



Specialty Response Team Self-Assessment

Hazardous Materials Response Team

Based on FEMA's Resource Typing Library Tool (RTLT)
and Florida's Resource Typing Standards

Version 2.1 - October 2025



Specialty Response Team
Assessment Program



Specialty Response Teams (SRT) Capability Assessment Program Self-Assessment Tool



Overview of the Tool's Purpose

The Specialty Response Teams Capability Assessment Program's (SRTCAP) Self-Assessment Tool is designed to support specialty response teams in evaluating their operational readiness, capabilities, and alignment with FEMA's National Incident Management System (NIMS) resource typing definitions. By following a structured, objective review of personnel qualifications, equipment inventories, deployment logistics, and operational standards, this tool enables HazMat teams to measure their current capacity against nationally recognized benchmarks for each team type (Type III – Type I). The Self-Assessment and follow-on on-site assessment are administrative assessments only. Future operational exercises will complete the view of the team's total capabilities.

The primary goal is to provide a realistic snapshot of each team's strengths, identify areas for growth, and guide targeted improvements. These assessments inform planning, enhance interagency coordination, and support requests for mutual aid or State and Federal deployment.

Assessment Presentation and Documentation

Teams will present their finished self-assessment package during a scheduled evaluation session with assessors and peer reviewers. This session is intended to validate information, discuss discrepancies, and highlight best practices.

To Support the Assessment Presentation

Teams should have all supporting documentation readily available, including training certificates, equipment inventories, deployment rosters, standard operating guidelines (SOGs), and mutual aid agreements.

Electronic or physical formats are acceptable, but documents should be clearly labeled and accessible to assessors.

Supporting materials help substantiate the team's claimed capabilities and ensure alignment with FEMA's typing and credentialing expectations. Supporting documents should be on hand for reference.

Special Note:

Please do not fill out the Self-Assessment Tool on your Mobile Device. Please only fill the Self-Assessment Tool on a computer or physical copy to be scanned and uploaded to ReadyOP.



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Section 1: Team Identification

This section provides foundational information about your team's identity and the typing for consideration. Complete this section with clear and current data, as it establishes the context for your team's readiness and capabilities throughout the assessment. This information is critical for reviewers and assessors to validate alignment with the RTLT Typing standards.

Please ensure that all information provided is accurate and current as of the date of the assessment. Supporting documentation, such as a current Typing Certificate (if issued by an authority) and a clear Organizational Chart, is highly recommended for presentation during your assessment session.

Team Name: _____

Sponsoring Agency or Jurisdiction: _____

Team Point of Contact/Program Manager (Name, Title): _____

Phone Number: _____ **Email Address:** _____

Financial POC: _____

Phone Number: _____ **Email Address:** _____

Is your agency willing to deploy your team? Yes No

If yes, are you willing to deploy: County Statewide EMAC (Out-of-State)
 Federal

HazMat Team Typing Level (Select one):

Type III Type II Type I



Section 2: Deployment/Activation/Callout History

Instructions:

This section captures a detailed summary of a recent HazMat Team (Hazardous Materials Team) deployment within the past 36 months (up to 3 deployments) that reflects the team's operational capabilities and alignment with FEMA's resource typing definitions. This information will help assessors evaluate the team's ability to mobilize, operate, and sustain technical rescue functions in a real-world incident environment.

A deployment shall be defined as any intentional stand-up and rostering of your team with a clear, documented mission, whether local or state, that functions as a HazMat Team.

Provide complete, verifiable details. Supporting documentation should be made available during the assessment (e.g., ICS 214 Unit Logs, deployment orders, mission rosters, After-Action Reports, or issued Mission Ready Package activations).

Recommended Supporting Documentation to present to the Assessment Team, includes but is not limited to:

- ✓ ICS-204s
- ✓ ICS-214 Unit Logs (Selected Days)
- ✓ Deployment Roster
- ✓ ICS 201/202 or IAP Assignment Pages
- ✓ After Action Reports (AARs)
- ✓ Mission Ready Package Activation (if applicable)
- ✓ Photos or Maps of Operations Area (Optional)

Recommended for the Presentation at Assessment Session:

- ✓ Organizational Chart (reflecting current team structure)
- ✓ Typing Certificate (if issued by state or federal authority)



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Deployment/Activation/Callout Report #1

Incident Name: _____

Deployment Dates: From _____ to _____ Total Days Deployed: _____

Team Leader Name: _____

Jurisdiction or Region Supported:

City/County: _____ State: _____

Sponsoring or Tasking Agency: _____

Deployment/Activation/Callout Type:

Local Mutual Aid Regional (Intrastate) State Activation (SERT/FDEM)
 Federal EMAC

Typing Level at Time of Deployment/Activation/Callout:

Type III Type II Type I

Deployment/Activation/Callout Environment (Check all that apply):

Uncontrolled Hazardous Waste Sites RCRA TSD Facilities Fixed Facility Releases
 Transportation Incidents Clandestine or Illicit Labs Radiological/Nuclear Environments
 WMD / CBRNE Scenarios IDLH Zones
 Other: _____

Deployment/Activation/Callout Metrics:

Total Team Members Deployed: _____

Disciplines Represented (Check all that applied):

Hazardous Materials Technicians Hazardous Materials Specialists
 Hazardous Materials Safety Officer HazMat Team Leader / Unit Leader
 Technical Reference / Science Officer Decontamination Specialists
 Medical Support (HazMat Medical Specialist) Industrial/Facility Liaison
 Law Enforcement Integration Radiological/Nuclear Specialists
 Environmental/Regulatory Liaison Other: _____

Average Daily Operational Tempo:

Single 12-hr Shift 24-hour Operations (Split Shifts) Surge Periods Only

If surge, what is the Longest Continuous Operational Period: _____ hours



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Deployment/Activation/Callout Capabilities Delivered (Check all that apply):

- Hazard Identification & Risk Assessment Air Monitoring & Atmospheric Characterization
- Plume Modeling & Predictive Analysis Entry Operations in Level A/B PPE (IDLH Environments)
- Containment, Control, & Product Transfer Operations Technical Decontamination (responders, civilians, equipment, and mass decon)
- Site Safety & Medical Monitoring (pre/post-entry) Technical Reference & Chemical Intelligence Support
- Evidence Preservation & Support to Law Enforcement (clandestine/WMD incidents)
- Radiological/Nuclear Hazard Assessment & Monitoring Support to WMD/CBRNE Incident Operations
- Integration into Unified Command & ICS (HazMat Branch/Group functions)
- Incident Action Plan (IAP) Support & ICS Documentation (ICS-214, etc.) Specialized Container/Tank Car/Transport Mitigation
- Waste Management & Environmental Protection Coordination Other: _____

Executive Summary (Suggested 3–6 sentences):

Summarize the deployment, clearly highlighting the team's core HazMat functions, interagency coordination, ICS structure participation, and any significant outcomes. This should reflect the team's actual performance and readiness in a mission environment consistent with its typing.

Example:

"In May 2024, the Regional HazMat Task Force deployed for 6 operational periods to Clay County after a railcar derailment released anhydrous ammonia. As a Type II team activated by Florida SERT, our 14 personnel completed 11 entries, 7 air monitoring missions, and 4 product transfers. We operated under Unified Command with fire, law enforcement, and rail representatives, submitted ICS-214s, and supported IAP development. Level A operations, decon corridor management, and plume modeling highlighted the team's technical capability and integration with state response efforts."

Deployment/Activation/Callout Narrative (Required):



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Deployment/Activation/Callout Report #2

Incident Name: _____

Deployment Dates: From _____ to _____ Total Days Deployed: _____

Team Leader Name: _____

Jurisdiction or Region Supported:

City/County: _____ State: _____

Sponsoring or Tasking Agency: _____

Deployment/Activation/Callout Type:

Local Mutual Aid Regional (Intrastate) State Activation (SERT/FDEM)
 Federal EMAC

Typing Level at Time of Deployment/Activation/Callout:

Type III Type II Type I

Deployment/Activation/Callout Environment (Check all that apply):

Uncontrolled Hazardous Waste Sites RCRA TSD Facilities Fixed Facility Releases
 Transportation Incidents Clandestine or Illicit Labs Radiological/Nuclear Environments
 WMD / CBRNE Scenarios IDLH Zones
 Other: _____

Deployment/Activation/Callout Metrics:

Total Team Members Deployed: _____

Disciplines Represented (Check all that applied):

Hazardous Materials Technicians Hazardous Materials Specialists
 Hazardous Materials Safety Officer HazMat Team Leader / Unit Leader
 Technical Reference / Science Officer Decontamination Specialists
 Medical Support (HazMat Medical Specialist) Industrial/Facility Liaison
 Law Enforcement Integration Radiological/Nuclear Specialists
 Environmental/Regulatory Liaison Other: _____

Average Daily Operational Tempo:

Single 12-hr Shift 24-hour Operations (Split Shifts) Surge Periods Only

If surge, what is the Longest Continuous Operational Period: _____ hours



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Deployment/Activation/Callout Capabilities Delivered (Check all that apply):

- Hazard Identification & Risk Assessment Air Monitoring & Atmospheric Characterization
- Plume Modeling & Predictive Analysis Entry Operations in Level A/B PPE (IDLH Environments)
- Containment, Control, & Product Transfer Operations Technical Decontamination (responders, civilians, equipment, and mass decon)
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- Waste Management & Environmental Protection Coordination Other: _____

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Summarize the deployment, clearly highlighting the team's core HazMat functions, interagency coordination, ICS structure participation, and any significant outcomes. This should reflect the team's actual performance and readiness in a mission environment consistent with its typing.

Example:

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Deployment/Activation/Callout Narrative (Required):



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Deployment/Activation/Callout Report #3

Incident Name: _____

Deployment Dates: From _____ to _____ Total Days Deployed: _____

Team Leader Name: _____

Jurisdiction or Region Supported:

City/County: _____ State: _____

Sponsoring or Tasking Agency: _____

Deployment/Activation/Callout Type:

Local Mutual Aid Regional (Intrastate) State Activation (SERT/FDEM)
 Federal EMAC

Typing Level at Time of Deployment/Activation/Callout:

Type III Type II Type I

Deployment Environment (Check all that apply):

Uncontrolled Hazardous Waste Sites RCRA TSD Facilities Fixed Facility Releases
 Transportation Incidents Clandestine or Illicit Labs Radiological/Nuclear Environments
 WMD / CBRNE Scenarios IDLH Zones
 Other: _____

Deployment/Activation/Callout Metrics:

Total Team Members Deployed: _____

Disciplines Represented (Check all that applied):

Hazardous Materials Technicians Hazardous Materials Specialists
 Hazardous Materials Safety Officer HazMat Team Leader / Unit Leader
 Technical Reference / Science Officer Decontamination Specialists
 Medical Support (HazMat Medical Specialist) Industrial/Facility Liaison
 Law Enforcement Integration Radiological/Nuclear Specialists
 Environmental/Regulatory Liaison Other: _____

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Single 12-hr Shift 24-hour Operations (Split Shifts) Surge Periods Only

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Deployment/Activation/Callout Capabilities Delivered (Check all that apply):

- Hazard Identification & Risk Assessment Air Monitoring & Atmospheric Characterization
- Plume Modeling & Predictive Analysis Entry Operations in Level A/B PPE (IDLH Environments)
- Containment, Control, & Product Transfer Operations Technical Decontamination (responders, civilians, equipment, and mass decon)
- Site Safety & Medical Monitoring (pre/post-entry) Technical Reference & Chemical Intelligence Support
- Evidence Preservation & Support to Law Enforcement (clandestine/WMD incidents)
- Radiological/Nuclear Hazard Assessment & Monitoring Support to WMD/CBRNE Incident Operations
- Integration into Unified Command & ICS (HazMat Branch/Group functions)
- Incident Action Plan (IAP) Support & ICS Documentation (ICS-214, etc.) Specialized Container/Tank Car/Transport Mitigation
- Waste Management & Environmental Protection Coordination Other: _____

Executive Summary (Suggested 3–6 sentences):

Summarize the deployment, clearly highlighting the team's core HazMat functions, interagency coordination, ICS structure participation, and any significant outcomes. This should reflect the team's actual performance and readiness in a mission environment consistent with its typing.

Example:

"In May 2024, the Regional HazMat Task Force deployed for 6 operational periods to Clay County after a railcar derailment released anhydrous ammonia. As a Type II team activated by Florida SERT, our 14 personnel completed 11 entries, 7 air monitoring missions, and 4 product transfers. We operated under Unified Command with fire, law enforcement, and rail representatives, submitted ICS-214s, and supported IAP development. Level A operations, decon corridor management, and plume modeling highlighted the team's technical capability and integration with state response efforts."

Deployment/Activation/Callout Narrative (Required):



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Section 2: Deployment AAR/Improvement Plan

The following table allows teams to self-identify any issues and corrective action activities for the team's deployments. If "Anticipated Completion Date" is unknown, please leave field blank.



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Section 3: Administrative Compliance

This section confirms that the HazMat Team meets essential administrative requirements to enable legal, rapid, and supported deployment under state or mutual aid systems. All responses must be substantiated with current documentation aligned with ICS/NIMS protocols, FEMA Resource Typing definitions, and NFPA/OSHA safety and liability standards for HazMat operations.

During the scheduled assessment, teams should be prepared to present supporting documents as indicated.

Mutual Aid Agreements / Memorandums of Understanding (MOUs)

Does your HazMat team have signed mutual aid agreements or MOUs with:

- Neighboring jurisdictions or fire/rescue agencies?
- Regional or state emergency management partners?

Yes No In Progress

If yes or in progress, list the primary partners with whom agreements are active:

1. _____
2. _____
3. _____

Date of Most Recent MOU Review or Renewal: _____

Insurance Coverage and Legal Readiness

Does your team or sponsoring agency maintain insurance coverage to support deployments in dynamic, high-risk HazMat environments?

Yes No Unknown

Types of Coverage (Check all that apply):

General Liability Workers' Compensation Auto/Vehicle Professional Liability
 Volunteer Liability Other: _____

Carrier Name (if known): _____

 (Attach current Certificate of Insurance)



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Policies and Standard Operating Procedures (SOPs)

Does the team maintain written policies or SOPs related to the following items located in the table below? Space is provided to the Team to write in other examples that meet the item located in the table.

Area	Yes	No	In Progress
Program Governance and Succession Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Credentialing, Identification, and Personnel Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Training, PTB (where applicable), and Exercise Management Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Deployment Operations Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mobilization Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cache and Equipment Readiness Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finance and Grant Compliance Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communications and Technology Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Records, Data, and Public Information Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After-Action Review and Improvement Planning SOP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Assessment and Capability Evaluation Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Continuity and Concept of Operations Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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Section 4: Personnel

Instructions:

This section helps HazMat Teams evaluate their staffing against the **FEMA/NIMS-typed personnel requirements** for **Type III, Type II, and Type I** teams. Use this tool to assess current capabilities, identify shortfalls, and plan for future staffing improvements. The table provides a structured method to document your team's capabilities and identify gaps or surpluses.

How to Use the Table

Column	Description
Position	Lists nationally recognized NIMS-typed positions required for HazMat / WMD Teams.
Type III / II / I Columns	Shows the minimum number of personnel required for each team type based on FEMA Resource Typing.
Rostered and assigned to your team	Enter the actual number of individuals on your current roster who are assigned and ready to serve in that position. Individuals must be deployable and not double-counted.

Staffing Strategy and Recommendations

- Teams should plan for **2–3 times** the minimum personnel in each position to ensure operational depth and surge capacity.
- Cross qualifications are encouraged, but **only one primary role should be counted** per team member for this assessment.
- Prioritize redundancy in **Team Leader, Safety Officer, HazMat Technician, and Toxmedic** who are critical during sustained or high-tempo operations.

Disclaimer on Double Counting

Important: Each responder may only be recorded once in the "**Rostered and Assigned**" column. For example, if a Safety Officer is also a Team Lead, only their primary assigned role should be entered in the table.

Minimum Totals by Team Type

At the bottom of the table, a **Totals Row** reflects the **minimum required number of personnel** for each Team type (Type III through Type I). Use this to quickly confirm if your team meets baseline compliance or needs to build roster strength in specific areas.



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Position Title	Type III	Type II	Type I	Rostered and assigned to your team
HazMat Technician Team Lead	1	1	1	
Hazardous Materials Technician	7	6	11	
Safety Officer	-	1	1	
Medical Personnel/Toxmedic	-	-	2	
Totals	8	8	15	

Team Narrative (Optional):



Section 5: Equipment Capabilities

This section allows HazMat / WMD teams to self-assess their ability to safely and effectively operate in accordance with the FEMA Resource Typing Library Tool (RTLT). Teams should evaluate the actual deployment readiness of required equipment and whether they can sustain operations in the environments aligned with their typing level.

Recommended for the Presentation at Assessment Session:

- ✓ Recent Inspection or Maintenance Reports
- ✓ Cache-Related SOPs or Checklists
- ✓ Photographic Documentation of Cache Condition
- ✓ Deployment Plans

Scoring Key

- 3 – Fully meets standard – mission ready
- 2 – Substantially meets standard – minor gaps
- 1 – Partially meets – major gaps or dependencies
- 0 – Not Applicable or Does not meet – not capable

Equipment Capabilities

Substance Detection & Monitoring Equipment – Type III: Score: ____

Tools for testing chemical substances to identify chemical and physical properties, including:

1. Basic testing equipment and supplies, such as chemical testing kits and testing strips
2. Direct-reading instruments, such as multi-gas meters to include O₂, LEL, H₂S, and CO sensing capabilities, at a minimum
3. Photoionization detector (PID), with parts-per-million (ppm) sensitivity, at minimum
4. Radiological detection instruments, such as beta and gamma radiation detection and survey monitors
5. Printed and electronic reference resources
6. Safety data sheets
7. Personal dosimeter (for each team member)

Substance Detection & Monitoring Equipment – Type II: Score: ____

Same as Type III, PLUS

1. Intermediate testing equipment, such as Fourier transform infrared (FTIR) spectroscopy or Raman spectroscopy devices
2. Intermediate volatile organic compound (VOC) instrument, with parts-per-billion (ppb) sensitivity, at a minimum
3. Intermediate radiological detection instruments, such as alpha radiation detection monitors with survey capabilities

Substance Detection & Monitoring Equipment – Type I: Score: ____

Same as Type II, PLUS

1. Advanced testing instruments, such as gas chromatography and mass spectrometry devices



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2. Advanced direct-reading instruments for perimeter air monitoring, such as surface acoustic wave (SAW) or nanotechnology devices
3. Advanced radiological detection instruments, such as x-ray and neutron detection monitors and isotope identification instruments

***Note Regarding Personal Protective Equipment**

“1. Liquid splash protection must comply with NFPA 1992 standards. 2. Vapor-protective CPC and flash-fire vapor-protective CPC must comply with NFPA 1991. 3. Protective ensembles for first responders to WMD terrorism incidents must comply with NFPA 1994. 4. Respiratory protection, including SCBA or air purifying respirator (APR), complies with Occupational Safety and Health Administration (OSHA) 29 Code of Federal Regulations (CFR) Part 1910.120: Hazardous Waste Operations and Emergency Response, and Part 1910.134: Respiratory Protection.”

Personal Protective Equipment – Type III: Score: ____

1. Complete CPC ensembles, including:
 - a. Suit (encapsulating or non-encapsulating jumpsuit, multipiece; specifications depend on level of protection required), b. Boots, c. Gloves
2. Liquid splash protection
3. Self-contained breathing apparatus (SCBA) or other respiratory protection, as appropriate

Personal Protective Equipment – Type II & I: Score: ____

Same as Type III, PLUS,

1. Vapor-protective chemical protective clothing (CPC)
2. Flash-fire vapor- protective CPC, including a flash-fire protective option for vapor-protective CPC
3. WMD-compliant CPC

Communications Equipment – Type III: Score: ____

1. 8 handheld two-way portable radios, 2. 2 smartphones, 3. Laptop computer, 4. Color printer

Communications Equipment – Type II: Score: ____

Same as Type III, PLUS,

1. Wireless data communications with stand-off, 2. 2 Laptop Computers, 3. Long Range Optics, 4. Portable weather station

Communications Equipment – Type I: Score: ____

Same as Type II, PLUS,

1. Satellite data and voice service, 2. GPS tracking and mapping

Decontamination Supplies – Type III-I: Score: ____

Range of supplies and equipment for conducting decontamination, commensurate with the mission assignment



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Equipment Gap Identification

The following chart allows Team members to identify gaps in equipment needs and forecast costs associated with the need.



Section 6: Operational Capabilities

Use the scale below to evaluate your team's capability to perform core HazMat Team functions across technical disciplines. Assessors will use these responses, along with documentation and observation, to verify mission readiness. Base your self-assessment on actual equipment, personnel, and validated training.

Scoring Key

- 3 – Fully meets standard – mission ready
- 2 – Substantially meets standard – minor gaps
- 1 – Partially meets – major gaps or dependencies
- 0 – Does not meet – not capable

Field Presumptive Testing and Public Safety Screening Capabilities

Choose an item.

Type III: Capable of presumptive testing, identification, and classification of known chemical substances using a variety of sources to identify associated chemical and physical properties – Score:

Type II: Same as Type III, PLUS: Identification and classification of unknown substances using a variety of advanced chemical and radiological detection devices - Score:

Type I: Same as Type II, PLUS: Responds to unknown or suspected WMD materials and substances using specialized detection equipment - Score:

Atmospheric Air Monitoring Capabilities

Type III: Ability to use devices to detect the presence of known gases or vapors, including the ability to monitor for oxygen deficiency percentage, flammable atmosphere lower explosive limit (LEL), carbon monoxide, and hydrogen sulfide – Score:

Type II: Same as Type III, PLUS: Ability to use advanced detection equipment to detect the presence of known or unknown gases or vapors; advanced detection and monitoring may incorporate sophisticated instruments that can differentiate between two or more hazardous vapors and that may identify by name a specific hazardous or toxic vapor – Score:

Type I: Same as Type II, PLUS: Advanced detection and monitoring capabilities, including the ability to use WMD detection instruments – Score:

Sampling Capabilities

Type III: Ability to perform the following activities with known toxic industrial chemicals or toxic industrial materials, according to established protocols: standard sampling, collection, containerizing, labeling, and preparation for transportation and distribution, including standard environmental sampling procedures for lab analysis - Score:

Type II: Same as Type III, PLUS: 1. Ability to sample, collect, containerize, label, and prepare to transport unknown toxic industrial chemical or toxic industrial materials - both liquid and solid - in accordance with standard collection and chain of custody protocols 2. Ability to collect, handle, and track samples to be used as evidence – Score:



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Type I: Same as Type II, PLUS: Ability to use special resources that may be required for collecting air samples and handling biological materials – Score:

Radiation Detection and Monitoring Capabilities

Type III: 1. Ability to accurately interpret readings from beta and gamma radiation detection devices
2. Ability to conduct a geographical survey search for suspected radiological sources or contaminations spread - Score:

Type II: Same as Type III, PLUS: 1. Ability to detect and survey for alpha, beta, and gamma radiation – Score:

Type I: Same as Type II, PLUS: 1. Ability to identify and establish exclusion zones 2. Ability to identify some but not all radionuclides, including neutron detection 3. Ability to conduct environmental and personnel surveys 4. Possession of cumulative self-reading dosimetry (for each survey team member) – Score:

Technical Reference Capabilities

Type III: 1. Ability to access and use various databases, chemical substance data repositories, other guidelines and safety datasheets (print or electronic), standalone computer programs, and data available via telecommunications 2. Ability to interpret data collected from electronic devices and chemical testing procedures and select a response option – Score:

Type II: Same as Type III, PLUS: At minimum, access to technical references or outsourced reach-back capabilities, at least one source of air modeling with map overlay capabilities – Score:

Type I: Same as Type II, PLUS: Access to WMD references, databases, or reach-back assistance – Score:

Incident Intervention Capabilities

Type III: 1. Ability to use mechanical means of intervention, such as plugging, patching, off-loading, and tank stabilization, along with environmental means such as adsorption, absorption, dams, dikes, and booms 2. Access to an assortment of hand tools – Score:

Type II: Same as Type III, PLUS: Ability to use a chemical means, such as neutralization and encapsulation of known and unknown chemicals, along with mechanical means (pneumatic and standard patching systems)-including specially designed kits for controlling leaks in large atmosphere or pressurized containers– Score:

Type I: Same as Type II, PLUS: Advanced capabilities, including the ability to intervene and confine/control incidents involving WMD materials – Score:

Decontamination Capabilities

Type III: Ability to support team decontamination needs – Score:

Type II: Same as Type III – Score:

Type I: Same as Type II – Score:



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Gaps in Operational Support

If a team rates itself 2 or less, the team has an opportunity to list the issue and a mitigation activity for review by the assessment team. If "Anticipated Completion Date" is unknown, please leave field blank.



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Section 7: Training

This section is to be utilized to review and validate the Team's current and historic training credentials. Use the scale below to evaluate your team's training credentials to assess your mission readiness.

ICS/NIMS Training Compliance

Has the team documented completion of the required ICS/NIMS training for all deployable members?

Yes No Partial/In Progress

Is there a training matrix, tracker, or internal record that can be provided upon request? If yes, what tool?

Yes No If Yes, what platform _____

Check all levels of ICS/NIMS training tracked across the team:

IS-100 IS-200 IS-700 IS-800
 ICS-300 ICS-400

Multi-Year Training Register for Personnel:

Teams should enter the number of team members trained in the associated role and be able to provide evidence of their training.

For example:

Position Title	Training Goal 36 Months	Notes	Cost
Hazardous Materials Team Leader			
Safety Officer			
Hazardous Materials Technician			
Toxmedic			



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Section 8: Exercises

This section captures the team's recent operational testing through deployments and exercises, focusing on those that were evaluated and resulted in actionable improvement plans. It supports readiness validation for all team types and encourages continuous improvement through After-Action Review (AAR) processes.

Teams should report activities from the past 36 months and be prepared to present documentation if requested during the assessment.

Self-Assessment Metrics

Engagement Type	Count (Past 3 Years)	Evaluated?	AAR/IP Completed?	Notes or Key Lessons Applied
Full-Scale Exercises (FSE)		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	
Functional Exercises (FE)		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	
Tabletop Exercises (TTX)		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	

Team Narrative (Optional):



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Exercise After Action/Improvement Plan Table

The following table allows teams to self-identify any issues and corrective action activities for the team's exercises. If "Anticipated Completion Date" is unknown, please leave field blank.



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Section 9: Supplemental Information

This section provides an opportunity for the team to highlight additional capabilities, cost factors, and surge resources not captured elsewhere in the assessment. It supports strategic planning, funding justification, and deployment readiness documentation for local, state, or federal missions.

Please complete each subsection below. Supporting materials may be attached or referenced.

Recommended for the Presentation at Assessment Session

- ✓ Capability letters or team highlight one-pagers
- ✓ Cost estimate worksheet or assumptions summary
- ✓ Copies of MRPs (if developed)
- ✓ Photos or short summaries of surge assets
- ✓ Supporting MOUs or specialty team agreements

Unique Capabilities or Surge Resources

Describe any specialized assets, personnel, or configurations that extend beyond standard FEMA/RTLT typing or provide your team with added mission flexibility.

Examples include having specialized canine searchers for structural collapses.

Estimated Daily Deployment Cost

Provide the estimated average cost to deploy and sustain the team per day. This estimate may include personnel, lodging, meals, equipment use, vehicle costs, contracted services, and support trailers.

Type III: Estimated Daily Cost: \$_____

Team Size this Estimate Reflects: _____ personnel

Type II: Estimated Daily Cost: \$_____

Team Size this Estimate Reflects: _____ personnel

Type I: Estimated Daily Cost: \$_____

Team Size this Estimate Reflects: _____ personnel

Notes or Cost Assumptions:



Specialty Response Teams (SRT) Capability Assessment Program Self-Assessment Tool



Mission Ready Package (MRP) Documentation

If the team has a completed MRP for any specialty function, list below and be prepared to share copies.

Include team configuration, resource typing, deployment duration, support needs, and mobilization timeline.

MRP Title(s):

Date Last Updated: _____

Documentation Provided: Yes No

Team Narrative (Optional):



Section 10: Improvement Plan Roll-Up

The assessed team should roll-up any noted items in Sections 2, 5, 7, 8, and any associated costs for review. If "Anticipated Completion Date" is unknown, please leave field blank.



Specialty Response Teams (SRT) Capability Assessment Program Self-Assessment Tool



Section 11: Certification Statement

This section must be completed by the Agency Administrator, Fire Chief, or Team Leader. The purpose of this statement is to affirm the accuracy and completeness of the responses provided throughout the assessment.

The certification reflects that the team has conducted a fair and honest review of its capabilities, readiness, and administrative standing, and that the information submitted may be used by oversight authorities to support planning, funding, or mutual aid coordination.

Recommended for the Presentation at Assessment Session

- ✓ Signed certification statement on agency letterhead (digital or printed)
- ✓ Original may be submitted as a scanned PDF or attached to the assessment package
- ✓ Authorized signatory must be a designated Agency Administrator, Fire Chief, or Team Leader

Certification Statement

I hereby certify that the information provided in this assessment is accurate to the best of my knowledge and reflects the current operational status of the team identified herein. I acknowledge that this self-assessment will be used as part of a formal review process and may be referenced during planning, coordination, and deployment activities.

Team Name: _____

Sponsoring Agency: _____

Name of Certifying Official: _____

Title: _____

Phone: _____ Email: _____

Signature: _____

Date: _____