# Exercise Evaluation Guide

Exercise Name: [Insert Exercise Name]

Exercise Date: [Insert Exercise Date]

Jurisdiction/Organization: [Insert Jurisdiction or Organization]

Venue: [Insert Venue Name]

| [Focus Area} |
| --- |
| Exercise Objective: [Insert exercise objective] |
| Capability: |
| Organizational Capability Target 1: [Insert customized target based on plans and assessments]  Critical Task: [Insert task from frameworks, plans, or Standard Operating Procedures (SOPs)]  Critical Task: [Insert task from frameworks, plans, or SOPs]  Critical Task: [Insert task from frameworks, plans, or SOPs]  Critical Task: [Insert task from frameworks, plans, or SOPs]  Source(s): [Insert name of plan, policy, procedure, or reference] |
| Organizational Capability Target 2: [Insert customized target based on plans and assessments]  Critical Task: [Insert task from frameworks, plans, or Standard Operating Procedures (SOPs)]  Critical Task: [Insert task from frameworks, plans, or SOPs]  Critical Task: [Insert task from frameworks, plans, or SOPs]  Critical Task: [Insert task from frameworks, plans, or SOPs]  Source(s): [Insert name of plan, policy, procedure, or reference] |
| Organizational Capability Target 3: [Insert customized target based on plans and assessments]  Critical Task: [Insert task from frameworks, plans, or Standard Operating Procedures (SOPs)]  Critical Task: [Insert task from frameworks, plans, or SOPs]  Critical Task: [Insert task from frameworks, plans, or SOPs]  Critical Task: [Insert task from frameworks, plans, or SOPs]  Source(s): [Insert name of plan, policy, procedure, or reference] |

| **Organizational Capability Target** | **Associated Critical Tasks** | **Observation Notes and Explanation of Rating** | **Target Rating** |
| --- | --- | --- | --- |
| [Insert Organizational Capability Target 1 from page 1] | * [Insert Organizational Capability Target 1 Critical Tasks from page 1] | [Observation notes and explanation of rating] | [Target rating] |
| [Insert Organizational Capability Target 2 from page 1] | * [Insert Organizational Capability Target 2 Critical Tasks from page 1] | [Observation notes and explanation of rating] | [Target rating] |
| [Insert Organizational Capability Target 3 from page 1] | * [Insert Organizational Capability Target 3 Critical Tasks from page] | [Observation notes and explanation of rating] | [Target rating] |

**Final Capability Rating: [Enter Total Rating here]**

| **Evaluator Information** |
| --- |
| Evaluator Name: [Insert] |
| Evaluator Email: [Insert] |
| Evaluator Phone: [Insert] |

| **Ratings Key** |
| --- |
| P: Performed without challenges |
| S: Performed with some challenges |
| M: Performed with major challenges |
| U: Unable to be performed |

## Ratings Definitions

| **Performed without Challenges (P)** | The targets and critical tasks associated with the 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 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 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 capability were not performed in a manner that achieved the objective(s). |