## Discussion Based Exercise Evaluation Guide

State of Oregon Office of Emergency Management (OEM)

***Exercise Name:***[Insert exercise name] ***Exercise Date:*** [Insert exercise date]

***Organization/Jurisdiction:*** [Insert organization or jurisdiction] ***Venue:*** [Insert venue name]

***Exercise Objective #X:***[Insert exercise objective]

***Core Capability:*** [Insert Core Capability and Description from Appendix G]

**Organizational Core Capability Target 1: [**Insert customized target based on guidance provided in Appendix G]

*Mission Area(s):* [Insert associated mission area(s)]

Critical Tasks [Adjust the list below based on the number identified]

*Critical Task 1:* [Insert task description]

*Critical Task 2:* [Insert task description]

*Critical Task 3:* [Insert task description]

*Critical Task 4:* [Insert task description]

**References(s):** [Insert name of associated plans, policies, or procedures]

**Organizational Core Capability Target 2:** [Insert customized target based on guidance provided in Appendix G]

*Mission Area(s):* [Insert associated mission area(s)]

Critical Tasks [Adjust the list below based on the number identified]

*Critical Task 1:* [Insert task description]

*Critical Task 2:* [Insert task description]

*Critical Task 3:* [Insert task description]

*Critical Task 4:* [Insert task description]

**References(s):** [Insert name of associated plans, policies, or procedures]

**Organizational Core Capability Target 3**: [Insert customized target based on guidance provided in Appendix G]

*Mission Area(s):* [Insert associated mission area(s)]

Critical Tasks[Adjust the list below based on the number identified]

*Critical Task 1:* [Insert task description]

*Critical Task 2:* [Insert task description]

*Critical Task 3:* [Insert task description]

*Critical Task 4:* [Insert task description]

**References(s):** [Insert name of associated plans, policies, or procedures]

*\** ***Ratings Key:*** *N – No Challenges Identified; S – Some Challenges Identified; M – Major Challenges Identified; WN – Would not be Able to be Performed*

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| --- | --- | --- | --- |
| **Organizational Capability Target** | **Associated Critical Tasks** | **Explanation of Rating and Recommendations** | **Target Rating\*** |
| [Insert Organizational Core Capability Target 2]   | 1. Insert critical task 1 | Insert explanation of rating and recommendations |  |
| 2. Insert critical task 2 |  |  |
| 3. Insert critical task 3 |  |  |
| 4. Insert critical task 4 |  |  |

*\** ***Ratings Key:*** *N – No Challenges Identified; S – Some Challenges Identified; M – Major Challenges Identified; WN – Would not be Able to be Performed*

|  |  |  |  |
| --- | --- | --- | --- |
| **Organizational Capability Target** | **Associated Critical Tasks** | **Explanation of Rating and Recommendations** | **Target Rating\*** |
| [Insert Organizational Core Capability Target 2]   | 1. Insert critical task 1 | Insert explanation of rating and recommendations |  |
| 2. Insert critical task 2 |  |  |
| 3. Insert critical task 3 |  |  |
| 4. Insert critical task 4 |  |  |

*\** ***Ratings Key:*** *N – No Challenges Identified; S – Some Challenges Identified; M – Major Challenges Identified; WN – Would not be Able to be Performed*

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| **Organizational Capability Target** | **Associated Critical Tasks** | **Explanation of Rating and Recommendations** | **Target Rating\*** |
| [Insert Organizational Core Capability Target 3]   | 1. Insert critical task 1 | Insert explanation of rating and recommendations |  |
| 2. Insert critical task 2 |  |  |
| 3. Insert critical task 3 |  |  |
| 4. Insert critical task 4 |  |  |
| **Final Core Capability Rating** |  |

Evaluator Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Evaluator Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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