



BALTIMORE CITY COUNCIL HEALTH COMMITTEE

Mission Statement

On behalf of the Citizens of Baltimore City, the mission of the Health Committee is to study, examine and propose regulations concerning health and environmental issues; and to make recommendations and propose legislation for improving the overall health and welfare of all residents of Baltimore City.

**The Honorable Kristerfer Burnett
Chairman**

PUBLIC HEARING

**TUESDAY, APRIL 28, 2020
6:30 PM**

VIRTUAL WEBEX MEETING/HEARING

TO BE TELEVISED ON CHARM TV 25

***Council Resolution #20-0194R – Informational Hearing -
Baltimore's Strategic Response to the Wuhan Coronavirus***

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BILL SYNOPSIS

Committee: Health

Council Resolution: 20-0194R

Informational Hearing – Baltimore’s Strategic Response to the Wuhan Coronavirus

Sponsor: *President Scott and Councilmember Burnett, et al*

Introduced: *February 10, 2020*

Purpose:

For the purpose of inviting representatives from the Baltimore City Health Department, the Mayor’s Office of Emergency Management, the Baltimore Police Department, the Baltimore City Fire Department, and the Baltimore City Department of Finance to brief the City Council on Baltimore’s strategic response to the Wuhan coronavirus.

Effective: Upon enactment.

Agency Reports

Health Department	Favorable
Mayor’s Office of Emergency Management	
Police Department	No Objection
Fire Department	
Finance Department	Comments
Baltimore City Public School System	Comments
Mayor’s Office of Human Services	
Baltimore City Information Technology	
Department of Transportation	

Analysis

Current Law

The Health Code of Baltimore City, outlines the rules, regulations and mandates for health related issues.

Background

The Health Committee held the first hearing for this Resolution on March 5, 2020. Following are notes taken from the hearing.

Major Speakers at the March 5th Hearing

- Letitia Dzirara, Health Department
- Sunny Schmitzer, Mayor's Office
- Debbie Martin, Health Department
- David McMillian, Mayor's Office of Emergency Management
- John Davis, Baltimore City Public Schools
- Timothy Cullen, Fire Department
- James Matz, Fire Department
- Daniel Ramos, Finance Department
- Michelle Wirzberger, Police Department
- Kevin Cleary, City Resident
- Sharon Black, People Power Assembly
- Brynne Zdybel, City Resident

1. President Scott, primary sponsor of the Resolution gave opening remarks. "We want to make sure we are prepared! We want to get as much information out to the public so that everyone can be as safe as possible, he said. It is about educating the public."
2. Health Commissioner Dzirara gave a PowerPoint presentation. **A copy is attached.** She informed the attendees that the information included in the presentation is updated as of this morning; March 5th.
3. President Scott and other committee/council members asked the Health Commissioner and other agency representatives questions, made comments and stated their concerns. Some highlights of same were:
 - Coordination Efforts
 - Comments
 - We want to make sure all agencies are communicating effectively and in sync with each other
 - We want to make sure updated information is posted on the website as needed
 - Outreach Efforts
 - Senior buildings that are not operated by the city – is of concern
 - How can we get information to these facilities?
 - Some senior citizens will not want to go out!
 - Are there any provisions for them getting resources (such as food) they need?
 - Are we communicating with those individuals with addictions?
 - Is the Department of Recreation and Parks sharing information with parents?
 - Hospitals
 - How will your relationship expand to and/or with hospitals?
 - How are we sharing information with other agencies and getting information out to the public? **This question was addressed to and answered by a representative(s) from the Health, Fire and Police Departments**

- Sick Leave Usage by City Employees
 - If the policy(s) need to be changed temporarily in order to address this issue has it been worked out with the Department of Human Resources and the Labor Commissioner?
 - Population with Underlying Health Challenges
 - How are you handling the population that are considered susceptible? (Such as those with high blood pressure, diabetes, young children and the older populations, and etc.?)
 - Equipment and etc.
 - The media have talked a lot about equipment needed, masks, respirators, and etc. Are we prepared to purchase same and have you talked with our Finance Department and hospitals regarding this issue?
 - To the representative from the Finance Department: Can you talk about the emergency procurement process if needed?
 - Is my understanding that there is a Strategic National Stockpile Plan!
 - Does the Department have a plan for receiving and distributing equipment?
 - Quarantine Concern
 - Who will make the decisions to quarantine the population if needed?
 - Level of Threat
 - Recently the threat level was raised to three (3). Can you talk to this along with the different levels of threat?
 - Can you explain the epidemiology plan?
 - Testing
 - If someone gets sick, where do they go and how do you get tested? **Answer: Contact your regular health care provider first; we don't want to overwhelm the emergency rooms. Also, depending on the symptoms it will determine if testing is needed.**
 - Do the primary healthcare doctors have the equipment needed for testing?
 - Potential Outbreaks
 - What are you doing surrounding this issue? Such as:
 - Staff training
 - Emergency operation centers
 - Plan for surge in hospitals
 - Identifying buildings to receive patients
 - Does the Health Department train other clinics? **Answer: No but we have a close relationship with them.**
 - Finding surplus buildings: Is this a regional effort?
 - Comment: It is very important that the public know where to go to get resources and the help they need.
4. The representative from the Mayor's Office of Emergency Management (MOEM) gave an update on their preparedness plan; who they are in contact and/or partnered with.
 5. President Scott and other committee/council members asked the representative from MOEM questions, made comments and stated their concerns. Some highlights of same were:
 - Incident Command Structure
 - Can you talk about how this operates?
 - Are you going to have a center available?
 - Talk about your role in emergency management surrounding this issue

- Concern: Making sure the City Council gets information timely to get it out to the public
 - Funding from Governor
 - The Governor is allocating \$10 million for this virus
 - How much is coming to the city? **Answer: Allocation is not available yet.**
 - Did they give you a timeline? **Answer: No**
 - Is the allocation controlled by the State or locally?
 - Training
 - On a 24/7 basis, do you have enough staff to provide training to other agencies as needed?
6. The representative from the Baltimore City Public School System testified. **A copy of the PowerPoint presentation is attached.** Some highlights from his conversation were:
- Talked about what BCPSS is doing to prepare for this issue (**See PowerPoint presentation**)
 - All planned international trips for schools and the students have been stopped/postponed
7. President Scott and other committee/council members asked the representative from BCPSS questions, made comments and stated their concerns. Some highlights of same were:
- Potential School Closing
 - Online Communication – is of concern (That digital divide)
 - Families that don't have computers – Have you figured out how to get information out to them?
 - Worst Scenario – school closes for one month
 - Have you talked with State government if this happens; about grades, work, seniors graduating, etc.?
 - These things must be thought through properly; will have a great impact on students!
 - Three (3) buildings will be used for emergency meeting sites; which buildings will be used? **Answer: Dunbar, Arlington and Cherry Hill Middle School.**
 - Telework
 - Do you have the ability for students to telework?
 - Do you have a Continuity Operation Plan?
 - Does your nursing unit have an operation plan? **Answer: The nurses fall under the Health Department but BCPSS works closely with them.**
 - Impact on students with underlying illnesses – Do you have a plan for them? **Answer: No, only when symptoms begin to show is when we put procedures in place.**
8. Two (2) representatives from the Fire Department gave an update and/or overview on what their Department is doing to address the issue. Some highlights from their conversation were:
- The public is asking for masks; inventory all around are sold out
 - Epidemic Plan
 - Forty (40) percent of workforce may be out and the Department cannot telework to do their job
 - This issue challenges the Department to prepare timelines
9. President Scott and other committee/council members asked the representatives from the Fire Department questions, made comments and stated their concerns. Some highlights of same were:
- Do you have test kits available? **Answer: No**

- If this becomes an emergency situation do you:
 - Have the capacity to decontaminate staff?
 - Is there cleaning plans for all in-service vehicles? **Answer: Yes**
 - Nursing Homes
 - What are you going to do if people get sick?
 - Transportation Protocol
 - If someone dies from the virus and you transport them, how will this and/or things change?
10. Three (3) individuals gave public testimony. Some highlighted comments and/or concerns were:
- Concern: Cross-training to ensure city operations continue efficiently
 - The representative from People Power Assembly will send her concerns, questions, written testimony, and etc. to committee members via email. She also thanked all the agency representatives for their presentations
 - One person urged all who have power to consider the cost of health care and supported Medicare for All
11. Chairman Burnett gave closing remarks, “We will not vote on the Resolution today but instead will hold more hearings to receive updated information on this issue. **We will make sure that the Department of Public Works is invited to the next hearing.** The next hearing will focus on infrastructure, water supply, emergency preparedness, and etc. Those watching (listening audience) please submit concerns to the committee in preparation for the next hearing.”
12. The hearing was called to recess. On Tuesday, April 28, 2020 the hearing will reconvene.

Additional Information

Fiscal Note: None

Information Source(s): Notes from the March 5, 2020 hearing.

Marguerite M. Currin

Analysis by: Marguerite M. Currin
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Analysis Date: April 23, 2020

PowerPoint Presentation

from

the

March 5, 2020 Hearing

Health Department



Novel Coronavirus (COVID-19) Outbreak and Response: City Council Briefing March 5th, 2020

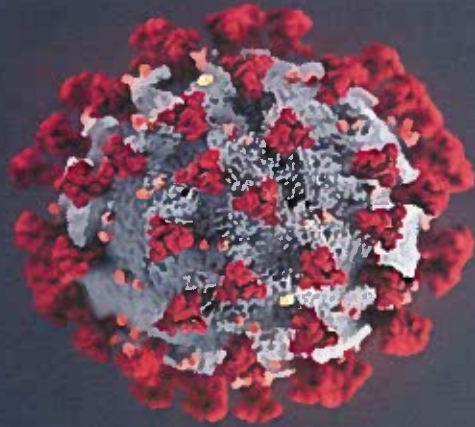




Image source: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>



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This is a rapidly evolving situation.

***Information presented here is up to date
as of 3/5/2020.***

***We expect that information on the
disease itself and recommendations and
guidance will change.***

***References provided will provide the
most up to date information.***



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Topics Covered

- What is COVID-19?
- How is COVID-19 spread?
- Clinical Characteristics of COVID-19
- How do we know if someone has COVID-19?
- How do we treat COVID-19?
- How do we prevent COVID-19?
- Who needs a mask?
- Current Situation
- Response
- How could COVID-19 affect Baltimore?
- Other Common Questions
- Next Steps



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What is COVID-19?

- COVID-19 (Coronavirus disease 2019) is a respiratory illness that can spread from person to person
- Virus causing disease: SARS-CoV-2
- Symptoms
 - Fever
 - Cough
 - Shortness of breath



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Novel Coronavirus (COVID-19)

- December 2019: novel (new) strain first identified in Wuhan, Hubei Province, central China
- Initial cases exposed at seafood and live animal market
- Person-to-person transmission later detected; now widespread in China and beyond
- 90,000+ cases globally, with 3,000+ deaths¹

¹WHO Situation Report 44, March 4, 2020; https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200304-sitrep-44-covid-19.pdf?sfvrsn=783b4c9d_6



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COVID-19 Cases in US: Confirmed and Presumptive Positive Cases, as of 3/5/20¹

Cases in the US ²	
Travel related	30
Person-to-person spread	17
Total	47

Cases among persons repatriated to US ²	
Wuhan, China	3
Cruise Ship	46
Total	49

¹As reported by CDC. State presumptive positive counts are more up to date. These are numbers as of previous day, 4pm.

²Confirmed and Presumptive positive cases. State and local public health departments are now testing and publicly reporting their cases.
<https://www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html>



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COVID-19 Cases in Maryland, as of 11 am on 3/5/20¹

COVID-19 Testing and Confirmed Cases in Maryland	
Cases tested for COVID-19	31
Negative COVID-19 tests	14
Pending COVID-19 tests	17
Lab Confirmed COVID-19	0

¹ <https://phpa.health.maryland.gov/Pages/Novel-coronavirus.aspx>



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Coronaviruses

- Coronaviruses are a large family of viruses that are common in both humans and animals
- There are seven coronaviruses that affect humans and result in illness

Coronavirus type	Illness
229E	Common cold viruses
NL63	Primarily Upper respiratory tract infection (runny nose, nasal congestion, sore throat, sneezing, cough).
OC43	
HKU1	
SARS-CoV	Associated with moderate to severe respiratory disease (fever, cough, shortness of breath, pneumonia).
MERS-CoV	
2019 Novel Coronavirus (COVID-19)	



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Coronavirus and Flu Comparison

	SARS	MERS	Influenza
Year	2002-2003	2012	Annual
Origin	China	Middle East	Worldwide
Cases	8,098 ¹	2,494 ²	9-49 million in US annually ³
Deaths	774 ¹	858 ²	12,000-79,000 deaths in US annually ³
Characteristics	Moderate Disease Community and hospital transmission	Severe Disease Many related to hospital transmission	Mild to severe Disease Community transmission

¹ <https://www.cdc.gov/sars/about/faq.html>; ²https://www.cdc.gov/coronavirus/2019-ncov/downloads/jama_paules_2020_vp_200006.pdf,

³<https://www.cdc.gov/flu/about/burden/faq.htm>



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How is COVID-19 Spread?

- Unclear how easily it spreads among people
- Person-to-person
 - Between people in close contact (6 feet)
 - Respiratory droplets when an infected person coughs or sneezes
 - Possible spread by touching surface or object with virus on it



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Clinical Characteristics

- Incubation period - time between infection and symptoms
 - Around 5 days (range 2-14 days)
- Symptoms
 - Fever (83-98%)
 - Cough (46-82%)
 - Fatigue (11-44%)
 - Shortness of breath (31%)
 - Sore throat, headache, diarrhea, nausea
- Some evidence of worsening after around 1 week symptoms
- Asymptomatic infection described in minimal number of patients



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Clinical Characteristics

- Risk factors
 - Unclear
 - Older patients and/or those with other medical conditions may be at higher risk for severe illness
- Most reported cases in adults
- One third to one half with underlying medical conditions



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Clinical Severity

- Range of severity
 - Asymptomatic ---- mild disease ----- severe illness
- # exposed who will be infected – unknown
- # infected require hospitalization– unknown
- # hospitalized develop severe disease
 - 20-30% of those hospitalized require ICU care
- Mortality rate



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How do we know if someone has COVID-19?

- Testing is available through the MDH Public Health Laboratory
- Healthcare providers call health department to report suspected cases (Persons Under Investigation - PUI)
- Healthcare providers collect the samples
- Maryland cases and PUIs are reported on the MDH website



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How do we treat COVID-19?

- No cure
- Supportive Care
 - Supplemental oxygen
 - Rehydrate
 - Blood pressure support
 - Pain control



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How do we prevent COVID-19?

- No vaccine currently
- Avoid close contact with those who are sick
- Avoid touching eyes, nose and mouth
- Stay home when sick
- Cover cough or sneeze with tissue and throw in trash
- Clean frequently touched objects using household cleaners
- Wash hands with soap for 20 seconds
 - If not available, alcohol-based hand sanitizer
60% alcohol



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Who needs a mask?

- Currently CDC does NOT recommend people who are well wear masks to protect themselves from respiratory diseases
- Masks should be used by people who show symptoms of COVID-19 to help prevent spread to others
 - For example, healthcare workers and those taking care of sick individuals in close settings
 - A face mask should be worn by individuals who have COVID-19, or suspected to have COVID-19 to prevent spread to others



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COVID-19 Timeline

December		First cases detected in China
January		
	January 7	Virus Identified
	January 21	First case detected in U.S.
	January 30	WHO declares public health emergency
	January 31	U.S. declares public health emergency
February	February 2	Limited entry of travelers from China to U.S.
	February 5	MDH started screening travelers from China coming to Maryland
	February 23	Community spread identified in US (CA, Oregon, WA)
	February 28	CDC issued updated travel advisories for impacted countries (China, South Korea, Iran, Italy, Japan, & Hong Kong)
	February 29	First death in U.S.



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Current Situation

- Community spread (person to person spread NOT involving close household contacts) in US raises level of concern about immediate threat in US
- Potential public health threat is high
- Most people have little immediate risk currently
- Likely will cause pandemic
- Widespread transmission in US is likely



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General Response

- **Non-medical interventions** are the most important response strategy
 - Personal - Stay home when sick, hand washing, covering cough and sneeze
 - Community - Social distancing, school closures, limit large gatherings
 - Environmental - Clean surfaces
- These non-medical interventions are also referred to as community mitigation strategies.



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Traveler Screening

- Interim traveler screening guidance from CDC went into effect Feb 3
- Maryland Department of Health (MDH) receives list of travelers from China. Risk assessment:
 - Where they traveled (Hubei Province vs. mainland China)
 - Contacts – confirmed case, close seat on plane, etc.
- MDH monitors for symptoms
- Low Risk individuals have no restrictions and are asked to self-monitor for symptoms
- Guidance expected to change shortly



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BCHD Response Actions

- Partial activation of agency ICS (Level 2)
 - Reviewing/updating pandemic plans
- Surveillance to detect and monitor cases
 - Respond to calls of possible PUIs 24/7
 - Coordinate with healthcare providers to test patients
 - MDH and CDC coordination on surveillance and testing



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BCHD Response Actions

- Coordination with State and City Partners
 - Worked with BCFD and MOEM on 911 protocol for COVID-19
 - Sent COVID-19 fact sheets home with all BCPSS students
 - Provided guidance to universities, businesses and healthcare partners on pandemic and continuity planning
 - COVID-19 briefing given to City Homeland Security Preparedness Committee
 - Coordinating closely with City hospitals
- Messaging and education
 - Press Conferences- 2/5/20, 3/4/20
 - Launched COVID-19 website; released social media messaging
 - Messaging with prevention tips sent to all City employees



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BCHD Response Actions

- Coordination with public health partners
 - Participating in weekly calls with MDH & CDC
 - Updated Protocol for Infectious Disease Reporting on Maritime Vessels in coordination with MDH
- Future Actions Planned
 - COVID-19 informational presentations to community groups
 - Preparedness webinars for the private sector regarding continuity planning



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How could COVID-19 POTENTIALLY Affect Baltimore

- *Potentially* disrupt daily activities
 - School closures
 - Avoid large gatherings
- Healthcare settings
 - Triage and cohorting of patients
 - Hospital surge capacity
- Absences
 - Businesses/schools/others plan for employee absences



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Other Common Questions



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Are we expecting school closings or cancellations?

- Case by case basis
- Decision made in conjunction with MDH, MSDE
- School closure can be considered for several purposes
 - High absenteeism (students and/or teachers)
 - Outbreak control/isolation
 - Environmental cleaning



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What if employees have traveled to a country with ongoing transmission?

- Encourage ALL sick employees to stay home
- Flexible sick leave policies, no physician note for sick leave
- In part, depends on type of employer
- If visiting country with transmission, encourage self monitoring for symptoms
- *Additional CDC guidance should be forthcoming*



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Specific advice for parents

- No evidence currently that children are more susceptible than adults
- Current limited reports suggest mild symptoms
 - Severe complications reported, appear to be uncommon
- Encourage usual prevention actions
 - Cleaning hands often with soap and water or alcohol based sanitizers
 - Avoiding people who are sick
 - Staying up to date on vaccinations



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What to expect

- More cases nation wide
- Cases regionally and locally
- Community transmission
- Possible outbreaks in healthcare settings
- Changes in CDC guidance
- Focus on hospital and medical system capacity and preparedness



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BCHD Next Steps

- City PIO Coordination around messaging
- COOP plans being finalized for each agency
- MOEM, DHR, and OLC updating work policies
- Working internally to finalize prevention signage to be distributed with help of DGS including hand sanitizers for City buildings



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BCHD Next Steps

- Ramp up public information and messaging
- Work with partners, businesses, faith-based entities and other external organizations to share CDC guidance and preparedness steps
- Plan for implementation of community mitigation strategies should widespread cases occur in Maryland
- Continue to work with healthcare facilities to ensure readiness and plan for potential medical surge



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How do we prevent widespread cases in Baltimore?

- Identify potential cases quickly to prevent community transmission
- Implement Community Mitigation Strategies as situation evolves
 - There is no vaccine currently
 - Slow the spread of illness
 - Reduce impact so resources can be allocated more effectively
 - Everyone has a part to play whether at the individual or organizational level



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Mayor, Baltimore City
Letitia Dzirasa, M.D.
Commissioner of Health, Baltimore City

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Community Mitigation Strategies

Individual Level		Community Level	
Personal Protective Behaviors	Isolation of Cases	Limit social interactions	Closures or Cancellation of Events
Washing hands	Stay home when sick	Telework	Schools
Cough/sneeze etiquette	Limit close contact w/others	Flexible work plans	Mass gatherings
Stay home if sick		Seating people further apart in workplace or school	



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 Commissioner of Health, Baltimore City

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What can you do?

- Residents
 - Practice Personal Protective Behaviors
 - Plan and Prepare with your family/community
 - Stay Informed via evidence based websites (CDC.gov, health.baltimorecity.gov)
- Organizations/Businesses
 - Promote Personal Protective Behaviors
 - Update COOP plans
 - Stay Informed



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Resources

- Baltimore City Health Department:
<https://health.baltimorecity.gov/novel-coronavirus-2019-ncov>
- Maryland Department of Health:
<https://phpa.health.maryland.gov/Pages/Novel-coronavirus.aspx>
- Centers for Disease Control and Prevention:
<https://www.cdc.gov/coronavirus/2019-ncov/index.html>



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**Thank for your time!
Additional questions?**

*PIO: Adam Abadir –
adam.abadir@baltimorecity.gov*



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@Bmore_Healthy 
BaltimoreHealth 
health.baltimorecity.gov

Appendix: Disease Prevalence and Epidemiology



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SARS and MERS outbreaks

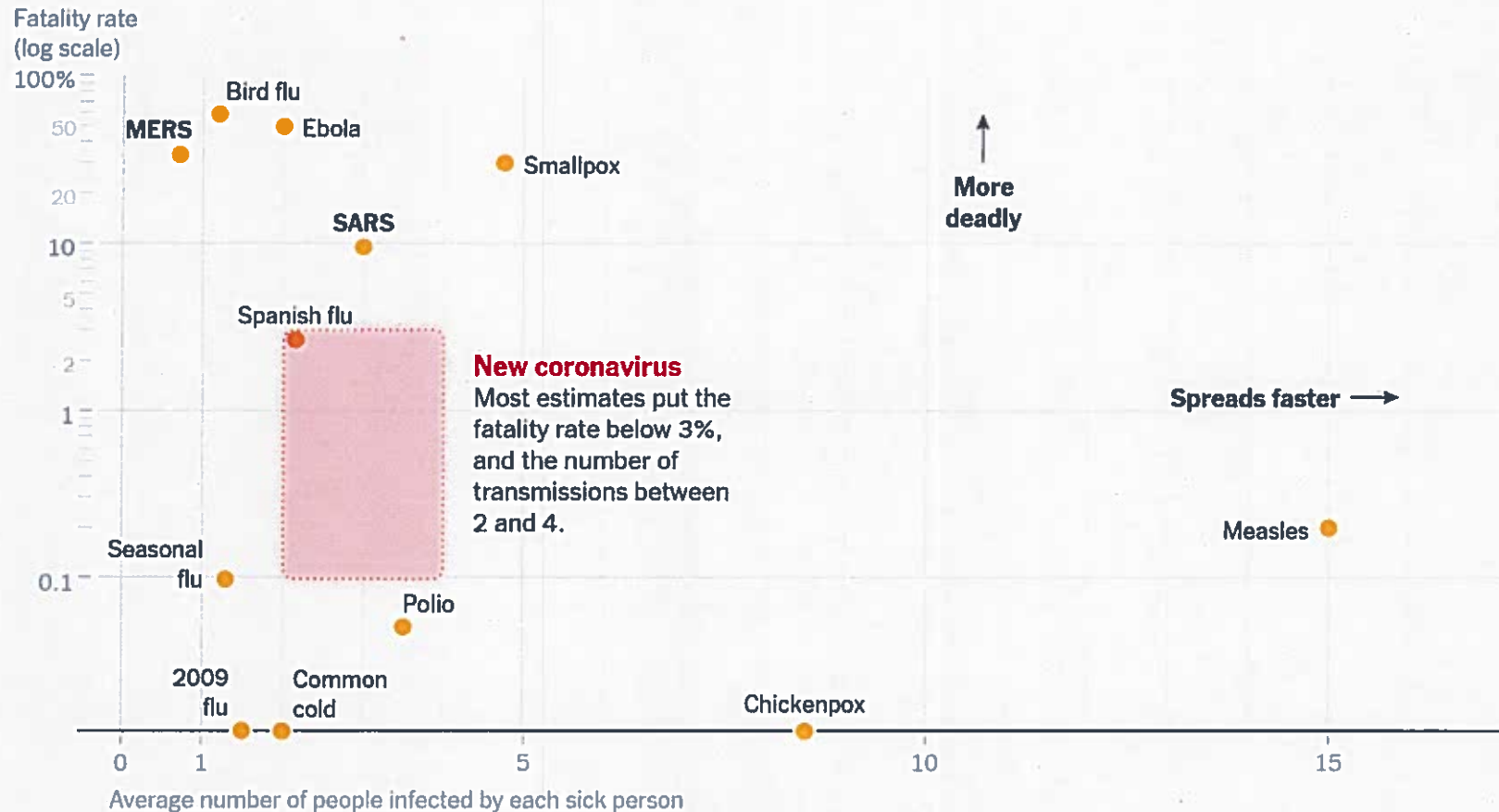
- SARS
 - 2002-2003
 - Started in China
 - 8,000 reported cases; 700 deaths
 - Moderate disease, many cases due to hospital transmission with some community transmission
- MERS
 - 2012
 - Started in Middle East
 - 3,000 reported cases; 800 deaths
 - Severe disease, many cases due to hospital transmission
- Influenza (Flu)
 - 9-49 million infected annually in US
 - 12,000-79,000 deaths per year in the US



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Case Fatality Rate and Transmissibility Comparison



Note: Average case-fatality rates and transmission numbers are shown. Estimates of case-fatality rates can vary, and numbers for the new coronavirus are preliminary estimates.



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Source: New York Times. Sheikh, K et al. How bad will the Coronavirus Outbreak get? Here are 6 key factors. Feb 28, 2020
<https://www.nytimes.com/interactive/2020/world/asia/china-coronavirus-contain.html>

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Locations with confirmed COVID-19 cases



Global case numbers are reported by the World Health Organization (WHO) in their [coronavirus disease 2019 \(COVID-19\) situation report](#) [\[7\]](#) . For U.S. information, visit CDC's [COVID-19 in the U.S.](#)

Source: <https://www.cdc.gov/coronavirus/2019-ncov/locations-confirmed-cases.html>



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Considerations for new infections and outbreaks

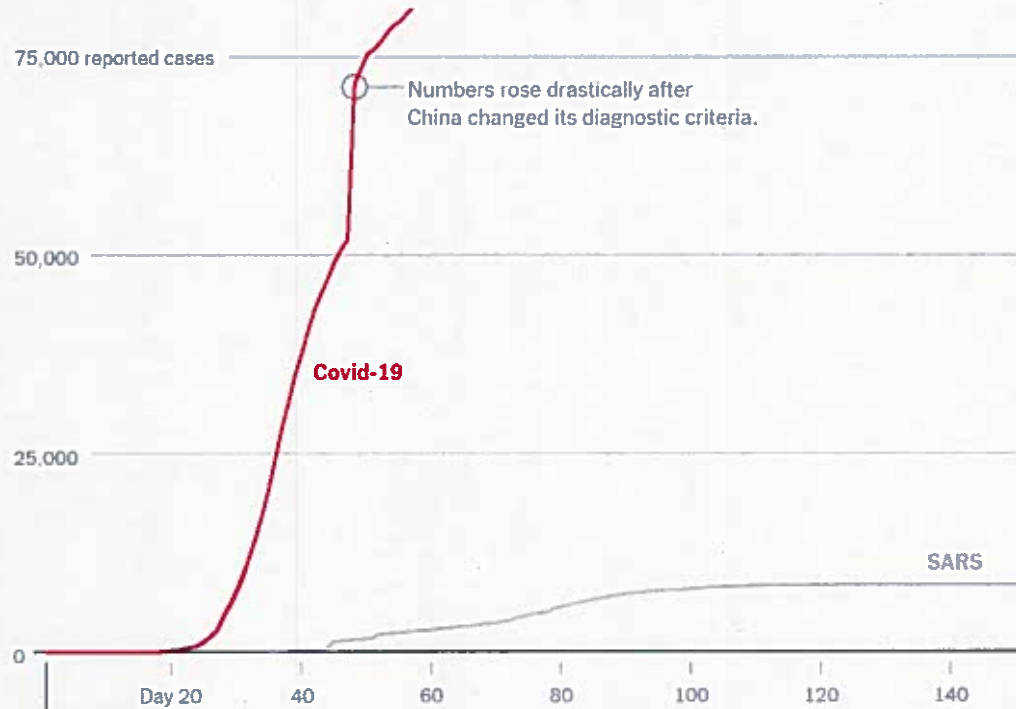
- How contagious is it?
 - How easily does it spread between people?
- How dangerous is it?
 - Do most people who are infected get mild/severe disease?
 - What percentage of people who are infected can die from it?
- What is the incubation period?
 - Time from being infected to showing symptoms



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Number of cases reported over time for COVID-19 compared to SARS



The first day that W.H.O. received reports of the outbreaks

Notes: The official World Health Organization case count for SARS was delayed at the beginning of the outbreak. Some cases were suspected but not confirmed; SARS is a diagnosis of exclusion, so previously reported cases may have been discarded after further investigation. New coronavirus data as of Feb. 27.



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Source: New York Times. Sheikh, K et al. How bad will the Coronavirus Outbreak get? Here are 6 key factors. Feb 28, 2020
<https://www.nytimes.com/interactive/2020/world/asia/china-coronavirus-contain.html>

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PowerPoint Presentation

from

the

March 5, 2020 Hearing

Baltimore City Public

School System

BALTIMORE CITY --- PUBLIC SCHOOLS

1

COVID-19 Emergency Preparedness Plan

Baltimore City Council Hearing

March 5, 2019

Linda Chinnia
Chair, Baltimore City Board of School Commissioners

Dr. Sonja Brookins Santelises
CEO, Baltimore City Public Schools

City Schools Emergency Preparedness Plan

2

Key Tenets of Emergency Preparedness Plan:

- Collaboration with Baltimore City Health Department
- Internal and external communications plan
- Increased cleaning of schools
- Contingency plans for school closure

Collaboration with Baltimore City Health Department (BCHD)

3

City Schools is working closely with BCHD on all issues directly related to school health including:

- Preventative measures & basic messaging
- Screening protocols for symptomatic students
- Dissemination of guidance related to COVID-19

Internal and External Communications

4

- The district is developing a **COVID-19 webpage** and will provide **regular updates** to families as well as guidance for staff
- **Two-way communication** will be available to all staff and community members who have questions related to the virus
- City Schools has an **emergency communication plan** to ensure all critical staff at City Schools and BCHD have the information they need as fast-paced situations unfold

School Cleanliness

5

- City Schools facilities personnel and custodians have increased their focus on disinfecting schools
- We continue to emphasize the importance of regular and thorough handwashing by ensuring that all buildings are **appropriately stocked with soap and refilled throughout the day**
- The district has developed an emergency deep cleaning plan for schools with confirmed cases

Contingency Plans for School Closure

6

- City Schools will provide instructional activities for all students if schools are closed
- Consistent communication will go to staff and families around safety guidance and academic expectations
- City Schools will follow the guidance of the city's **Emergency Food Working Group** to determine food and nutrition plans

Contact Information

7

John Davis - Chief of Schools
Email: JLDAVIS@BCPS.K12.MD.US

BALTIMORE CITY PUBLIC SCHOOLS

8

Board of School Commissioners

Linda Chinnia, *Chair*
Johnette A. Richardson, *Vice-Chair*
Dr. Michelle Harris Bondima
Dr. Durreyle Brooks
Andrew "Andy" Frank
Dr. Martha James-Hassan
Ronald S. McFadden
Vernon A. Reid
Shantell L. Roberts
Joshua Lynn, *Student Commissioner*
Christian Gant, Esq., *Board Executive Officer*

Senior Management Team

Dr. Sonja Brookins Santelises, *Chief Executive Officer*
Alison Perkins-Cohen, *Chief of Staff*
Shashi Buddula, *Chief Technology Officer*
John L. Davis, Jr., *Interim Chief Academic Officer*
John L. Davis, Jr., *Chief of Schools*
Jeremy Grant-Skinner, *Chief Human Capital Officer*
Tina Hike-Hubbard, *Chief of Communications, Engagement, and Enrollment*
Theresa Jones, *Chief Achievement and Accountability Officer*
Joshua I. Civin, *Chief Legal Officer*
Maryanne Cox, *Interim Chief Financial Officer*
Dr. Lynette Washington, *Chief Operating Officer*

**CITY OF BALTIMORE
COUNCIL BILL 20-0194R
(Resolution)**

Introduced by: President Scott, Councilmembers Burnett, Dorsey, Bullock, Henry, Pinkett,
Clarke, Middleton, Cohen, Reisinger, Sneed, Schleifer

Introduced and read first time: February 10, 2020

Assigned to: Health Committee

REFERRED TO THE FOLLOWING AGENCIES: Health Department, Mayor's Office of Emergency
Management, Police Department, Fire Department, Department of Finance

A RESOLUTION ENTITLED

1 A COUNCIL RESOLUTION concerning

2 **Informational Hearing - Baltimore's Strategic Response to the Wuhan Coronavirus**

3 FOR the purpose of inviting representatives from the Baltimore City Health Department, the
4 Mayor's Office of Emergency Management, the Baltimore Police Department, the Baltimore
5 City Fire Department, and the Baltimore City Department of Finance to brief the City
6 Council on Baltimore's strategic response to the Wuhan coronavirus.

7 **Recitals**

8 Recently, a new strain of coronavirus was detected in thousands of people worldwide,
9 prompting the World Health Organization to declare a "public health emergency of international
10 concern." Similarly, the United States federal government has declared the coronavirus outbreak
11 a public health emergency. This new strain of coronavirus, also referred to as 2019-nCoV, is a
12 strain that has not been previously found in humans and has lead to nearly 500 deaths around the
13 world as of last week.

14 Most people who were first diagnosed with this infection reported exposure to a large
15 seafood and live animal market in Wuhan, China. Recently, people with this infection did not
16 report contact with this market. Thus, person-to-person spread is occurring, and recently at least
17 one individual has been diagnosed in Maryland.

18 The risk of a Baltimorean contracting coronavirus is generally low – contracting the flu
19 remains a larger threat. However, the Baltimore City Council, on behalf of our constituents, is
20 seeking to assess Baltimore's preparedness both now and in the future should the coronavirus fail
21 to be contained or cured. Specifically, the Council is interested in the level of coordination that
22 is in place with our state and federal partners as well as the City's fiscal readiness for any public
23 health catastrophe.

24 **NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF BALTIMORE,** That the
25 Council invites representatives from the Baltimore City Health Department, the Mayor's Office
26 of Emergency Management, the Baltimore Police Department, the Baltimore City Fire
27 Department, and the Baltimore City Department of Finance to brief the City Council on
28 Baltimore's strategic response to the Wuhan coronavirus.

EXPLANATION: Underlining indicates matter added by amendment.
Strike-out indicates matter deleted by amendment.

Council Bill 20-0194R

1 **AND BE IT FURTHER RESOLVED**, That a copy of this Resolution be sent to the Mayor, the
2 Baltimore City Commissioner of Health, the Baltimore City Police Commissioner, the Chief of
3 the Baltimore City Fire Department, the Director of the Mayor's Office of Emergency
4 Management, the Director of Finance, and the Mayor's Legislative Liaison to the Baltimore City
5 Council.