



# COVID-19 Clinical EMS Rounds

## \*Operations During Civil Unrest

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# Hennepin EMS

- Minneapolis, MN; Hospital-based, 3<sup>rd</sup> service model
- 2-Tiered EMS system, 85,000 runs annually
- 266 square mile PSA, 1.2 million citizens
- 240 employees, 6 EMS Physicians and 1 EMS Fellow
- COVID-19 EMS operation posture March 16
- On May 25, Floyd George died during police restraint



# Subsequent Riots







# What Worked

- Pre-riot policy of allowable grab and go tactics
- Pre-riot uniform policy including body armor and helmets
- Police or military escort, 2 per vehicle
- Establishing unified command
- Staging out of hot zone, coordinating safe travel corridors
- Establishing “no-fly” zones
- Military perimeters of area receiving hospitals



# What Didn't Work

- COVID-19 transport tactics (cab pass through door open)
- Regular media and social media EMS narratives
- Recognition of riot conditions was very late
- Initial period of EMS crew and HQ security
- Prior decision to de-emphasize training with law enforcement on agitation
- Assuming that EMS or Healthcare are the good guys



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