

AFTER ACTION REPORT QUESTIONNAIRE

Use of After-Action Reports

After-Action Reports serve the following important functions:

- A source for documentation of response activities.
- Identification of problems/successes during emergency operations.
- Analysis of the effectiveness of the components of the response organization.
- Description and definition of a plan of action for implementation of improvements.

The ICS approach to the use of After-Action Reports emphasizes the improvement of emergency management at all levels. It is important for all clinic staff to be encouraged to contribute to the after-action report process. Even staff who continued their day-to-day functions can provide useful information. The After-Action Report provides a vehicle for not only documenting system improvements, but also can, if desired, provide a work plan for how these improvements can be implemented.

It may be useful to coordinate the After-Action Report process when multiple agencies/divisions are involved in the same emergency. For example, an operational area may take the lead in coordinating the development of an After-Action Report which involves multiple count response agencies.

Appendix D5, After Action Form
Emergency Management Plan

_____ DUE BY: _____
(Disaster Name)

Section A.

THIS FORM IS FOR [CLINIC NAME]:

Completed by _____
Name (print) Division

Section B.

QUESTION	YES	NO	N/A
1. Were procedures established and in place for response to the disaster?			
2. Were procedures used to organize initial and ongoing resources?			
3. Was the ICS used to manage field response?			
4. Were all ICS Sections used?			
5. Was the EOC activated?			
6. Was the EOC organized according to ICS?			
7. Were sub-functions in the <i>EOC</i> assigned around the five <i>ICS</i> functions?			
8. Were response personnel in the <i>EOC</i> trained?			
9. Were action plans used in the <i>EOC</i> ?			
10. Was coordination performed with volunteer agencies (e.g., Red Cross)?			
11. Was an Operational County EOC activated?			
12. Was assistance requested and received?			
13. Were the <i>EOC</i> assistance acquisition efforts coordinated?			
14. Was communication established and maintained between operation centers?			
15. Was public information disseminated according to procedure?			

Section C.

17. What response actions were taken by the clinic? Include such things as resource acquisition number of personnel, equipment and other resources.

18. As you responded, was there any part of the incident command system that did not work for your clinic? If so, how would/did you change the system to meet your needs?

19. As a result of your response to this incident, are any changes needed in your plans and procedures? If so, please explain.