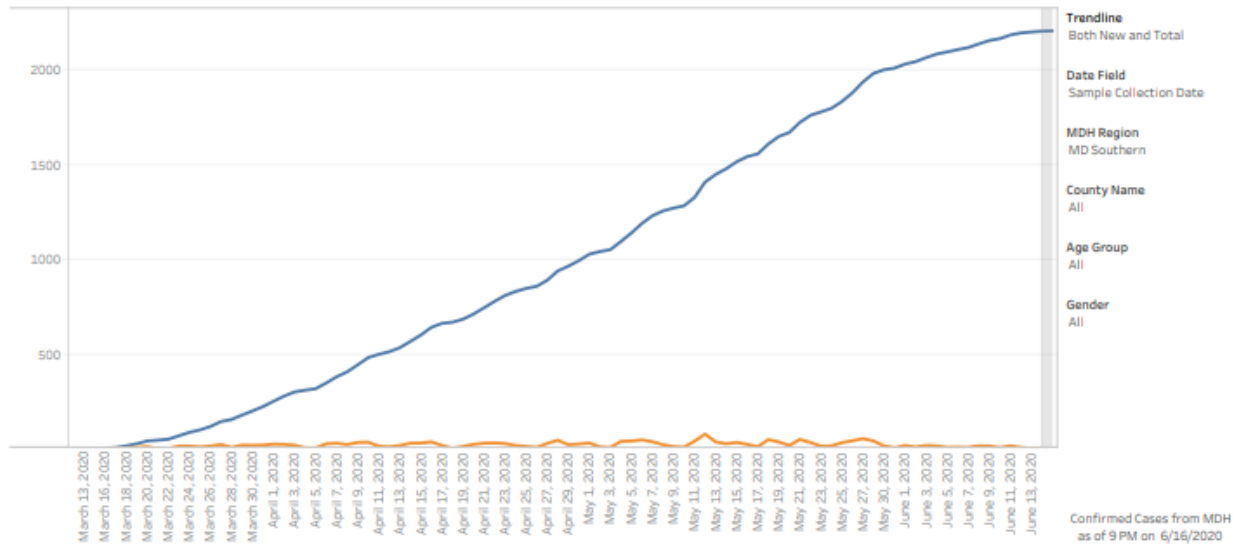
Maryland counts are based on cases reported to Maryland Department of Health.
As with all reports, do not distribute this information publicly.

Total Cases in Maryland: 62,969

New Cases in Last 24 Hours: 583

Number of Cases for Selected Area/Demographics: 2,252

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

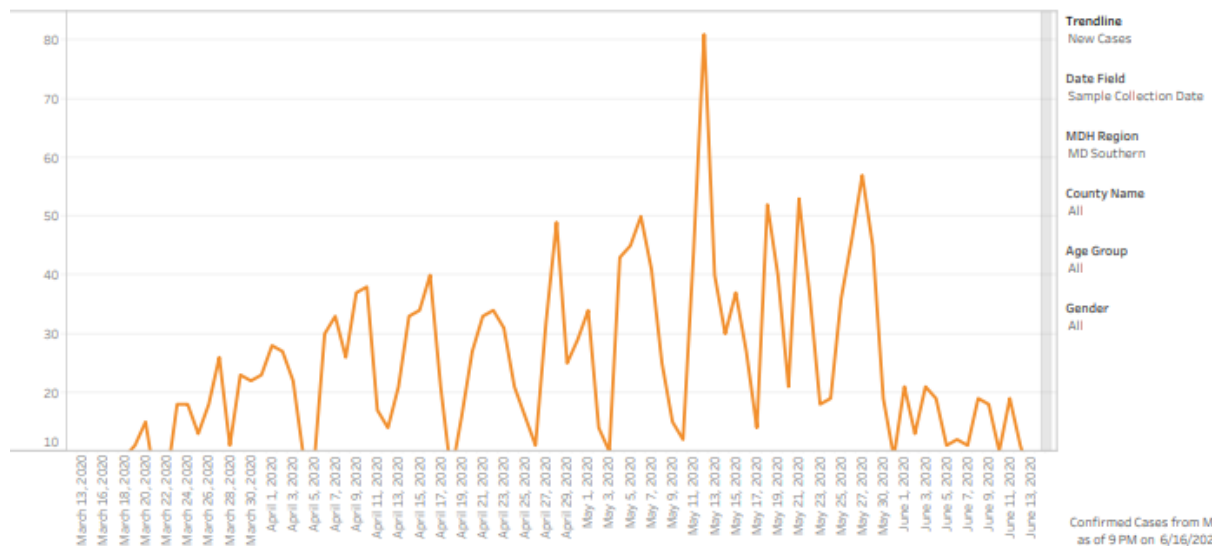
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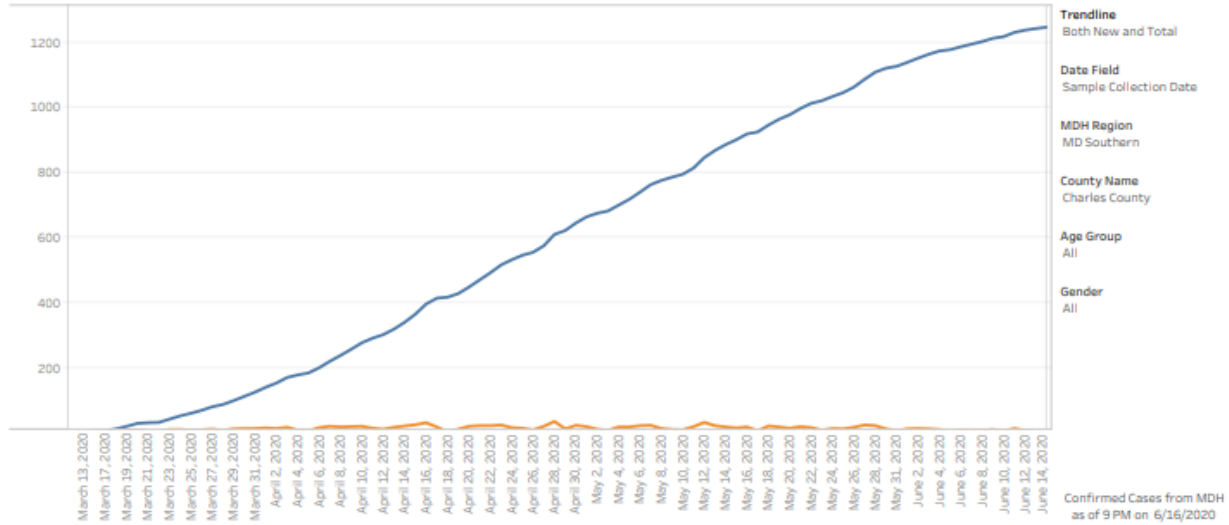
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Total Cases in Maryland: 62,969

New Cases in Last 24 Hours: 583

Number of Cases for Selected Area/Demographics: 1,272

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

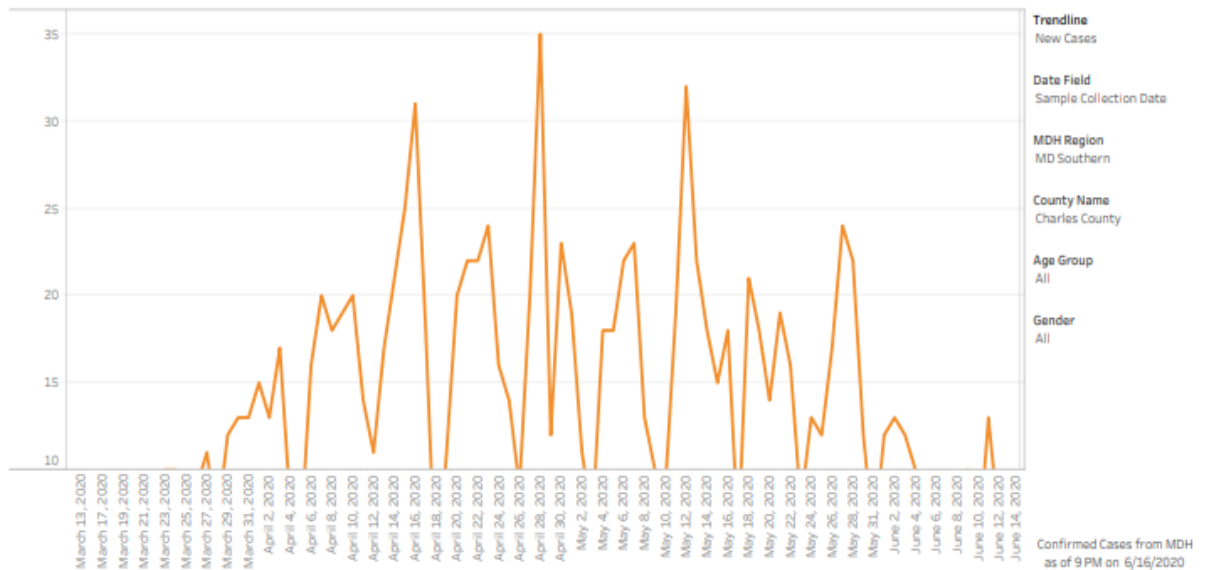
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Total Cases in Maryland: 62,969

New Cases in Last 24 Hours: 583

Number of Cases for Selected Area/Demographics: 1,272

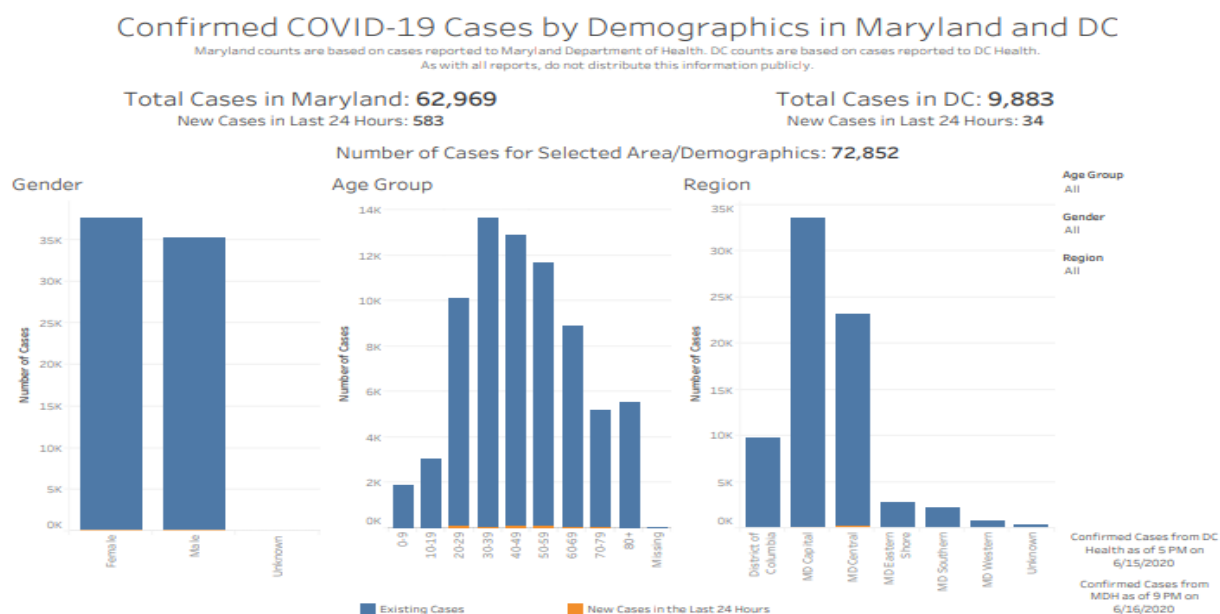
This graph:



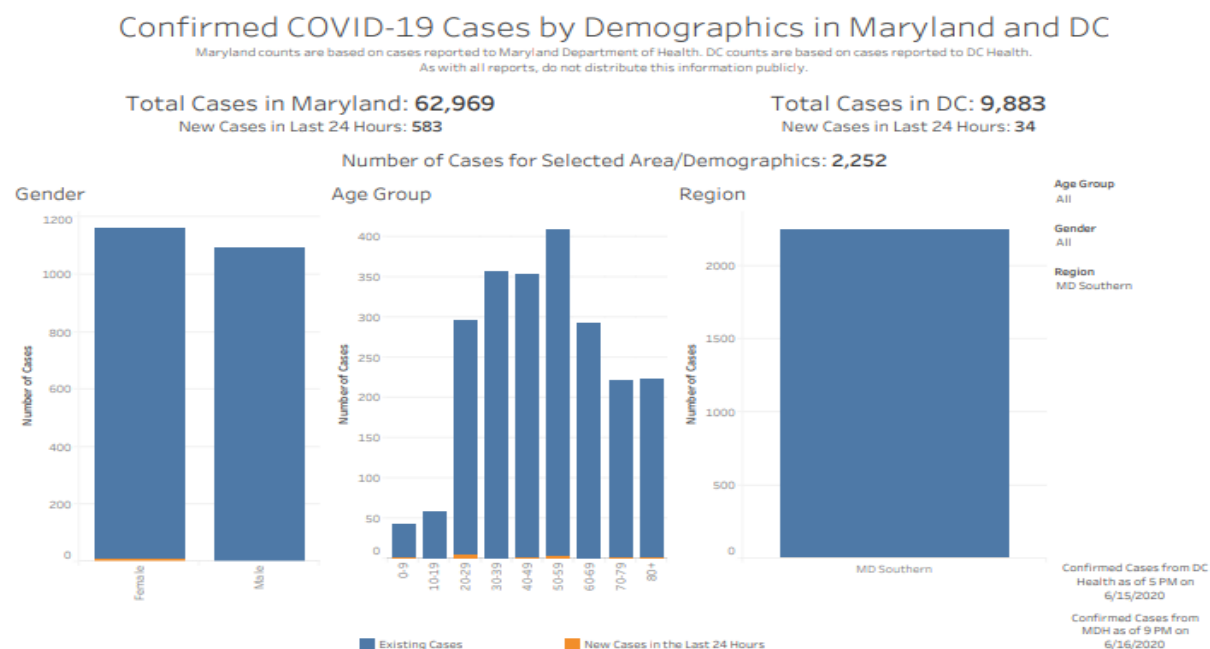
When Date Field is Sample Collection Date, the daily totals may change as pending tests are reported. Grey shading indicates days pending additional data.

Epidemiologist's Note: For Maryland, there are slightly more females impacted by COVID-19 than males. The age group with the most cases are those aged 30-39 years, followed by those 40-49 and 50-59 years. Most of the cases are found within the Central and Capital Regions of the state. For Southern Maryland, there are slightly more females impacted by COVID-19 than males. The age group with the most cases are those aged 50-59 years, followed by those 30-39 years and then those 40-49 years.

- Maryland Confirmed Cases by Demographics**

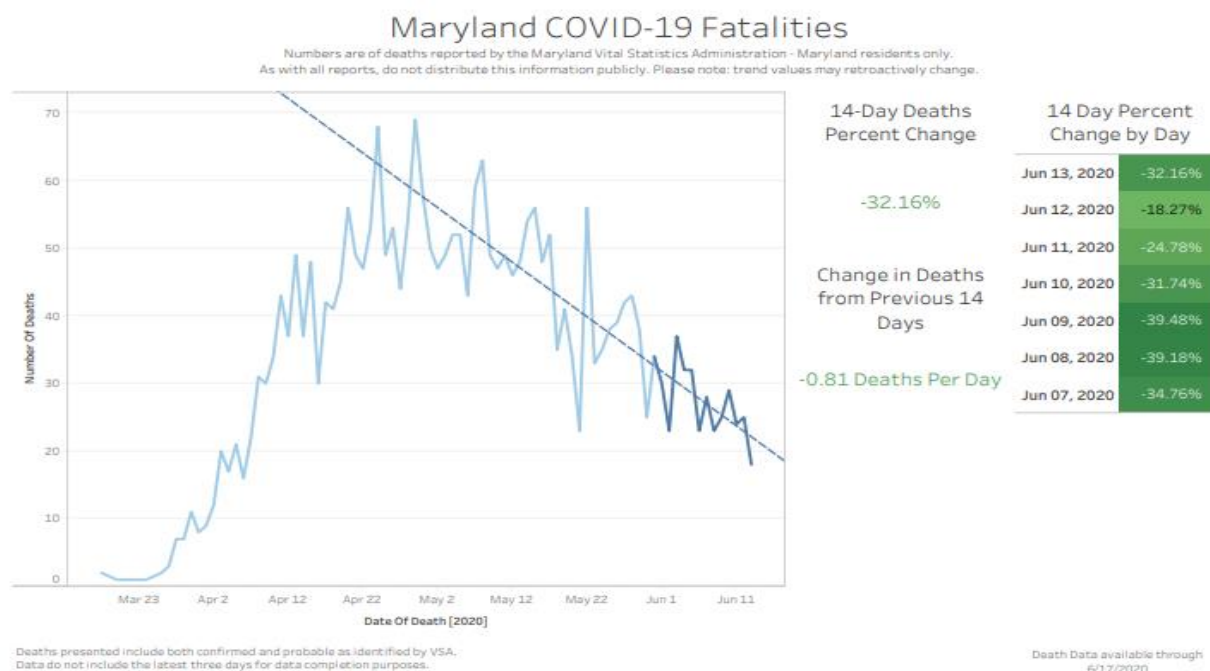
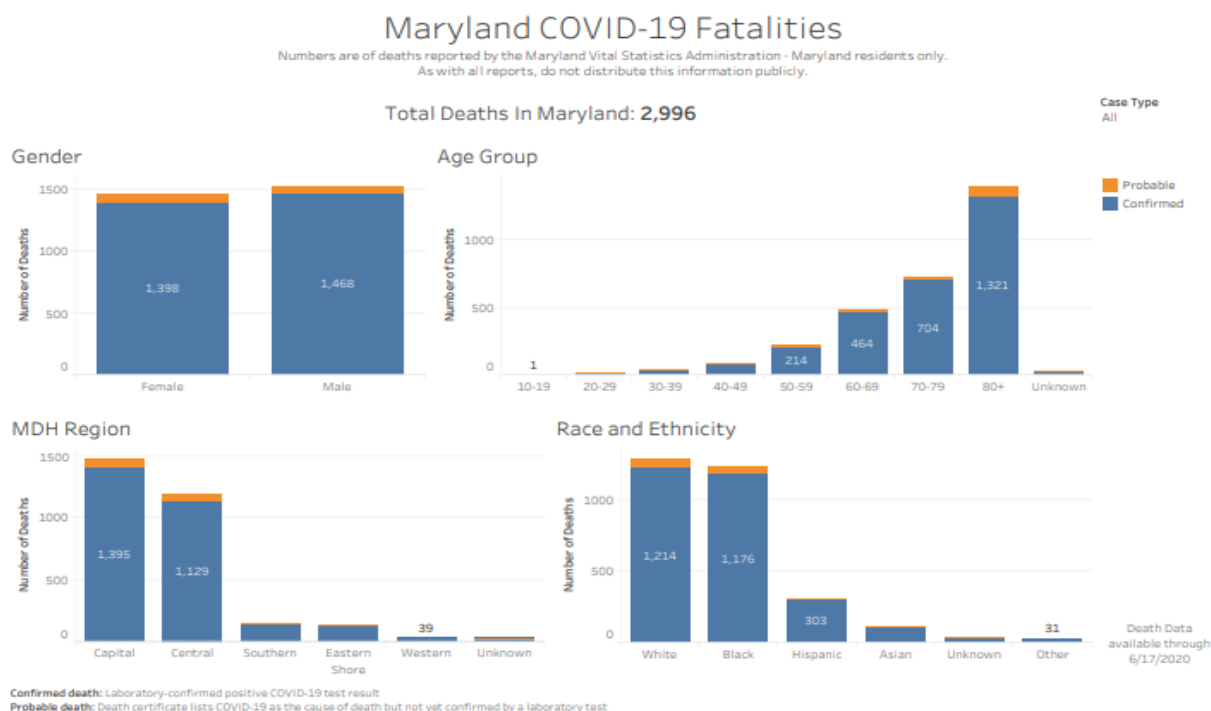


- Southern Maryland Confirmed Cases by Demographics**



Epidemiologist's Note: Fatality demographics for Maryland show slightly more deaths among males than females. Individuals over the age of 80 years make up nearly half (47%) of the COVID-19 deaths in Maryland. There are slightly more deaths among White Marylanders than Black Marylanders. The peak for COVID-19 deaths in Maryland occurred late April to early May.

- **Maryland Fatalities by Demographics**



Epidemiologist's Note: The next group of graphs show the trends in hospitalizations for COVID-19 positive patients in Maryland. The trends show a reduction in hospitalizations due to COVID-19 since the peak in cases in early May. There have been slightly more males than females. Most cases were from the Capital and Central regions. The age group with the most hospitalizations were those aged 60-69 years, followed by those 50-59 years. Individuals aged 65+ were more likely to require hospitalization than those under 65 years.

• Maryland COVID Hospitalizations

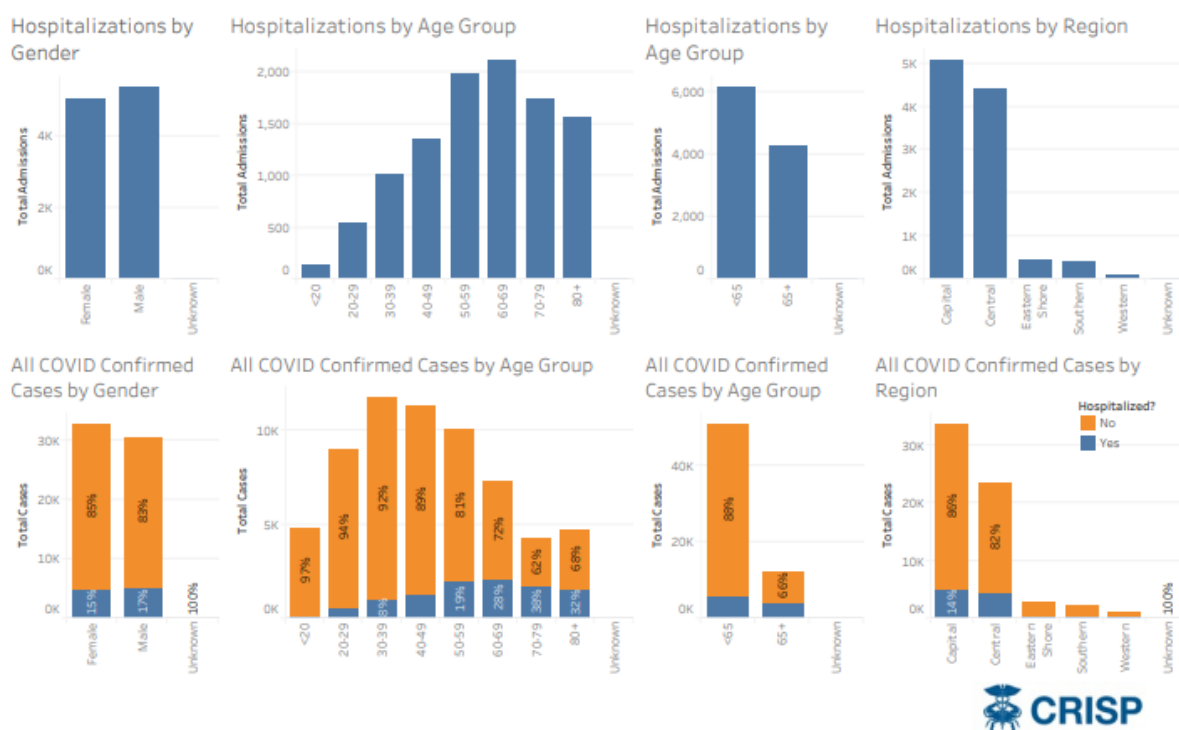
Confirmed COVID-19 Admit and Discharge Trends

Hospitalization Data Available Through 6/15/2020

COVID-19 Hospitalizations by Demographics

This report displays inpatient admissions and discharges for confirmed COVID positive patients. Hospitalizations must occur between 7 days prior to specimen collection date and 28 days after specimen collection to be included. Due to irregularities in data submission for the period 5/5/20 to 5/21/20, data for this period will be revised as corrected data are available. Please note: trend values may retroactively change as new cases are identified.

Confirmed cases are reported by Maryland Department of Health. Admissions and discharges are derived from Admission, Discharge, Transfer feeds sent to CRISP.



• Maryland COVID Hospitalization Trends

Confirmed COVID-19 Admit and Discharge Trends

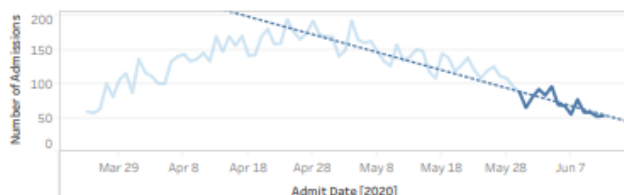
Hospitalization Data Available Through 6/15/2020

Admission and Discharge Trends for COVID-19 Positive Patients

This report displays inpatient admissions and discharges for confirmed COVID positive patients. Hospitalizations must occur between 7 days prior to specimen collection date and 28 days after specimen collection to be included. Due to irregularities in data submission for the period 5/5/20 to 5/21/20, data for this period will be revised as corrected data are available. Please note: trend values may retroactively change as new cases are identified.

Confirmed cases are reported by Maryland Department of Health. Admissions and discharges are derived from Admission, Discharge, Transfer feeds sent to CRISP.

Admissions Trend



14 Day Admission Percent Change

-38.58%

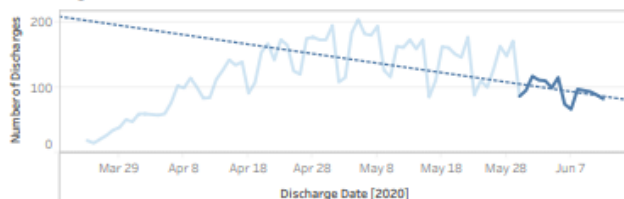
14 Day Admission Count Change

-2.61 Admissions per Day

14 Day Percent Change by Day

| | |
|---------------|---------|
| June 12, 2020 | -38.58% |
| June 11, 2020 | -38.67% |
| June 10, 2020 | -39.69% |
| June 09, 2020 | -41.05% |
| June 08, 2020 | -43.44% |
| June 07, 2020 | -47.58% |
| June 06, 2020 | -40.84% |

Discharges Trend



14 Day Discharge Percent Change

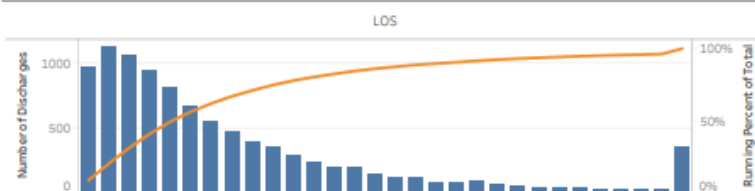
-17.96%

14 Day Discharge Count Change

-1.45 Discharges per Day

14 Day Percent Change by Day

| | |
|---------------|---------|
| June 12, 2020 | -17.96% |
| June 11, 2020 | -33.88% |
| June 10, 2020 | -40.09% |
| June 09, 2020 | -47.47% |
| June 08, 2020 | -46.64% |
| June 07, 2020 | -40.36% |
| June 06, 2020 | -26.86% |



Length of Stay Percentiles (All COVID-19 Discharges)

| | |
|-----------------|---------|
| 50th Percentile | 6 Days |
| 75th Percentile | 10 Days |
| 90th Percentile | 19 Days |



- Maryland COVID Hospitalization Trends

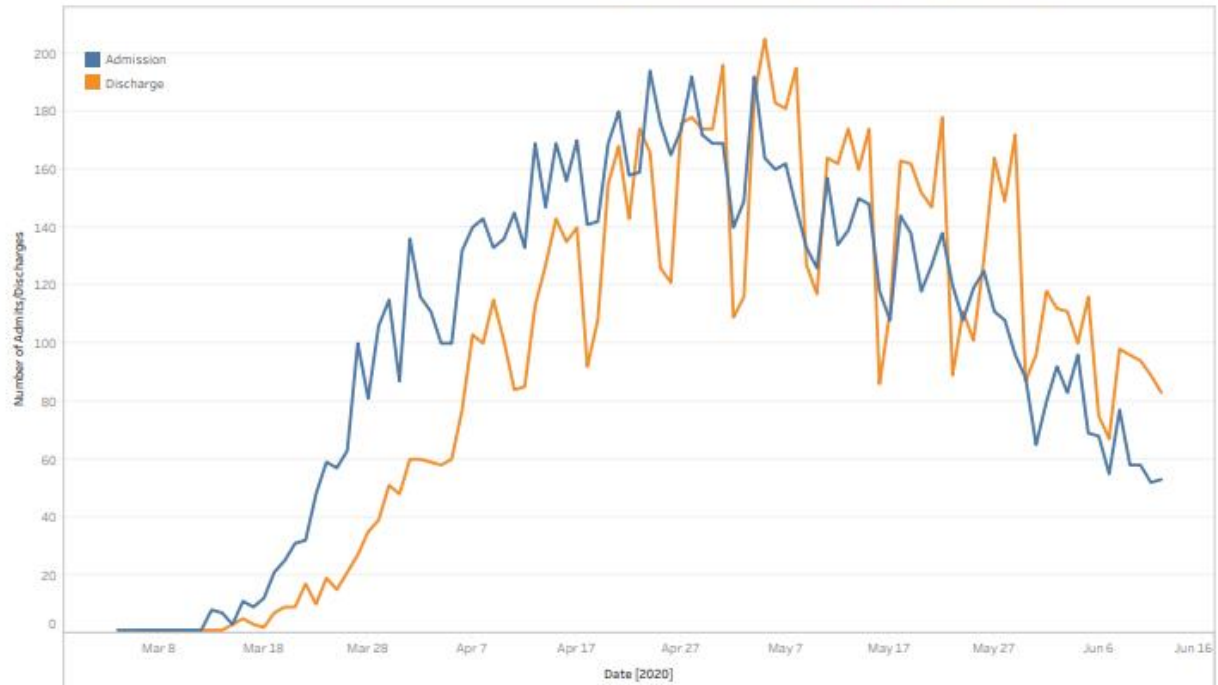
Confirmed COVID-19 Admit and Discharge Trends

Hospitalization Data Available Through 6/15/2020

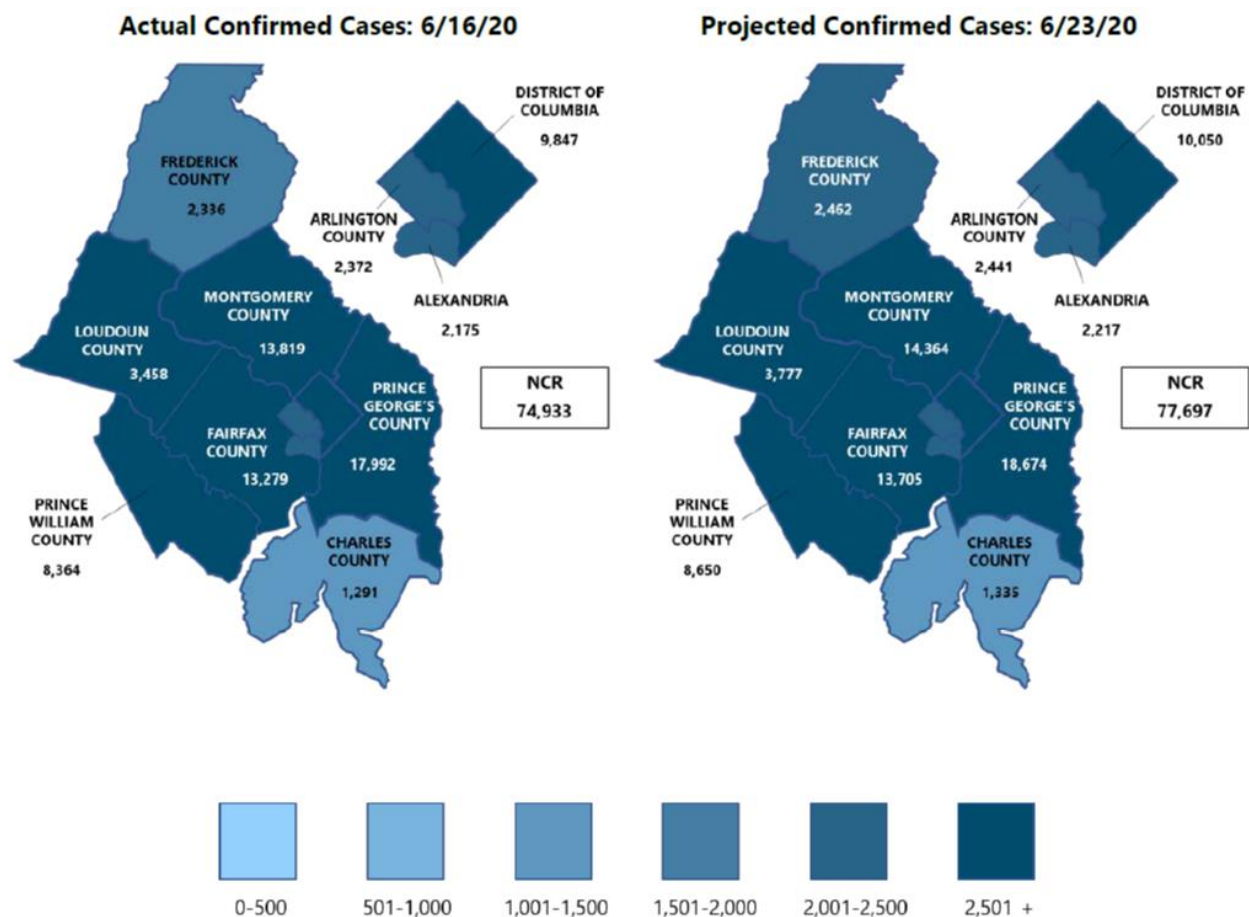
This report displays inpatient admissions and discharges for confirmed COVID positive patients. Hospitalizations must occur between 7 days prior to specimen collection date and 28 days after specimen collection to be included. Due to irregularities in data submission for the period 5/5/20 to 5/21/20, data for this period will be revised as corrected data are available. Please note: trend values may retroactively change as new cases are identified.

COVID-19 Admissions and Discharges by Day

Confirmed cases are reported by Maryland Department of Health. Admissions and discharges are derived from Admission, Discharge, Transfer feeds sent to CRISP.



ADDITIONAL INFORMATION: Here are the MCR MWCOG case and medical demand projections for June.



Medical Demand Projections:

| | Actual Confirmed Cases On: | | | Projected Cases (Hospitalized) [ICU] {Ventilator} For: | | | | | | | | | |
|-------------------------|----------------------------|--------|--------|--|----------|-----------------|--------|----------|-----------------|--------|----------|-----------------|--|
| | 6/14 | 6/15 | 6/16 | 6/23 | | | 6/30 | | | 7/7 | | | |
| Washington DC | 9,799 | 9,818 | 9,847 | 10,050 | (2,010) | [482] {241} | 10,183 | (2,037) | [489] {244} | 10,272 | (2,054) | [493] {247} | |
| Charles Co., MD | 1,272 | 1,277 | 1,291 | 1,335 | (267) | [64] {32} | 1,370 | (274) | [66] {33} | 1,398 | (280) | [67] {34} | |
| Frederick Co., MD | 2,298 | 2,308 | 2,336 | 2,484 | (497) | [119] {60} | 2,618 | (524) | [126] {63} | 2,739 | (548) | [131] {66} | |
| Montgomery Co., MD | 13,657 | 13,709 | 13,819 | 14,364 | (2,873) | [689] {345} | 14,776 | (2,955) | [709] {355} | 15,087 | (3,017) | [724] {362} | |
| Prince George's Co., MD | 17,851 | 17,920 | 17,992 | 18,674 | (3,735) | [896] {448} | 19,163 | (3,833) | [920] {460} | 19,516 | (3,903) | [937] {468} | |
| Arlington Co., VA | 2,346 | 2,363 | 2,372 | 2,441 | (488) | [117] {59} | 2,490 | (498) | [120] {60} | 2,524 | (505) | [121] {61} | |
| Fairfax Co., VA | 13,215 | 13,228 | 13,279 | 13,705 | (2,741) | [658] {329} | 14,002 | (2,800) | [672] {336} | 14,210 | (2,842) | [682] {341} | |
| Loudoun Co., VA | 3,404 | 3,439 | 3,458 | 3,777 | (755) | [181] {91} | 4,076 | (815) | [196] {98} | 4,357 | (871) | [209] {105} | |
| Prince William Co., VA | 8,306 | 8,326 | 8,364 | 8,650 | (1,730) | [415] {208} | 8,836 | (1,767) | [424] {212} | 8,958 | (1,792) | [430] {215} | |
| Alexandria, VA | 2,160 | 2,168 | 2,175 | 2,217 | (443) | [106] {53} | 2,245 | (449) | [108] {54} | 2,263 | (453) | [109] {54} | |
| NCR | 74,308 | 74,556 | 74,933 | 77,697 | (15,539) | [3,729] {1,865} | 79,759 | (15,952) | [3,828] {1,914} | 81,324 | (16,265) | [3,904] {1,952} | |

| | Actual Confirmed Cases On: | | | Projected Cases For: | | | | | | | | |
|-------------------------|----------------------------|---------------|---------------|----------------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|
| | 6/14 | 6/15 | 6/16 | 6/17 | 6/18 | 6/19 | 6/20 | 6/21 | 6/22 | 6/23 | 6/30 | 7/7 |
| Washington DC | 9,799 | 9,818 | 9,847 | 9,882 | 9,914 | 9,945 | 9,973 | 10,000 | 10,026 | 10,050 | 10,183 | 10,272 |
| Charles Co., MD | 1,272 | 1,277 | 1,291 | 1,298 | 1,305 | 1,311 | 1,318 | 1,324 | 1,330 | 1,335 | 1,370 | 1,398 |
| Frederick Co., MD | 2,298 | 2,308 | 2,336 | 2,358 | 2,380 | 2,401 | 2,423 | 2,443 | 2,464 | 2,484 | 2,618 | 2,739 |
| Montgomery Co., MD | 13,657 | 13,709 | 13,819 | 13,907 | 13,991 | 14,072 | 14,149 | 14,224 | 14,295 | 14,364 | 14,776 | 15,087 |
| Prince George's Co., MD | 17,851 | 17,920 | 17,992 | 18,104 | 18,211 | 18,313 | 18,410 | 18,502 | 18,590 | 18,674 | 19,163 | 19,516 |
| Arlington Co., VA | 2,346 | 2,363 | 2,372 | 2,383 | 2,394 | 2,404 | 2,414 | 2,423 | 2,432 | 2,441 | 2,490 | 2,524 |
| Fairfax Co., VA | 13,215 | 13,228 | 13,279 | 13,350 | 13,417 | 13,481 | 13,541 | 13,599 | 13,653 | 13,705 | 14,002 | 14,210 |
| Loudoun Co., VA | 3,404 | 3,439 | 3,458 | 3,505 | 3,551 | 3,598 | 3,643 | 3,688 | 3,733 | 3,777 | 4,076 | 4,357 |
| Prince William Co., VA | 8,306 | 8,326 | 8,364 | 8,413 | 8,459 | 8,502 | 8,542 | 8,580 | 8,616 | 8,650 | 8,836 | 8,958 |
| Alexandria, VA | 2,160 | 2,168 | 2,175 | 2,182 | 2,189 | 2,195 | 2,201 | 2,207 | 2,212 | 2,217 | 2,245 | 2,263 |
| NCR | 74,308 | 74,556 | 74,933 | 75,382 | 75,811 | 76,222 | 76,614 | 76,990 | 77,351 | 77,697 | 79,759 | 81,324 |

Respectfully submitted by Charles County PHEP

HOSPITAL BRIEF 6-17-2020

- The Emergency Department surge tents have been taken down due to the low patient census. The surge tents will be put back up if patient census indicates the need for surge tents in the future.
- Hospital Bed Capacity = 166. Census = 67
- Hospital ICU Census = 5
- Hospital ICU is now a dedicated COVID-19 Unit, and 3 East is for ICU overflow.
- Isolation Room Capacity = 12
- Isolation Rooms Occupied = 7
- Confirmed positive cases of COVID-19 patient admissions = 4
 - Of the total four (4) COVID-19 positive patients all are located in the ICU Dedicated COVID-19 Unit.
 -
- PUI admissions = 6
- Ventilated COVID-19 positive patients = 2
- Ventilators not in use = 18
- COVID-19 related deaths = 43 (Total to Date)
- CRMC has implemented a policy that requires ALL staff, visitors (which would be very limited), and contractors of any kind to wear a mask while in the hospital at all times.
- The 3 South patient unit at CRMC is dedicated by half to COVID-19 positive patients only, and the other half of the unit is dedicated to PUI patients.
- EMS staff transport to CRMC on Tuesday, 6/16/2020 = There were zero (0) COVID-19 positive, and zero (0) PUI's transported to CRMC on 6/16/2020.
- CMCR total Lab tests to date = 2234. COVID-19 positive tests = 332.

Intelligence Briefing 6-17-2020
COVID Charles County
Week 14

Updated Infection Numbers: As of 1133hrs.

Total worldwide: 8,214,571 **+264,598 since the 6-15-20 brief.**

Worldwide increase of confirmed cases by 24-hour period over the last 21 days

| 5-27/28 | 5-28/29 | 5-29/6-1 | 6-1/3 | 6-3/5 | 6-5/8 | 6-8/10 | 6-10/12 | 6-12/15 | 6-15/17 |
|---------|---------|----------|---------|---------|---------|---------|---------|---------|---------|
| 120,704 | 112,740 | 354,112 | 216,515 | 253,885 | 374,034 | 219,900 | 288,860 | 402,271 | 264,598 |

Total fatalities worldwide: 434,181 **+10,672 since the 6-15-20 brief**

Total confirmed cases in the US: 2,141,306 **+44,404 since the 6-15-20 brief**

US increase of confirmed cases by 24-hours period over the last 21 days

| 5-27/28 | 5-28/29 | 5-29/6-1 | 6-1/3 | 6-3/5 | 6-5/8 | 6-8/10 | 6-10/12 | 6-12/15 | 6-15/17 |
|---------|---------|----------|--------|--------|--------|---------|---------|---------|---------|
| 21,482 | 19,015 | 68,265 | 42,221 | 40,248 | 69,703 | 107,311 | 43,719 | 73,212 | 44,404 |

Total fatalities in US: 117,033 **+1,278 since 6-15-2020**

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

Total confirmed cases in State in of MD: 62,032 **+937 since the 6-15-20 brief**

Total tested in the State of MD: 500,791 **+26,091 over 6-15-20**

Percent of those test that test positive: **5.81%**

Total Fatalities in State of MD: 2,773 **+93 change since the 6-15-20 brief**

Number of probable deaths: 130

Total Ever Hospitalized: 10,309

Persons currently hospitalized: 836 -91 since 6-15-2020

| 5-23/26* | 5-26/27 | 5-27/28 | 5-28/29 | 5-29/6-1 | 6-1/3 | 6-3/5 | 6-5/8 | 6-8/10 | 6-10/12 | 6-12/15 | 6-15/17 |
|----------|---------|---------|---------|----------|-------|-------|-------|--------|---------|---------|---------|
| -5 | +23 | -4 | -38 | -122 | -65 | -33 | -97 | -24 | -119 | -91 | -134 |

First Responder Numbers in Charles County: NUMBERS AS OF 6-17-2020 @1230

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

0 Self Isolation: means sick or tested positive

Weather:

Thursday 75-64 unsettled, Friday 78-66 storms, Sat 78-66 storms

Local:

No stores visited this am.

Maryland Update:

Nothing to report

Region:

Over 74,628 cases in the NCR as of 0700 6-17-2020.

DC could enter phase 2 on 6-19-2020

National:

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

19 states see increases in case counts

Dr. Fauci is quoted as saying normalcy may not return for years.

Local critical infrastructure:

No outages or disruptions are reported or are expected 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 responses, and potential solutions prior to full reopening.
- Pediatric Multi-system Inflammatory Syndrome is receiving increasing media coverage (100+ cases in NY, 3 at WDC Children's). We are likely to see increased reports from fearful parents who have limited knowledge but high fear. Factual information spread is needed, ongoing and open channel communication with local pediatricians must start now, redistribution of PPE may be needed, and we should likely begin adding them to EOC operations.
- We appear to be on the downward side or at least seeing a leveling of this crisis. Commander should take this time to review and collect documents needed to begin the AAR process of the tactical portion of this event. Logistics should begin placing orders to build stockpiles for the next round.

- The change at the Gov. Office re: to releasing nursing home case counts and fatalities this week is likely to create more questions than answers. In addition, it is likely to create a public uproar and increase anger.
- The length and scope of this situation have exposed large cracks in food supply chains, medical supply chains, fossil fuel industries, and other major portions of everyday life. Local leaders should begin a gap analysis and start the after-action process so they can create and modernize resiliency plans, local stockpiles, and coming up with other forward leaning solutions so when the next disaster occurs they are more self-sufficient and better prepared.
- While we have concentrated our efforts on peer support and helping our responders, a proactive approach to including families of first responders is quickly emerging. The command structure should consider a Family Support liaison or expand the Peer support branch.
- The increased discussions about opening the economy, added with the on-going conversation about health care 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

June 17th, 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
 - Expected to return to work on 7/1
- 0 Sworn Officers isolated
- 0 Correctional Officer quarantined
- 0 Correctional Officers isolated
- 0 civilians quarantined
- 0 civilians isolated.

Charles County Detention Center Population:

- 102 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 6-17-2020
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:

Tuesday, 6/16/20 CCPS served 3420 meals at the 11 meal distribution sites. The total was +532 from the meals served on Monday, 6/15/20. We are seeing a drop in meals being served at our 11 meal distribution sites.

The Summer Meals Program is a free meals program for all children and youth ages 18 and younger who live in Charles County.

Due to the COVID-19 social distancing requirements, Charles County Public Schools (CCPS) will continue to serve Grab and Go meals at our eleven existing meal sites beginning Friday, June 12 through Tuesday, June 30 between the hours of 11:00 a.m. to 1:00 p.m. CCPS will serve Summer Meals throughout the summer months until August 14; however, we are awaiting direction from the United States Department of Agriculture (USDA) regarding our Summer Meals Program beyond **June 30. More information will follow.**

CCPS meal distribution sites can provide parents food without their child being present. However, the pick-up person must be a child's parent or guardian. Parents/guardians must show staff their child's CCPS student identification (ID) badge or report card copy showing their student ID number.

Parents with children not yet enrolled in school should attempt to bring some type of age verification to show to site staff, such as a copy of a birth certificate.

There will be no need for parents to exit their vehicles to obtain the meals. Parents and guardians need only show their child's ID badge or report card to a staff member on site. The 11 meal sites operate 11 a.m. to 1 p.m. Monday through Friday. Curbside meals are provided at the following schools:

- Henry E. Lackey High School;
- Maurice J. McDonough High School;
- St. Charles High School;
- Westlake High School;
- Milton M. Somers Middle School;
- Dr. Thomas L. Higdon Elementary;
- Indian Head Elementary School;
- Mt. Hope/Nanjemoy Elementary School;

- Dr. Samuel A. Mudd Elementary School;
- J.C. Parks Elementary School; and
- J.P. Ryon Elementary School.

Parents can pick up the following for their child daily: one breakfast, one lunch, one dinner and a snack. Any requests from parents asking for additional meals on the same service day at other sites will not be honored. Visit the CCPS website at www.ccboe.com for the latest information.

Closure:

June 13th was the last official day of instruction for Charles County Public Schools.

All schools, buildings and centers will remain closed to the public.

Instruction:

Nothing new to report.

Report cards: Elementary school teachers will post report cards to ParentVue by June 15. Report cards for middle and high school students will be mailed to the address on file with CCPS on June 22.

Virtual summer school starts July 7, registration begins Wednesday: Summer school begins online July 7. Courses will use a mix of Microsoft Teams instruction and the Apex Learning platform. Students can take a maximum of two make-up courses during summer school. The cost of make-up courses has been waived by CCPS this year. Summer school also offers four courses for original credit and are \$300 each. Registration begins at 8 a.m. June 17. All courses run July 7 through Aug. 6. Read here for more information.

CCPS planning summer learning opportunities: CCPS staff is planning summer learning opportunities for students in all grade levels, ranging from virtual enrichment and Advanced Placement (AP) camps, to Summer Olympics Go for the Gold activities parents can do with their children at home. CCPS will share more information about summer learning opportunities next week.

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:

Respectfully submitted by Michael Meiser



Charles County Volunteer Firemen's Association, Inc.

Post Office Box #21, La Plata, Maryland 20646

June 17th, 2020

Re: Volunteer Fire/EMS Brief - June 15th and 16th

Items Being Worked On:

- Reduction of Force Policy – *Information gathering occurring.*
- Non COVID Related – Civil Disturbance Response Policy

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
- Monday June 15th - EMS Call Volume was below average, and Fire Call Volume was below average
40 EMS Related Incidents ----- 14 Fire Related Incidents
- Tuesday June 16th - EMS Call Volume was average, and Fire Call Volume was above average
56 EMS Related Incidents ----- 24 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