Exercise Name

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

Date

Your organization or Justification

**Instructions:** Please email this AAR/IP to your DES District Field Officer (DFO). The DFO will review the AAR/IP for content then forward this report to the MT DES Office.

The After-Action Report/Improvement Plan (AAR/IP) aligns exercise objectives with preparedness doctrine 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] |
| --- | --- |
| **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]. |
| [**Core Capabilities**](https://www.fema.gov/emergency-managers/national-preparedness/mission-core-capabilities) | [List of the core capabilities being exercised. Click on Core Capabilities Hyperlink on the left].  |
| **Objectives** | [List exercise objectives] |
| **Plans Tested** | [List primary plans/procedures, written guides, checklists and/or un-written plans  |
| **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)] |

Aligning exercise objectives and core capabilities provides a consistent taxonomy for evaluation that transcends individual exercises to support preparedness reporting and trend analysis.

**Objective 1:**

Core Capability 1:

### Strengths Observed:

Strength 1:

Strength 2:

Strength 3:

### Areas for Improvement: (clearly state what the problem was or the gap):

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

Area for Improvement 1:

Analysis:

Area for Improvement 2:

Analysis:

Area for Improvement 3:

Analysis:

**Objective 2:**

Core Capability 2:

### Strengths Observed:

Strength 1:

Strength 2:

Strength 3:

### Areas for Improvement: (clearly state what the problem was or the gap):

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

Area for Improvement 1:

Analysis:

Area for Improvement 2:

Analysis:

Area for Improvement 3:

Analysis:

**Objective 3:**

## Core Capability 3:

### Strengths Observed:

Strength 1:

Strength 2:

Strength 3:

### Areas for Improvement: (clearly state what the problem was or the gap):

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

Area for Improvement 1:

Analysis:

Area for Improvement 2:

Analysis:

Area for Improvement 3:

Analysis:

1. Improvement Plan (IP)

| Capability | Issue/Area for Improvement | Corrective Action | Primary Responsible Organization | Organization POC | Start Date | Completion Date |
| --- | --- | --- | --- | --- | --- | --- |
| Capability 1:  | [Issue/Area for Improvement]  | [Corrective Action]  |  |  |  |  |
| Capability 1:  | [Issue/Area for Improvement]  | [Corrective Action]  |  |  |  |  |
| Capability 1:  | [Issue/Area for Improvement]  | [Corrective Action]  |  |  |  |  |
| Capability 2:  | [Issue/Area for Improvement]  | [Corrective Action]  |  |  |  |  |
| Capability 2:  | [Issue/Area for Improvement]  | [Corrective Action]  |  |  |  |  |
| Capability 2:  | [Issue/Area for Improvement]  | [Corrective Action]  |  |  |  |  |
| Capability 3:  | [Issue/Area for Improvement]  | [Corrective Action]  |  |  |  |  |
| Capability 3:  | [Issue/Area for Improvement]  | [Corrective Action]  |  |  |  |  |
| Capability 3:  | [Issue/Area for Improvement]  | [Corrective Action]  |  |  |  |  |

This IP is developed specifically for Central City’s Shakeout Exercise conducted on [Date].

# Appendix B: Exercise Participants

| **Participating Organizations** |
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Number of Participants\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_