

**AFTER ACTION REPORT**

**[Insert State Organization Name]**

Continuity of Operations

Exercise

[↑Insert Organization Logo↑]

**[Insert Date of Exercise]**

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# Preface

The [Insert State Organization Name] conducted the Continuity of Operations (COOP) Exercise to enhance preparedness efforts for a continuity-disrupting incident. This After Action Report (AAR) was produced with input, advice, and assistance from the Planning Team, which followed guidance set forth by the U.S. Department of Homeland Security (DHS) Homeland Security Exercise and Evaluation Program (HSEEP).

This AAR is a summary of information gathered during the exercise. The report provides feedback to participants and governing agencies regarding the achievement of the exercise objectives. The suggested actions in this report should be viewed as recommendations only. In some cases, [Insert State Organization Name] may determine that the benefits of implementation are insufficient to outweigh the costs. Additionally, alternative solutions may be identified at a later time that are more effective or cost efficient. Organizations should review the recommendations and determine the most appropriate actions and resources needed (e.g., time, staff, funding, etc.) for implementation.

This AAR and all information discussed as part of the exercise is designated as FOR OFFICIAL USE ONLY (FOUO). The document is to be controlled, stored, handled, transmitted, distributed, and disposed of in accordance with [Insert State Organization Name] practices relating to FOUO information. The report is not to be released to the public or to personnel who do not have a valid need to know without prior approval of the appropriate authorized [Insert State Organization Name] official.

# Executive Summary

The Continuity of Operations Exercise evaluated the [Insert State Organization Name] COOP Plan and satisfied the annual exercise requirement. Senior leadership and key staff from [Insert State Organization Name] were fully engaged and committed throughout the execution, and evaluation phases of the exercise. As a result, the [Insert State Organization Name] personnel have deepened their understanding of the coordination required to respond to and recover from a continuity-disrupting incident. Despite identifying areas for improvement, participants demonstrated a desire to creatively problem solve and work together to ensure the continued delivery of essential functions/critical business processes. The lessons learned from this effort lay the foundation for improved COOP capabilities by [Insert State Organization Name] personnel regardless of the hazard.

Through the realistic and plausible scenario presented in the exercise, each participant was provided with the opportunity to act according to their assigned role during a continuity-disrupting incident.

The following objectives were identified for the COOP exercise:

* Discuss and validate the State Organization’s COOP Plan elements, including:
  + Identification of essential functions and critical business processes
  + Incident management
  + Alternate facilities
  + Critical customers, partners, and vendors
  + Resource requirements
* Discuss and validate the processes required to perform internal and external Crisis Communications.
* Discuss and validate the process for reconstitution.
* [List any additional exercise objectives]

The purpose of this report is to analyze exercise results, determine the organizational strengths to be maintained and built upon, identify areas for potential improvement, and support corrective actions. Evaluators’ key findings and recommendations highlighted by the exercise are summarized in the **Analysis, Findings, and Recommendations** section of this report.

## Major Strengths

The major strengths identified during the exercise are as follows:

* [Insert major strengths based on Exercise Evaluation Guides (EEGs), feedback, and hotwash notes]

## Primary Areas for Improvement

As expected and desired in every exercise, several opportunities for improvement were identified. Some specific examples are as follows:

* [Insert areas for improvement based on EEGs, feedback, and hotwash notes]

# Exercise Design Summary

## Exercise Purpose and Design

The COOP exercise focused on the capabilities of [Insert State Organization Name] to respond to a continuity-disrupting incident using their COOP Plan. Facilitators led players through a discussion of their anticipated response actions.

### Core Capabilities and Exercise Objectives

The exercise objectives were aligned with state and federal capabilities such as the U.S. Department of Homeland Security (DHS) Federal Emergency Management Agency (FEMA) Core Capabilities. Objectives are listed in **Exhibit 1**.

Exhibit 1. Exercise Objectives and Associated Core Capabilities

|  |  |
| --- | --- |
| **CORE CAPABILITIES** | **EXERCISE OBJECTIVE** |
| Planning | * Discuss and validate the State Organization’s COOP Plan elements, including   + Identification of essential functions and critical business processes   + Incident management   + Alternate facilities   + Critical customers, partners, and vendors   + Resource requirements * Discuss and validate the processes required to perform internal and external Crisis Communications. * Discuss and validate the process for reconstitution. * [List any additional exercise objectives] |

## Overview of Exercise: Scenario and Play Summary

The exercise was conducted on [Insert Date of Exercise] at [insert name of building/address where exercise was conducted]. The following exercise modules were completed:

[Remove module 2A if not conducted]

* Module 1: COOP Plan Phase 2 – Activation and Notification
* Module 2: COOP Plan Phase 3 – COOP Operations
* Module 2A: COOP Plan Phase 3 (cont.) – Advanced COOP Operations
* Module 3: COOP Plan Phase 4 – Reconstitution

### Scenario

The scenario described below provided the framework for exercise play.

[Select and update the scenario, and delete others].

#### Mold

For the past few weeks, an increasing number of employees within the [insert State Organization primary location] building have become ill with respiratory symptoms, including severe asthma, stuffy nose, wheezing, and red and itchy eyes. Earlier today, while environmental clean-up crews were conducting an inspection, they discovered evidence of black mold. Upon further inspection, extensive mold was observed throughout the length of the building’s HVAC system, on furniture, and within the wall insulation. At [insert time of day or evening], leadership was notified that due to the extent of the mold and the health hazard it presents, the building must be vacated. Personnel must prepare to activate their COOP Plan.

#### Earthquake

This morning at 11 a.m., employees at [insert State Organization primary location] experienced a sudden, strong shaking of the building that lasted for approximately 15 seconds. Recognizing an earthquake, employees took cover under desks and tables. Books and equipment were thrown off shelves, and some windows shattered, and [insert number] employees were injured. Once the shaking stopped, employees observed large cracks in the building’s masonry. Due to the extent of the damage and the life safety hazard it presents, the building must be vacated. Personnel must prepare to activate their COOP Plan.

#### Winter Storm

Earlier this week, the National Weather Service (NWS) and local meteorologists predicted an incoming winter storm likely to deliver minimal to moderate snowfall. Forecasts indicate that the storm will not arrive until late this evening and will have little impact on commutes. Based on the forecast, employees of [Insert State Organization Name] report to work as usual.

Despite the forecast, heavy bands of snow, sleet and freezing rain arrive at approximately 11 a.m. and begin to coat vehicles, trees, and power lines in snow and ice.

At 2 p.m., employees hear a loud crash, and the electricity goes out temporarily. The back-up generator quickly restores basic lighting to the office. Moments later, it is reported that a large tree fell into the building. While no one was injured, the tree created a substantial hole in the roof and side wall and damaged office, file storage, and meeting space. Due to the extent of the damage and the life safety hazard it presents, the building must be vacated. Personnel must prepare to activate their COOP Plan.

# Analysis, Findings, and Recommendations

Exercise participants provided valuable observations and insights related to exercise play. Aligning exercise objectives and core capabilities provides a consistent method for evaluation that transcends individual exercises to support preparedness reporting and trend analysis. Table 1 includes evaluation points of review for the Identification of Essential Functions/Critical Business Processes objective. The table also includes ratings for each point of review as observed during the exercise and determined by the evaluation team. Participant feedback from the handout survey is summarized in **Annex E**.

[Important note for completing the EEGs. Delete this instructions paragraph prior to finalizing the AAR]: The EEG questions have been divided into the tables below based on their assigned sub-objectives. AAR question numbering matches the EEG module and question number and is noted in the tables below with “**Module 1: Question 1.A.”** followed by the question text. For each question, please transfer the observations from the EEGs to the corresponding question. For example, if “Yes” was marked on the EEG under **Module 1: Question 1.A** “COOP Plan identified activation procedures”, then place an X in the “Included in COOP Plan” column. Delete all questions that were not applicable to your Organization’s exercise.

## Objective 1 – Discuss and validate the State Organization’s COOP Plan elements

### Identification of essential functions/critical business processes

[Elaborate on any key strengths, areas for improvement, or key takeaways gathered during the exercise using the format below. Add additional strength or area for improvement observations as needed.]

The following observations (strengths and areas for improvement) were identified for this objective: ***Discuss and validate the State Organization’s COOP Plan elements including: Identification of essential functions/critical business processes.* Table 1** includes evaluation points of review for this objective.

**Observation 1.1.** **Strength**: [Statement about strength or observation. *Sample text: All Organization essential functions/critical business processes were included in the COOP Plan, and each essential function/critical business process was assigned a recovery time objective (RTO), staffing levels, vital records, critical applications, and staff contact information.]*

**Analysis:** [Description of the strength.] *Sample text: For each of the six essential functions/critical business processes, all supporting information related to the continuation or restoration of the essential function was included in the COOP Plan. Exercise participants were able to quickly locate the essential functions/critical business processes and prioritize restoration by RTO. Participants reviewed the contact information, tasks, applications, and vital records required to perform the essential function/critical business processes, and identified employee contact information that requires updating. All employee email addresses must be updated to reflect “.@delaware.gov”, and Jane Doe’s personal cell phone number is incorrect.*

**Recommendation 1.1.1:** [Identify the recommended action.] *Sample text: Update employee email addresses to reflect “.@delaware.gov”.*

**Observation 1.2.** **Area for Improvement**: [Statement about area for improvement or observation.] *Sample text: The COOP Plan did not identify vital records or back-up systems for any essential function/critical business processes.*

**Analysis:** [Description of the area for improvement.] *Sample text: While the COOP Plan identified all essential functions/critical business processes, vital records or back-up systems that would be necessary to help ensure continued delivery of the functions were not included. Participants identified the vital records and back-up systems during the exercise discussion. These findings can be incorporated into the COOP Plan.*

**Recommendation 1.2.1:** [Identify the recommended action.] *Sample text: Revise the COOP Plan to include vital records and back-up systems for each essential function/critical business process.*

Table 1. Points of Review for Identification of Essential Functions/Critical Business Processes Objective

| **Evaluation Point of Review** | **Included in COOP Plan** | **Not Included in COOP Plan** | **Not Observed** |
| --- | --- | --- | --- |
| **Module 1: Question 7.** Are essential functions/critical business process RTOs noted in the COOP Plan? |  |  |  |
| **Module 1: Question 8A**. Are critical applications listed in the COOP Plan? |  |  |  |
| **Module 1: Question 8B**. Is a responsible department/party assigned for maintaining the critical applications? |  |  |  |
| **Module 1: Question 9.** Does the COOP Plan identify vital records and back-up systems? |  |  |  |
| **Module 2: Question 6A.** Does the COOP Plan identify where essential functions/critical business processes will be performed (e.g., telework or alternate facility)? |  |  |  |
| **Module 2: Question 8.** Are financial purchasing/acquisition procedures identified? |  |  |  |
| **Module 3: Question 2.** Are there any COOP-specific acquisition procedures that are included in the COOP Plan? |  |  |  |

### Incident Management

The following observations (strengths and areas for improvement) were identified for this objective: ***Discuss and validate the State Organization’s COOP Plan elements, including Incident Management.* Table 2** includes evaluation points of review for this objective.

**Observation 2.1.** **Strength**:

**Analysis:**

**Recommendation 2.1.1:**

**Observation 2.2.** **Area for Improvement**:

**Analysis:**

**Recommendation 2.2.1:**

Table 2. Points of Review for Incident Management Objective

| **Evaluation Point of Review** | **Included in COOP Plan** | **Not Included in COOP Plan** | **Not Observed** |
| --- | --- | --- | --- |
| **Module 1: Question 1.A.** Does the COOP Plan identify activation procedures? |  |  |  |
| **Module 1: Question 1B**. Does the COOP Plan identify leadership or members of an incident management team? | *A completed Incident Command System (ICS) chart or form is attached.* |  |  |
| **Module 1: Question 2.** Does the COOP Plan identify who is authorized to determine a building closure? |  |  |  |
| **Module 2: Question 3A.** Is someone assigned responsibility for setting up the alternate facility? |  |  |  |
| **Module 2: Question 7**. Does the COOP Plan identify a role responsible for moving the COOP Kit to the alternate facility, or is it pre-staged? |  |  |  |
| **Module 2: Question 9**. Is personnel accountability established? |  |  |  |
| **Module 2: Question 11B**. Does the Plan identify how the primary facility will remain secure? |  |  |  |
| **Module 2A: ICC Question 1**. Are lines of succession and delegations of authority included in the COOP Plan? |  |  |  |
| **Module 2A: ICC Question 2**. Are lines of succession assigned for key staff roles? |  |  |  |
| **Module 2A: ICC Question 3**. Are parameters or triggers for initiating succession identified? |  |  |  |
| **Module 2A: ICC Question 4**. Is a role assigned authorized to implement succession actions? |  |  |  |
| **Module 2A: ICC Questions 5**. Are the procedures or authorizations for if someone is killed vs. injured, perhaps severely documented in the COOP Plan? |  |  |  |
| **Module 2A: ICC Question 6**. Does the COOP Plan identify any unique considerations (e.g., if the injured person was an elected official)? |  |  |  |
| **Module 2A: ICC Question 7**. Does the COOP Plan include a procedure for authorizing decisions in the absence of key personnel? |  |  |  |
| **Module 2A: SCD Question 2**. Are financial staff roles and responsibilities included in the COOP Plan? |  |  |  |
| **Module 2A: ND Question 1.** Does the COOP Plan identify individuals responsible for making management decisions? |  |  |  |
| **Module 3: Question 1**. Does the COOP Plan identify individuals responsible for approving purchases during COOP operations? |  |  |  |
| **Module 1. Question 12.** Are Damage Assessment Team roles and responsibilities identified in the COOP Plan? |  |  |  |

### Alternate Facilities

The following observations (strengths and areas for improvement) were identified for this objective: ***Discuss and validate the State Organization’s COOP Plan elements, including Alternate Facilities.* Table 3** includes evaluation points of review for this objective.

**Observation 3.1.** **Strength**:

**Analysis:**

**Recommendation 3.1.1:**

**Observation 3.2.** **Area for Improvement**:

**Analysis:**

**Recommendation 3.2.1:**

Table 3. Points of Review for Alternate Facilities Objective

| **Evaluation Point of Review** | **Included in COOP Plan** | **Not Included in COOP Plan** | **Not Observed** |
| --- | --- | --- | --- |
| **Module 2: Question 1.** Does the COOP Plan identify an alternate facility? |  |  |  |
| **Module 2: Question 2A.** Is the agreement between the Organization and the alternate facility formalized? |  |  |  |
| **Module 2: Question 2B.** Is the contact information for the alternate facility listed? |  |  |  |
| **Module 2: Question 3B**. Is there a schematic or other diagram that will guide set-up? |  |  |  |
| **Module 2: Question 4.** Does the COOP Plan identify any modifications that must be completed on the alternate facility (e.g., office supplies, IT equipment)? |  |  |  |
| **Module 2: Question 5.** Is a time estimate provided for activating the alternate site? |  |  |  |
| **Module 2: Question 10**. Is there a procedure for employee relocation? |  |  |  |
| **Module 2: Question 11A.** Is the process for transferring in-office assets to the alternate facility described? |  |  |  |
| **Module 2: Question 12**. Are security or access requirements for the alternate facility established? |  |  |  |
| **Module 2: Question 13.** Does the COOP Plan have any guidance on orientation materials for the alternate location? |  |  |  |
| **Module 2: Question 14**. Is telework addressed in the COOP Plan? |  |  |  |
| **Module 2A: SCD Question 1.** Does the COOP Plan establish the work resources readily available at the alternate facility? |  |  |  |

### Critical Customers/Partners and Vendors

The following observations (strengths and areas for improvement) were identified for this objective: ***Discuss and validate the State Organization’s COOP Plan elements, including Critical Customers/Partners and Vendors****.* **Table 4** includes evaluation points of review for this objective.

**Observation 4.1.** **Strength**:

**Analysis:**

**Recommendation 4.1.1:**

**Observation 4.2.** **Area for Improvement**:

**Analysis:**

**Recommendation 4.2.1:**

Table 4. Points of Review for Critical Customers/Partners and Vendors Objective

| **Evaluation Point of Review** | **Included in COOP Plan** | **Not Included in COOP Plan** | **Not Observed** |
| --- | --- | --- | --- |
| **Module 1: Question 5.** Does the COOP Plan identify what critical vendors or coordinating entities should be contacted to be made aware of the COOP operations? |  |  |  |
| **Module 2A: SCD Question 4**. Does the COOP Plan include pre-approved/pre-determined vendors for goods and services? |  |  |  |
| **Module 2A: SCD Question 5.** Is vendor contact information incorporated into the COOP Plan? |  |  |  |
| **Module 2A: SCD Question 6.** Are alternate vendors identified for any supplies? |  |  |  |
| **Module 2A: ND Question 2**. Are the necessary points of contact included in the COOP Plan? |  |  |  |
| **Module 2A: ND Question 6**. Does the COOP Plan identify any partners that may assist with mitigating or resolving the disruption? |  |  |  |

### Resource Requirements

The following observations (strengths and areas for improvement) were identified for this objective: ***Discuss and validate the State Organization’s COOP Plan elements, including Resource Requirements.* Table 5** includes evaluation points of review for this objective.

**Observation 5.1.** **Strength**:

**Analysis:**

**Recommendation 5.1.1:**

**Observation 5.2.** **Area for Improvement**:

**Analysis:**

**Recommendation 5.2.1:**

Table 5. Points of Review for Resource Requirements Objective

| **Evaluation Point of Review** | **Included in COOP Plan** | **Not Included in COOP Plan** | **Not Observed** |
| --- | --- | --- | --- |
| **Module 1: Question 10**. Does the COOP Plan identify what equipment resources are necessary? |  |  |  |
| **Module 1: Question 11**. Does the COOP Plan identify any of following COOP Kit components? (Check all that apply.) | 🞎 COOP Plan |  |  |
| 🞎 Office supplies |
| 🞎 Back-up communication devices |
| 🞎 Manual work-around procedures |
| 🞎 Compact discs/flash drives/additional media |
| **Module 2A: SCD Question 3.** Are expedited procurement procedures outlined in the COOP Plan? |  |  |  |
| **Module 2A: SCD Question 7.** Are any work-around options included in the COOP Plan for consideration during supply chain disruptions? |  |  |  |
| **Module 2A: ND Question 3**. Are any work-around options included in the COOP Plan for consideration during network disruptions? |  |  |  |

## Objective 2 – Discuss and validate the process required to perform internal and external Crisis Communications

The following observations (strengths and areas for improvement) were identified for this objective: ***Discuss and validate the processes required to perform internal and external Crisis Communications.* Table 6** includes evaluation points of review for this objective.

**Observation 6.1.** **Strength**:

**Analysis:**

**Recommendation 6.1.1:**

**Observation 6.2.** **Area for Improvement**:

**Analysis:**

**Recommendation 6.2.1:**

Table 6. Points of Review for Crisis Communications Objective

| **Evaluation Point of Review** | **Included in COOP Plan** | **Not Included in COOP Plan** | **Not Observed** |
| --- | --- | --- | --- |
| **Module 1: Question 3A**. Is there a documented process for communicating the building closure to staff? |  |  |  |
| **Module 1: Question 3B.** Was the Crisis Communication Tool used? | *A copy of the Crisis Communication Tool report or draft message is attached.* |  |  |
| **Module 1: Question 4.** Is the primary facility co-located with any other State Organizations or businesses that would need to be notified of the COOP Plan activation? | *Indicate the Organizations and Businesses here*: |  |  |
| **Module 1: Question 6A**. Are method(s) of communication that will be used to notify external partners identified? |  |  |  |
| **Module 1: Question 6B**. Does the Plan identify back-up communication methods? |  |  |  |
| **Module 2: Question 6B.** Is there any guidance for providing public information? |  |  |  |
| **Module 2: Question 15**. Are communication methods between co-workers identified? |  |  |  |
| **Module 2A: SCD Question 8.** Does the COOP Plan identify how and when employees will be notified about limited resources? |  |  |  |
| **Module 2A: ND Question 4.** Does the COOP Plan identify how and when employees will be notified about network disruptions? |  |  |  |
| **Module 2A: ND Question 5**. Is a procedure for releasing public information included in the COOP Plan? |  |  |  |

## Objective 3 – Discuss and validate the process for reconstitution

The following observations (strengths and areas for improvement) were identified for this objective: ***Discuss and validate the process for reconstitution.* Table 7** includes evaluation points of review for this objective.

**Observation 7.1.** **Strength**:

**Analysis:**

**Recommendation 7.1.1:**

**Observation 7.2.** **Area for Improvement**:

**Analysis:**

**Recommendation 7.2.1:**

Table 7. Points of Review for Reconstitution Objective

| **Evaluation Point of Review** | **Included in COOP Plan** | **Not Included in COOP Plan** | **Not Observed** |
| --- | --- | --- | --- |
| **Module 3: Question 3**. Does the COOP Plan identify terms or considerations for leasing/occupying the alternate facility for an extended period of time? |  |  |  |
| **Module 3: Question 4.** Does the COOP Plan document a procedure for tracking and sharing recovery progress? |  |  |  |
| **Module 3: Question 5**. Are strategies for addressing employee impacts (e.g., psychological) included in the COOP Plan? |  |  |  |
| **Module 3: Question 6**. Does the COOP Plan identify any extended impacts on the Organization’s ability to deliver essential functions/critical business processes if the relocation continues? |  |  |  |
| **Module 3: Question 7.** Is there a procedure for reviewing and updating the COOP Plan? |  |  |  |

# Annex A: Improvement Plan

This Improvement Plan (IP) has been developed specifically for [Insert State Organization Name] based on the COOP exercise conducted on [Insert Date of Exercise].This IP is an interal [Insert State Organization Name] document.

| **Recommendation** | **Corrective Action** | **Primary Organization** | **Organization Point of Contract** | **Start Date** | **Completion Date** | **Comments** |
| --- | --- | --- | --- | --- | --- | --- |
| [Insert recommendations from above sections.] |  |  |  |  |  |  |
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# Annex B: Exercise Participants

[Insert names of exercise participants and relevant information].

|  |  |  |
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| Participant’s Organization | Participant Name | Title |
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# Annex C: Acronyms

|  |  |
| --- | --- |
| ACRONYM | DEFINITION |
| **AAR** | After Action Report |
| **COOP** | Continuity of Operations |
| **DHS** | U.S. Department of Homeland Security |
| **EEG** | Exercise Evaluation Guide |
| **FEMA** | Federal Emergency Management Agency |
| **FOUO** | For Official Use Only |
| **HSEEP** | Homeland Security Exercise and Evaluation Program |
| **ICS** | Incident Command System |
| **NWS** | National Weather Service |
| **RTO** | Recovery Time Objective |
|  | [Add additional acronyms as appropriate] |

# Annex D: Exercise-Generated Attachments

[Include copies of the ICS Form or Chart, Crisis Communications reports, and any other documentation generated as a result of the exercise].

# Annex E: Participant Feedback Summary

[Number] participants provided feedback about their experience at the exercise, including strengths, areas for improvement, and suggestions for future action items. Answers to each question are captured below.

[Summarize the findings from the Participant Feedback Forms in the categories below.]

Based on the exercise today and the tasks identified, list the top three strengths and/or areas that did not need improvement.

Based on the exercise today and the tasks identified, list the top three weaknesses and/or areas that need improvement.

Is there anything you saw in the exercise that the evaluator(s) might not have been able to experience, observe, and record?

Identify corrective actions that should be taken to address the issues identified above. For each corrective action, indicate whether the action should be considered high, medium, or low priority.

List the applicable equipment, training, policies, plans, and procedures that should be reviewed, revised, or developed. Indicate the priority level for each.

Please provide any recommendations on how this exercise or future exercises could be improved or enhanced.