DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

**Homeland Security Exercise and Evaluation Program (HSEEP)/**

**After Action Report (AAR)/ Improvement Plan (IP)**

**OMB No. 1660-0118**

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[Exercise Name]

After-Action Report/Improvement Plan

[Date]

The After-Action Report/Improvement Plan (AAR/IP) aligns exercise objectives with preparedness doctrine to include the National Preparedness Goal and related frameworks and guidance. Exercise information required for preparedness reporting and trend analysis is included; users are encouraged to add additional sections as needed to support their own organizational needs.

# Exercise Overview

| **Exercise Name** | [Insert the formal name of exercise, which should match the name in the document header] |
| --- | --- |
| **Exercise Dates** | [Indicate the start and end dates of the exercise] |
| **Scope** | This exercise is a [exercise type], planned for [exercise duration] at [exercise location]. Exercise play is limited to [exercise parameters]. |
| **Mission Area(s)** | [Prevention, Protection, Mitigation, Response, and/or Recovery] |
| **Core Capabilities** | [List the core capabilities being exercised] |
| **Objectives** | [List exercise objectives] |
| **Threat or Hazard** | [List the threat or hazard (e.g. natural/hurricane, technological/radiological release)] |
| **Scenario** | [Insert a brief overview of the exercise scenario, including scenario impacts (2-3 sentences)] |
| **Sponsor** | [Insert the name of the sponsor organization, as well as any grant programs being utilized, if applicable] |
| **Participating Organizations** | [Insert a brief summary of the total number of participants and participation level (i.e., Federal, State, local, Tribal, non-governmental organizations (NGOs), and/or international agencies). Consider including the full list of participating agencies in Appendix B. Delete Appendix B if not required.] |
| **Point of Contact** | [Insert the name, title, agency, address, phone number, and email address of the primary exercise POC (e.g., exercise director or exercise sponsor)] |

# Analysis of Core Capabilities

Aligning exercise objectives and core capabilities provides a consistent taxonomy for evaluation that transcends individual exercises to support preparedness reporting and trend analysis. Table 1 includes the exercise objectives, aligned core capabilities, and performance ratings for each core capability as observed during the exercise and determined by the evaluation team.

| Objective | Core Capability | Performed without Challenges (P) | Performed with Some Challenges (S) | Performed with Major Challenges (M) | Unable to be Performed (U) |
| --- | --- | --- | --- | --- | --- |
| [Objective 1] | [Core capability] |  |  |  |  |
| [Objective 2] | [Core capability] |  |  |  |  |
| [Objective 3] | [Core capability] |  |  |  |  |
| [Objective 4] | [Core capability] |  |  |  |  |

Table 1. Summary of Core Capability Performance

Ratings Definitions:

Performed without Challenges (P): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws.

Performed with Some Challenges (S): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws. However, opportunities to enhance effectiveness and/or efficiency were identified.

Performed with Major Challenges (M): The targets and critical tasks associated with the core capability were completed in a manner that achieved the objective(s), but some or all of the following were observed: demonstrated performance had a negative impact on the performance of other activities; contributed to additional health and/or safety risks for the public or for emergency workers; and/or was not conducted in accordance with applicable plans, policies, procedures, regulations, and laws.

Unable to be Performed (U): The targets and critical tasks associated with the core capability were not performed in a manner that achieved the objective(s).

The following sections provide an overview of the performance related to each exercise objective and associated core capability, highlighting strengths and areas for improvement.

## [Objective 1]

The strengths and areas for improvement for each core capability aligned to this objective are described in this section.

## [Core Capability 1]

### Strengths

The [full or partial] capability level can be attributed to the following strengths:

Strength 1: [Observation statement]

Strength 2: [Observation statement]

Strength 3: [Observation statement]

### Areas for Improvement

The following areas require improvement to achieve the full capability level:

Area for Improvement 1: [Observation statement. This should clearly state the problem or gap; it should not include a recommendation or corrective action, as those will be documented in the Improvement Plan.]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

Area for Improvement 2: [Observation statement]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

## [Core Capability 2]

### Strengths

The [full or partial] capability level can be attributed to the following strengths:

Strength 1: [Observation statement]

Strength 2: [Observation statement]

Strength 3: [Observation statement]

### Areas for Improvement

The following areas require improvement to achieve the full capability level:

Area for Improvement 1: [Observation statement. This should clearly state the problem or gap; it should not include a recommendation or corrective action, as those will be documented in the Improvement Plan.]

Reference: [List any relevant plans, policies, procedures, regulations, or laws.]

Analysis: [Provide a root cause analysis or summary of why the full capability level was not achieved.]

1. Improvement Plan

| Core Capability | Issue/Area for Improvement | Corrective Action | Capability Element | Primary Responsible Organization | Organization POC | Start Date | Completion Date |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Core Capability 1: [Capability Name] | 1. [Area for Improvement] | [Corrective Action 1] |  |  |  |  |  |
| Core Capability 1: [Capability Name] | 1. [Area for Improvement] | [Corrective Action 2] |  |  |  |  |  |
| Core Capability 1: [Capability Name] | 2. [Area for Improvement] | [Corrective Action 1] |  |  |  |  |  |
| Core Capability 1: [Capability Name] | 2. [Area for Improvement] | [Corrective Action 2] |  |  |  |  |  |
| Core Capability 2: [Capability Name] | 1. [Area for Improvement] | [Corrective Action 1] |  |  |  |  |  |
| Core Capability 2: [Capability Name] | 1. [Area for Improvement] | [Corrective Action 2] |  |  |  |  |  |
| Core Capability 2: [Capability Name] | 2. [Area for Improvement] | [Corrective Action 1] |  |  |  |  |  |
| Core Capability 2: [Capability Name] | 2. [Area for Improvement] | [Corrective Action 2] |  |  |  |  |  |

This IP has been developed specifically for [Organization or Jurisdiction] as a result of [Exercise Name] conducted on [date of exercise].

# Appendix B: Exercise Participants

|  |
| --- |
| Participating Organizations |
| **Federal** |
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| **State** |
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|  |
| **[Jurisdiction A]** |
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| **[Jurisdiction B]** |
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