



TEXAS A&M
UNIVERSITY



MASS PSYCHOGENIC ILLNESS

HAZARD-SPECIFIC ANNEX PLAN

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GPH-GU 5270 - Management of Public Health Disasters
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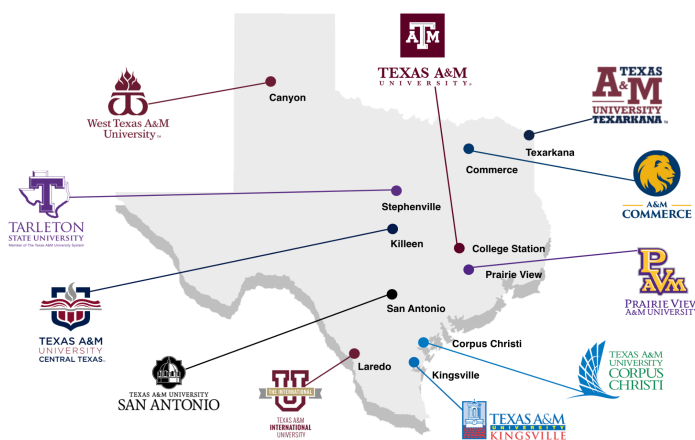
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Preface

Mass Psychogenic Illness (MPI) (also known as “mass hysteria” or “mass sociogenic illness”) is the “rapid spread of illness signs and symptoms affecting members of a cohesive group...whereby physical complaints that are exhibited unconsciously have no corresponding organic etiology.”¹

Universities must be prepared for a potential outbreak that might affect students, faculty, staff, and other members of the community. Costs associated with MPI may be considerable and often underestimate the full scope of resources used by the agencies involved in the investigation.² Factors such as labor and equipment costs make it difficult to exactly quantify expenditures, but inevitably these types of events can put a strain on University and government resources.²

A. Texas A&M University System



The Texas A&M University System consists of 11 universities and 8 agencies throughout the state (Figure 1).³ Its primary campus is located in College Station, TX.³ Other locations include Prairie View, Commerce, Tarleton, West Texas, Kingsville, Corpus Christi, Texarkana, Central Texas, San Antonio, and International.³ The most recent state agency to join is the Texas Division of Emergency Management, tasked with comprehensive and all-hazard planning.³

Figure 1: University System Map³

B. Texas A&M University - College Station, TX

Established in 1876, the College Station Campus spans 5,200 acres for almost 75,000 undergraduate and graduate students.⁴ It offers over 140 undergraduate programs, and over 270 graduate degree programs.⁴ As of Fall 2022, it has over 4,000 faculty members.⁴ Research expenditures totaled \$1.153 billion in 2022, the first university in Texas to surpass one billion.⁴



Signature Page

The undersigned have reviewed, approved in full, and will support implementation of the following Mass Psychogenic Illness (MPI) at Texas A&M.

Gen. Mark A. Welsh III
Texas A&M Interim President

Date

W. Nim Kidd
Vice Chancellor, Disaster and Emergency Services
Chief, Texas Division of Emergency Management

Date

Monica Martinez
Executive Director, Emergency Management

Date

Nancy Fahrenwald, PhD, RN, PHNA-BC, FAAN
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Date

Indra K. Reddy, PhD
Interim Chief Operating Officer and Vice President, Texas A&M Health

Date

J. Michael Johnson
Director and Chief of Police, University Police Department

Date

Mission

Texas A&M University is dedicated to the discovery, development, communication, and application of knowledge in a wide range of academic and professional fields. Its mission of providing the highest quality undergraduate and graduate programs is inseparable from its mission of developing new understandings through research and creativity. It prepares students to assume roles in leadership, responsibility and service to society. Texas A&M assumes as its historic trust the maintenance of freedom of inquiry and an intellectual environment nurturing the human mind and spirit. It welcomes and seeks to serve persons of all racial, ethnic and geographic groups as it addresses the needs of an increasingly diverse population and a global economy. In the 21st century, Texas A&M University seeks to assume a place of preeminence among public universities while respecting its history and traditions.

Statement of Purpose

The purpose of the Texas A&M plan annex (Mass Psychogenic) is to create a framework to respond to these types of emergencies, advocate for collaboration among local, state, and federal levels, as well as enable the University to respond strategically and effectively. Further planning and resource allocation is available in the annex. The proposed plan aims to mitigate the impact of the potential threat of mass psychogenic illness and calls upon the University departments to fulfill assigned roles and responsibilities in the event of an emergency, employees to maintain competency, retain open communication with stakeholders.

Communications Plans

A. Internal Communications

The Texas A&M Division of Emergency Management will continue communication with partner organizations (local and state agencies) other Texas schools in the system and other schools in Texas and other appropriate agencies to coordinate a proper response and ensure protocol is followed. In the case of an emergency, regardless of location, call 845-4311 or 5-4311 from a campus phone.

B. External Communications

The Texas Division of Emergency Management in conjunction with the City of Texas's Department of Emergency Management will aim to provide ample resources and forewarning of suspicious or worrisome activity through different communication channels such as city alerts sent by text message, Twitter, Facebook, and the news. Emergency Management will also work closely with local hospitals to prepare for an influx of patients.

Authorities

Federal:

- The Disaster Relief Act of 1974, PL 93-288 as amended.
- Robert T. Stafford Disaster Relief and Emergency Assistance Act, PL 100707
- Emergency Management and Assistance, Code of Federal Regulations, Title 44.
- Superfund Amendments and Reauthorization Act of 1986, PL 99-499 (Title III, “Emergency Planning and Community Right-to-Know Act of 1986”).
- Clean Water Act, (Section 311 of USC 1251).
- Clean Air Act, (40 CFR Part 51).
- Resource Conservation and Recovery Act (RCRA).
- Public Health Security and Bioterrorism Preparedness and Response Act (42 CFR Part 73)
- Agricultural Bioterrorism Protection Act of 2002; Possession, Use and Transfer of Biological Agents and Toxins (7 CFR Part 331 and 9 CFR Part 121)
- Higher Education Act of 1965 as amended by the Higher Education Opportunity Act (HEOA) of 2008, Public Law 110-31
- Homeland Security Act of 2002 (CIKR, Intro-2, CPG 101)
- Homeland Security Presidential Directive: HSPD 3, 5 and 8 o National Response Framework

State:

- The Texas Disaster Act of 1975, V.T.C.A. Government Code, Title 4, Chapter 418.
- Texas Hazardous Substances Spill Prevention and Control Act, Chapter 26, Subchapter G. Texas Water Code.
- Texas Education Code Sec. 51.217
- Texas Education Code Sec. 51.218
- State Solid Waste Disposal Act, Texas Civil Statutes Article 4477-7.
- State of Texas Emergency Management Plan

Local:

- Texas A&M University System Policy for Emergency Management (34.07)
- Texas A&M University System Regulation for Emergency Management EOP for System Campuses (34.07.01)
- Texas A&M University Rule for Environmental Health and Safety Programs (24.01.01.M4)
- College Station City Ordinance # 3180, dated May 18, 2009
- Brazos County Inter-jurisdictional Emergency Management Plan



Definitions

Centers for Disease Control and Prevention (CDC): A component of the U.S. Dept. of Health and Human Services responsible for the prevention and control of threats to public health. Working with states and other partners, CDC provides a system of health surveillance to monitor and prevent disease outbreaks including bioterrorism, implement disease prevention strategies, and maintain national health statistics.

Centers for Public Health Preparedness (CPHP): Created by the CDC in 2002, it's a national network to help health departments build and strengthen public health professionals ability to effectively respond to current and emerging public health threats.

Department of Homeland Security (DHS): A federal agency who works to improve security of the United States to prevent terrorist attacks, emergency response to natural and manmade disasters, cybersecurity, border and immigration enforcement, and protecting against and responding to threats and hazards to the United States.

Department of Health and Human Services (DHHS): A government agency to help enhance the health and well-being of Americans by providing effective health and human services, and by encouraging robust and continuous progress in the scientific foundation of medicine, public health, and social services.

Department Operations Center (DOC): Serves as a central command and control hub tasked with executing emergency management and guaranteeing an effective response to emergencies.

Disaster Area: A region or location declared to be the scene of an emergency created by a disaster, either natural, technological or social hazards.

Disaster District Committee (DDC): Individuals from state agencies, boards, commissions, and volunteer groups who represent their respective organizations on the Emergency Management Committee (EMC). Each DDC offers direction and administrative assistance for disaster response.

Disaster Medical Assistance Team (DMAT): Offer essential and immediate medical attention, assess and prioritize a large number of casualties, provide initial revival and stabilization, deliver advanced life support, and ready the sick or injured for evacuation.

Emergency Control (Communications) Center (ECC): A predetermined site where designated staff from a department can gather to initiate a coordinated response to an emergency.

Emergency Medical Services (EMS): Organizations at the local, state, or federal level responsible for maintaining high standards of prehospital patient care through an efficient, and coordinated system for emergency medical care, injury prevention, and disaster medical response.

Emergency Operations Center (EOC): A designated personnel from various agencies within a specific jurisdiction gather to effectively coordinate public health emergencies and emerging threats.



Emergency Operations Plan (EOP): An emergency readiness strategy outlining prescribed actions to be taken before, during, and after an emergency.

Federal Emergency Management Agency (FEMA): A branch under the Department of Homeland Security responsible for supplying disaster preparedness and response resources, offering trained disaster response personnel, conducting disaster training, assisting other emergency management agencies, and overseeing the federal response during an emergency.

Geographic Information Systems (GIS): A computer-based mapping system that can be used to monitor disease outbreak, injuries, events and much more.

Hazard Risk Assessment Instrument (HRAI): A framework that facilitates the completion of hazard risk assessment, conducts analyses on resources and vulnerabilities, and predicts potential impacts from hazards.

Local Health Official (LHO): The person entrusted with the duty of safeguarding the community or population from diseases.

Mass Behavior: A type of social behavior that is characterized by collective actions or conduct involving individuals who are physically dispersed from each other.

Mass Psychogenic Illness (MPI): Also known as mass sociogenic illness, mass hysteria, or mass psychogenic disorder, refers to a phenomenon in which a group of individuals within a specific community or setting experience a constellation of physical or psychological symptoms with no identifiable organic or environmental cause. These symptoms often manifest as a result of shared beliefs, anxiety, or stress within the group, rather than a direct exposure to a physical agent or pathogen.

Outbreak: An occurrence of cases of a particular disease, condition, or phenomenon in a population or geographic area that is greater than what is normally expected within that population or area during a specific time period.

Psychological First Aid (PFA): A strategy based on available evidence-informed and centered around the idea of human resilience. PFA strives to alleviate stress symptoms and support a healthy recovery following a traumatic event, natural disaster, public health emergency, or even a personal crisis.

Psychosomatic: Referring to a physical illness or conditions that is either brought about or worsened by mental factors like internal conflicts or stress.

Public Information Officer (PIO): Prepares news releases, informative materials, interviews, and publications regarding public safety or health-related matters to promote public health awareness. Additionally, the PIO manages communication with the media and may address inquiries during press conferences.

Specific Measurable Attainable Rewarding and Timed (SMART): Addresses key components to take into account when formulating project or training objectives.

Standard Operating Procedures (SOPs): A defined set of procedures to adhere to in particular circumstances, in an attempt to implement a well-coordinated and organized response.

Mutual Aid Agreements

Texas A&M University has the following mutual aid agreements and contracts⁵:

- **November 2022** - Community Emergency Operations Center Interlocal Agreement
- **February 2009** - College Station and Texas A&M University Interlocal Agreement for fire suppression at Easterwood Airport
- **October 2008** - Law Enforcement Assistance Interlocal Agreement
- **January 2004** - Brazos County Interjurisdictional Mutual Aid Agreement
- **February 2004** - Brazos Valley Regional Mutual Aid Agreement
- **December 1971** - College Station and Texas A&M University Memorandum of Agreement and Understanding for fire suppression on Texas A&M University Property

The University should also consider joining the National Intercollegiate Mutual Aid Agreement (NIMAA).⁶ Created by the International Association of Emergency Managers (IAEM) Universities & Colleges Caucus, NIMAA established a mutual aid process for higher educational institutions in the United States.⁶ Texas A&M would be able to both request and provide resources from 116 other universities and colleges.⁶ Nearby signatories include St. Edward's University and College of the Mainland (Figure 2).⁷

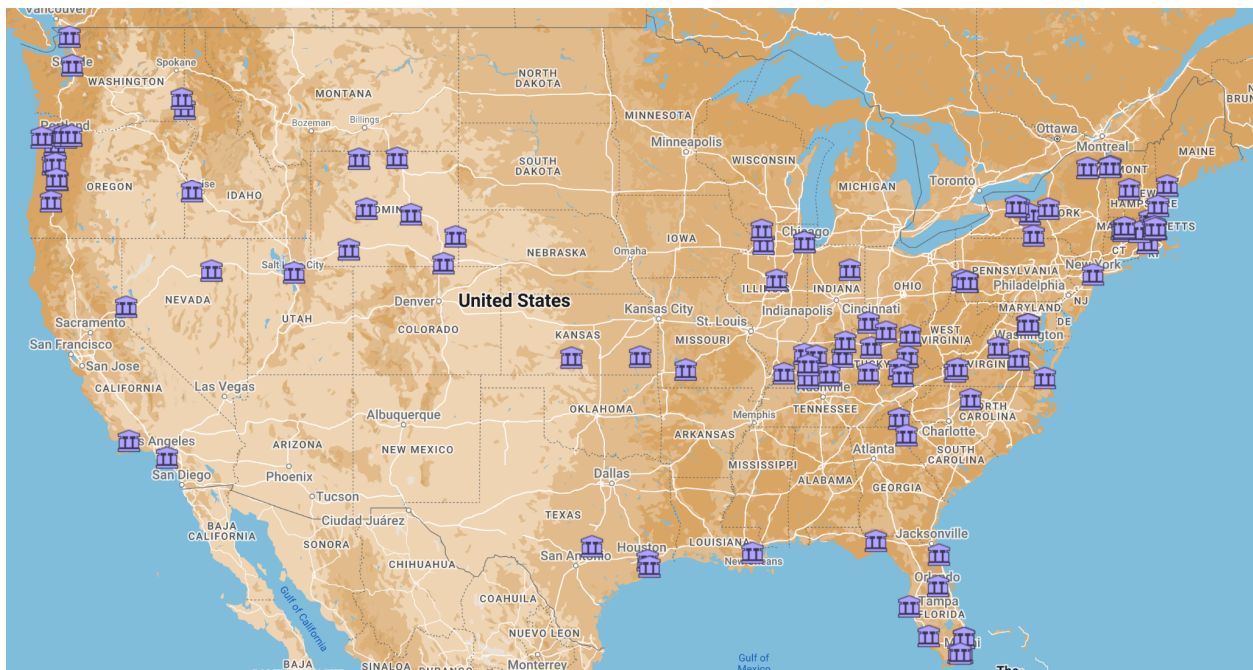


Figure 2: NIMAA Members (as of April 2023)



Concept of Operations (CONOPs)

A. Needs Assessment

Mass psychogenic illness (MPI) is an illness that affects individuals with unknown biological and environmental causes. This illness is challenging to identify, make diagnoses, and implement treatments when the symptoms may at first be unexplained. Symptoms may vary (including dizziness, headache, vomiting, fainting, and hyperventilating).⁸ The aim of this needs assessment is to raise awareness about Mass Psychogenic Illness and establish a concept of operations for addressing the needs of college campuses during psychogenic illness outbreaks.

Currently, various barriers are hindering the identification and treatment of MPI. Historically, this phenomenon has disproportionately affected young people, particularly in educational and rural settings.⁹ Contributing factors include a lack of general awareness and documented cases, a tendency to dismiss those affected, insufficient knowledge and comprehension of MPI, and inadequate training for personnel including campus staff, faculty, emergency responders, police, and medical personnel. The demographic typically impacted by MPI consists of students, women, international students, individuals with limited English proficiency, faculty, staff, visitors, as well as people with disabilities and pre-existing mental health conditions. MPI is most likely to occur in settings such as athletic and student organizations, campus facilities (such as dorms), teaching sites, communities, and faith-based organizations.¹⁰ While no known causes exist, these settings tend to be hotspots for outbreaks, which can vary in duration from short-term to intermediate or long-term.

Due to limited data on the management of mass psychogenic illnesses, a rapid needs assessment (RNA) in the face of an incident is necessary to address future outbreaks within specific sub-groups or populations. It is essential to capture information quickly before symptoms spread. RNAs determine what resources are necessary to conduct life-saving and life-sustaining operations during the emergency response phase of a disaster. The needs assessment must be carried out in a timely manner, following evidence-based practice and ensuring clear, consistent communication.¹¹ Additionally, public health authorities should remain adaptable while fostering collaboration with community partners. By working together, strategies for effective response can be created to prevent the rapid spread of MPI. The goal of the RNA is to determine the scope of disaster: How bad is it? Who and what parts of campus are affected? How many people are affected? What are the risks to life, safety, and health? What is the status of the response? What resources are needed? Who should be notified? Who will be Incident Commander (Appendix B)? What is the role of the campus health center? Which entities in the community are involved (local hospitals, department of health, fire, rescue, EMS, etc.)? This initial information will set the tone for the entire response.

Campus responders (e.g., campus health center, campus security, campus emergency responders, etc.) should have received training prior to the event on mass psychogenic illness

phenomena, and mass hysteria, team composition, responsibilities, and protocols (Appendix C). Most importantly, the choice of words used when addressing outbreaks of MPI is essential when communicating with parents, students, staff, and the community. It is important to emphasize that the information provided is evidence-based and does not intend to incite mass panic.

B. Matching Resources

Our goal is to implement rapid mobilization of supplies and staff to aid in containing the spread of psychogenic illness. We intend to collaborate with local law enforcement and fire departments to separate those affected and administer necessary medical attention as well as connect them with mental health professionals. We also will have continuous surveillance, to be able to quickly recognize an outbreak and respond accordingly. In addition, we call upon existing literature of evidence-based practices in mitigating psychogenic illness. Lastly, closely following pre-existing disaster assessment team training plans can aid in delegating roles and responsibilities to team members and optimize response time.

In terms of addressing the needs of vulnerable populations, we intend to deliver mental health resources to those in need, and this includes those with pre-existing mental health conditions, and we will ensure that a support system that fosters trust and understanding is in place for students and faculty. We intend to engage trained health professionals familiar with treatment of mass hysteria.

C. Evaluating Effectiveness

An After Action Report (AAR) must be completed within 7 days of deactivation. This is to analyze the management of and response to incident(s), event(s), and exercise(s).¹² Identifying strengths and weaknesses to be built upon or improved ensures our plans, procedures, and policies are regularly updated.¹³ A comprehensive guide by EHS can be found at: [Online Guide for Completing an After Action Review/Report](#). An updated [After Action Report Template](#)⁴ has been adapted based on New York University's AAR (Appendix D). A sample event overview is also included (Appendix E).



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APPENDIX

A. Threat and Hazard Identification and Risk Assessment

NATURAL	TECHNOLOGICAL	HUMAN-CAUSED
<ul style="list-style-type: none"> ● Flooding: Mass flooding in Brazos County will likely occur every five years. This is caused by slow-moving thunderstorms, heavy rain from hurricanes, and tropical storms, which can overflow rivers and streams and cause urban flooding. Many roads run through low-lying areas, which are prone to frequent flooding. In College Station, flood hazard areas can flood up to three feet (ft.) deep and up to one ft. on the Texas A&M campus.² ● Droughts and Excessive Heat: Droughts are common and slow-onset hazards since they can last long periods of time. There are 5 levels of drought severity, from minor drought to exceptional drought. Agriculture is impacted. Communities have drought restrictions to conserve water, such as only watering plants between 6 pm – 10 am and limited car washing.² ● Hurricanes and Tornadoes: During hurricane season, precautions are taken if a hurricane passes through 	<ul style="list-style-type: none"> ● Infrastructure: Poor infrastructure has led to various flooding issues in College Station and Brazos County. Sewers are not able to handle the massive amounts of water this area gets during storms.⁴ ● Water and Land Contamination: Hazardous waste released into the Brazos River in Bryan, TX neighbor to college station. In the last decade there have been reports of acid spills, wastewaters, hydrogen chloride leak, and fertilizer chemicals like ammonium nitrate. With Texas extreme heats, many of the nearby plants can overheat and explode, releasing toxins to water streams and the air. Recently about 300,000 gallons of wastewater was released unintentionally from the City of Bryan sanitary sewer system causing the water quality for drinking to be monitored.⁴ ● Oil and gas drilling: The surrounding areas of college station are stationed with various oil and gas drilling companies. Recently, in February 2023, the City of College Station Wolf Pen Creen was contaminated with oil which was near 	<ul style="list-style-type: none"> ● Gun Violence: There have been several incidents with active shooters and shootings near and/or Texas A&M University campus, Bryant, and College Station. It is easy for people to get access to guns and people can have concealed handguns on campus and dorms with a license.³ ● Sexual Assaults: There has been an increase of sexual assault cases reported. In 2022, there were 106 cases reported compared to 89 in 2021, 81 in 2019, and 78 in 2020. Most of the targets are women, on campus or surrounding areas.⁵ ● Vehicle Accidents: There has been an increase in vehicle accidents in College Station due to its growth and development in the last decade. Not following speed limits, driving under the influence, reckless and distracted driving are some of the causes of vehicle accidents.¹

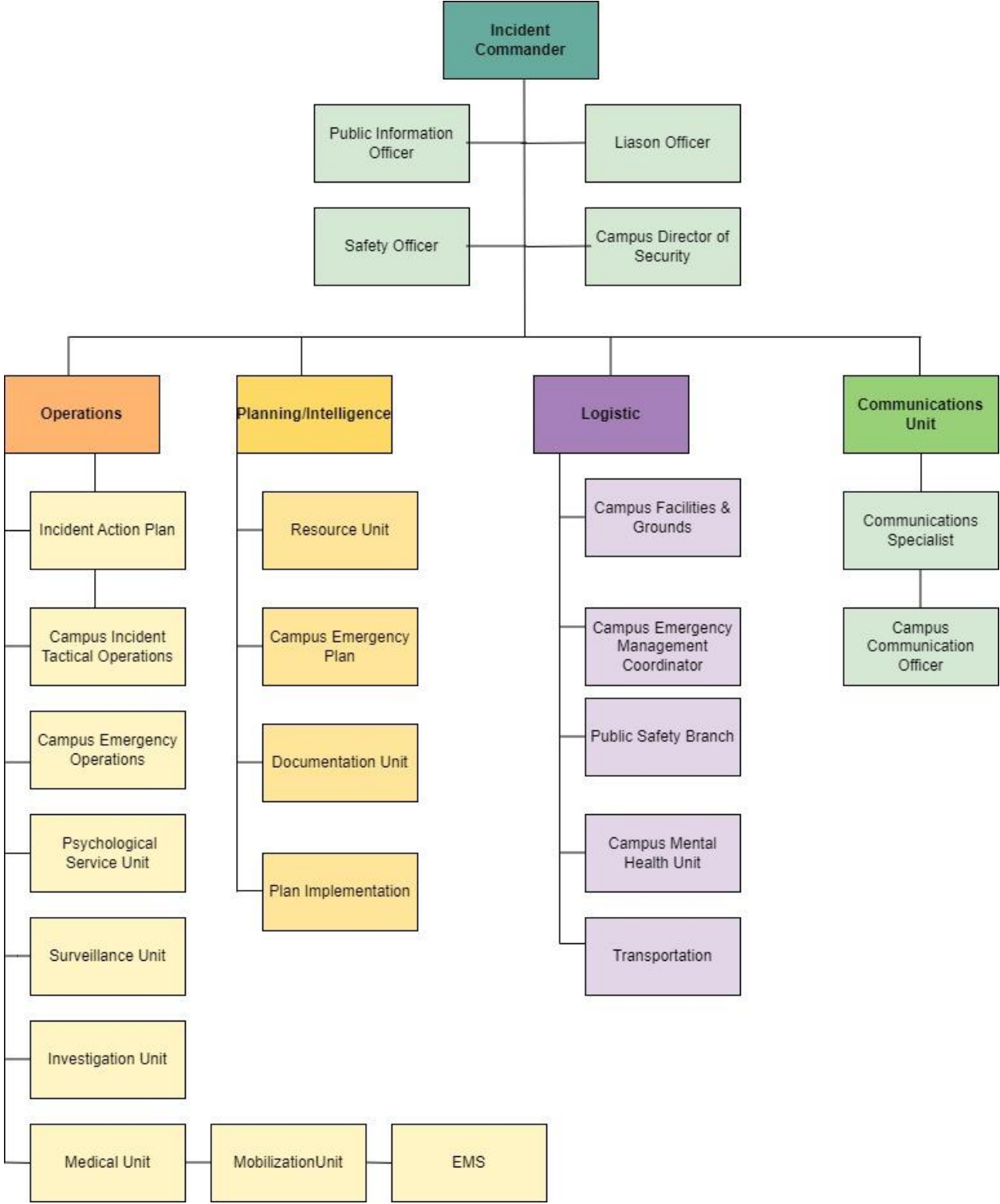


<p>College Station. High-speed wind is a concern, along with tornadoes. There are no sirens set up for tornado warnings; instead, people rely on the news on TV or other social media platforms.²</p> <ul style="list-style-type: none">● Urban and Wildland fires: Due to excessive heat in the summer, the risk of wildfires is high. In Brazos County, surface fires are common and can shut down facilities for up to two weeks and can affect up to 25% of properties being destroyed by the fire. Warning time for fires are minimal or none.²	<p>apartments. Vegetation, environment and health concerns were raised to the spillage.⁴</p>	
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<https://www.tamu.edu/emergency/documents/EOP.pdf>

B. ICS Chart





C. Training Seminar

Training Seminar Title: Mass Psychogenic Illness	
Objectives	<ol style="list-style-type: none">1. Test the activation protocol for a potential environmental health and safety (EHS) incident.2. Practice public-facing communications in the event of a Mass Psychogenic Illness.
Estimated Length of Training	2 hours
Target Audience	Community Members (Max: 15 people)
Session Facilitators	Leslie Lutz, Assistant Emergency Management Coordinator 979-821-1040 leslielutz@tamu.edu Amanda Fox, Emergency Management Specialist 979-821-1043 afox@tamu.edu
What do you want community members to do as a result of their attending this session?	<ol style="list-style-type: none">1. Awareness of Mass Psychogenic Illness.2. Host trainings to prepare the community to continue essential functions in the event of an outbreak.3. Emphasize the importance of the language being used during outbreaks and create a communications plan for public health officials, health workers, and local emergency services to use as a guide when communicating with patients, guardians and the general public.
Strategies to Increase Community Uptake	<ol style="list-style-type: none">1. Create a workshop with a PowerPoint and interactive role-playing simulating an MPI outbreak.2. Food / meal provided at roundtable discussion.3. Brochures with outline of the base emergency operations plan and department-specific plan.4. Brochure with information on Mass Psychogenic Illness with examples and resources



D. After Action Report Template¹²



[Event, Incident, or Exercise Title]

After Action Report

[Department or Unit]

[Date of After Action Report]

Event Overview

Incident or Exercise Name	
Incident or Exercise Date	
Scope	
Objectives	<ol style="list-style-type: none"> 1. 2. 3.
Threat or Hazard	
Event Summary	(Or "Scenario" for Tabletop Exercise)
Special Challenges	<ol style="list-style-type: none"> 1. 2. 3.
Core Capabilities Challenged*	<ol style="list-style-type: none"> 1. 2. 3.
Point of Contact	Name Title Contact Information

* Federal Emergency Management Agency. *Mission Areas and Core Capabilities*. Last Updated July 20, 2020. Accessed October 14, 2023.

<https://www.fema.gov/emergency-managers/national-preparedness/mission-core-capabilities>



OBJECTIVE:

- **Core Capability Challenged:**
- **Strengths**
 -
 -
 -
- **Areas for Improvement**
 -
 -
 -
- **Lessons Learned**
 -
 -
 -

OBJECTIVE:

- **Core Capability Challenged:**
- **Strengths**
 -
 -
 -
- **Areas for Improvement**
 -
 -
 -
- **Lessons Learned**
 -
 -
 -

OBJECTIVE:

- **Core Capability Challenged:**
- **Strengths**
 -
 -
 -
- **Areas for Improvement**
 -
 -
 -
- **Lessons Learned**
 -
 -
 -



TIMELINE OF EVENTS

Date and/or Time	Description of Actions



IMPROVEMENT PLAN

	Area of Improvement	Recommended Action	Core Capability Challenged	Responsible Party	Start Date	Completion Date
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						



E. Example AAR - Event Overview

Event Overview

Exercise Name	Mass Psychogenic Illness Tabletop Exercise
Exercise Date	October 16, 2023
Scope	This tabletop exercise is a roundtable discussion on protocols following an outbreak of Mass Psychogenic Illness at Texas A&M University.
Objectives	<ol style="list-style-type: none">1. Test the activation protocol for a potential environmental health and safety (EHS) incident.2. Practice public-facing communications in the event of a Mass Psychogenic Illness.
Threat or Hazard	Mass Psychogenic Illness (MPI)
Scenario	During Finals Week, a gasoline-like odor at the Evans Library is reported to University Police. Within one hour, students and staff began to experience symptoms such as headache, nausea, vomiting, and lightheadedness. 83 people reported symptoms, 57 required medical attention, 25 were transported to the local emergency room, and over 150 students were evacuated from the building. Reports of the incident are spreading quickly throughout social media, with news outlets already on-scene.
Special Challenges	<ol style="list-style-type: none">1. Building evacuation2. Locating source of odor
Core Capabilities Challenged	<ol style="list-style-type: none">1. Public Information and Warning2. Intelligence and Information Sharing3. Environmental Response/Health and Safety4. Health and Social Services
Point of Contact	Monica Martinez Executive Director, Emergency Management emergencymanagement@tamu.edu