



# Self-Assessment Tool *Public Safety Dive Team*

Based on FEMA's Resource Typing Library Tool (RTL) and National Resource Typing Standards

Version 1.0 – April 2026



## Specialty Response Team Assessment Program



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



## Overview of the Tool's Purpose

This 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 teams to measure their current capacity against nationally recognized benchmarks for each team type (Type VI – Type I).

The primary goal is to provide a realistic snapshot of each team's strengths, identify areas for growth, and guide targeted improvements through an administrative assessment. These assessments inform planning, enhance interagency coordination, and support requests for mutual aid or deployment by state and federal agencies.

## Purpose of the Self-Assessment Report and Assessors' Report

Teams will utilize the self-assessment reporting tool to provide the assessors with a complete view of their capabilities, denoting what typing level the team aspires to be administratively recognized as by the Florida Division of Emergency Management. During the Assessment, Assessors will review your documentation, cache/equipment, and other supporting documentation against FEMA's Resource Typing Library Tool (RTLTL), which sets a national standard for team and individual typing of response resources, and other standards to provide a typing based on observation and assessment within the Assessor's Report. Note, this Assessment does not bar the Team from responding in their jurisdictions. The Assessment merely provides recognition or guidance based on administrative observations.

## Assessment Presentation and Documentation

Teams will present their finished self-assessment 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 Position Task Books (PTBs) if available, 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



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



## Section 1: Team Identification

This section provides foundational information about your team's identity, structure, and recent operational experience. 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 **FEMA 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), current or recent IAPs, or 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  Region/Statewide  EMAC (Out-of-State)

Federal

Does more than one agency contribute to the makeup of your team?  Yes  No

If yes, which agencies?

\_\_\_\_\_

If your team is made up of more than one agency, which agency maintains your certificates, training, and equipment operational readiness and maintenance records and funding?

\_\_\_\_\_

How many deployment/callouts did your team have over the past 12 months \_\_\_\_?

**Public Safety Dive Team (Dive Team) Typing Level** (Select the highest level of Typing you are seeking to be recognized as):

Type IV  Type III  Type II  Type I



## Section 2: Deployment/Callout History

### Instructions:

This section captures a detailed summary of a recent Dive Team deployment (Callouts) within the past 36 months (up to 3 callouts) 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. The program recognizes that Dive Teams are very likely more active within a 12-month window. The SRT Program operates on a 36-month rotation. Teams should be able to identify 3 call-outs within the 36-month window.

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

Recommended for the Presentation at Assessment Session:

- ✓ Organizational Chart (reflecting current team structure)
- ✓ Typing Certificate (if issued by state or federal authority)
- ✓ Agency/Team Operational Orders

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



## Deployment/Activation/Callout Report #1

Incident Name and Report/Incident #: \_\_\_\_\_

Incident/Callout Location: \_\_\_\_\_

Deployment/Callout Date: \_\_\_\_\_ Time: From \_\_\_\_\_ to \_\_\_\_\_

Team Leader Name: \_\_\_\_\_

### Jurisdiction or Region Supported:

City/County: \_\_\_\_\_

Sponsoring or Tasking Agency: \_\_\_\_\_

### Deployment/Callout Activation Type:

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

### Deployment Type (Check all that apply):

- Basic Search
- Black Water Operations
- Flood Water Mapping
- Space/Cave Dive Searches
- Other: \_\_\_\_\_
- Victim Rescue
- Evidence Marking & Recovery
- Underwater Metal Detection
- HAZMAT/Contaminated Water Searches
- Body Rescue
- Ice Dives
- Grid Searches
- ?  Yes  No

Additional Info:

### Deployment Metrics

Total Team Members Deployed: \_\_\_\_\_



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



## Executive Summary (Suggested 3–6 sentences)

Summarize the deployment, clearly highlighting the team’s core Dive Team 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:

*“On the afternoon of Tuesday, February 24, 2026, the Central County Sheriff’s Office Public Safety Dive Team was deployed to the shoreline of Millbrook Reservoir following reports of an unoccupied vehicle discovered near the water’s edge. Dive Team Commander Sergeant Davis coordinated with on-scene deputies to establish a search perimeter while team members suited up in full dry suits and dive gear. Working in pairs and utilizing an underwater sonar detection system, divers conducted a systematic grid search of the reservoir floor in near-zero visibility conditions. The Central County Sheriff’s Office Public Safety Dive Team, comprised of twelve certified rescue divers trained to ERDI Public Safety Diver standards, worked in rotating shifts to cover the designated search area thoroughly while surface tenders monitored diver safety and maintained communication. After approximately three hours of underwater search operations, the team completed their assigned grid and provided their findings to the lead investigator before securing equipment and clearing the scene.”*

### Deployment Narrative (Required):



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



## Deployment/Activation/Callout Report #2

Incident Name and Report/Incident # \_\_\_\_\_

Incident/Callout Location: \_\_\_\_\_

Deployment/Callout Date: \_\_\_\_\_ Time: From \_\_\_\_\_ To \_\_\_\_\_

Team Leader Name: \_\_\_\_\_

### Jurisdiction or Region Supported:

City/County: \_\_\_\_\_ State: \_\_\_\_\_

Sponsoring or Tasking Agency: \_\_\_\_\_

### Deployment/Callout Activation Type:

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

### Deployment Type (Check all that apply):

- Suspected Hazardous Devices       Explosives       Explosive Material
- Pyrotechnics       Ammunition       Transportation Incident
- CBRNE       Dignitary       Special Events
- Pre-Planned Events       Other: \_\_\_\_\_

Was a Render Safe Procedure (RSP) performed during this callout?  Yes  No

Additional Info:

### Deployment Metrics

Total Team Members Deployed: \_\_\_\_\_



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



## Executive Summary (Suggested 3–6 sentences)

Summarize the deployment, clearly highlighting the team’s core Dive Team 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:

*“On the afternoon of Tuesday, February 24, 2026, the Central County Sheriff’s Office Public Safety Dive Team was deployed to the shoreline of Millbrook Reservoir following reports of an unoccupied vehicle discovered near the water’s edge. Dive Team Commander Sergeant Davis coordinated with on-scene deputies to establish a search perimeter while team members suited up in full dry suits and dive gear. Working in pairs and utilizing an underwater sonar detection system, divers conducted a systematic grid search of the reservoir floor in near-zero visibility conditions. The Central County Sheriff’s Office Public Safety Dive Team, comprised of twelve certified rescue divers trained to ERDI Public Safety Diver standards, worked in rotating shifts to cover the designated search area thoroughly while surface tenders monitored diver safety and maintained communication. After approximately three hours of underwater search operations, the team completed their assigned grid and provided their findings to the lead investigator before securing equipment and clearing the scene.”*

### Deployment Narrative (Required):



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



## Deployment/Activation/Callout Report #3

Incident Name and Report/Incident # \_\_\_\_\_

Incident/Callout Location: \_\_\_\_\_

Deployment/Callout Date: \_\_\_\_\_ Time: From \_\_\_\_\_ To \_\_\_\_\_

Team Leader Name: \_\_\_\_\_

### Jurisdiction or Region Supported:

City/County: \_\_\_\_\_ State: \_\_\_\_\_

Sponsoring or Tasking Agency: \_\_\_\_\_

### Deployment Activation Type:

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

### Deployment Environment (Check all that apply):

- Suspected Hazardous Devices     Explosives     Explosive Material
- Pyrotechnics     Ammunition     Transportation Incident
- CBRNE     Other: \_\_\_\_\_

Was a Render Safe Procedure (RSP) performed during this callout?  Yes  No

Additional Info:

### Deployment Metrics

Total Team Members Deployed: \_\_\_\_\_



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



## Executive Summary (Suggested 3–6 sentences)

Summarize the deployment, clearly highlighting the team’s core Dive Team 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:

*“On the afternoon of Tuesday, February 24, 2026, the Central County Sheriff’s Office Public Safety Dive Team was deployed to the shoreline of Millbrook Reservoir following reports of an unoccupied vehicle discovered near the water’s edge. Dive Team Commander Sergeant Davis coordinated with on-scene deputies to establish a search perimeter while team members suited up in full dry suits and dive gear. Working in pairs and utilizing an underwater sonar detection system, divers conducted a systematic grid search of the reservoir floor in near-zero visibility conditions. The Central County Sheriff’s Office Public Safety Dive Team, comprised of twelve certified rescue divers trained to ERDI Public Safety Diver standards, worked in rotating shifts to cover the designated search area thoroughly while surface tenders monitored diver safety and maintained communication. After approximately three hours of underwater search operations, the team completed their assigned grid and provided their findings to the lead investigator before securing equipment and clearing the scene.”*

### Deployment Narrative (Required):

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



## Section 2: Deployment AAR/Improvement Plan

The following table allows teams to self-identify any issues and corrective action activities during the team's deployments.

Issue	Corrective Action	Anticipated Completion Date	Cost (if applicable, NA if not)

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



## Section 3: Administrative Compliance

This section verifies the administrative foundation necessary for your team’s deployment readiness, legal authorization, and grant eligibility (if applicable). Strong administrative compliance ensures that the team can be deployed swiftly and legally within the framework of mutual aid systems, while also maintaining alignment with ICS/NIMS standards and risk management practices.

All information should be supported by up-to-date documentation (See Section 1 for examples) and should reflect the team’s current organizational status. During the scheduled assessment, teams should be prepared to present supporting information as indicated.

### Mutual Aid Agreements / Memorandums of Understanding (MOUs)

Does your team have signed mutual aid agreements or MOUs in place with neighboring jurisdictions, regional partners, or state agencies? If you have additional MOUs or other agreements, please add them to a separate document or sheet of paper and add to the ReadyOps submission file or email them to the SRT CAP Assessment Team.

- Yes     No     In Progress

If yes, 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 the team or sponsoring agency maintain insurance coverage for deployments?

- Yes     No     Unknown

Types of Coverage (Check all that apply):

- General Liability     Workers’ Compensation     Auto/Vehicle  
 Professional Liability     Volunteer Liability     Agency Specific Insurance  
 Self-Insured     Other: \_\_\_\_\_

Carrier Name (if known or mark self-insured): \_\_\_\_\_

 (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? Please add the name of your SOP/SOG in the white space below the suggested document title. Space is provided to the Team to write in other examples that meet the item located in the table.

Area	Yes	No	In Progress
Standard Operating Procedure/Guide	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unit Specific Guide	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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## Section 4: Personnel

### Instructions:

This section is designed to help Public Safety Dive Teams evaluate their staffing levels against the FEMA/NIMS-typed minimum personnel requirements for Type IV through Type I teams. The table provides a structured method to document your team’s capabilities and identify gaps or surpluses in personnel. The Team should include all participating members (including other chartered agencies) where appropriate.

### How to Use the Table

Column	Description
Position	Lists nationally recognized RTLT-typed roles required for the Public Safety Dive Team. <a href="#">Public Safety Dive Team</a>
Type IV / III / II / I Columns	Indicate the <b>minimum required personnel</b> for each team type based on FEMA’s RTLT resource typing definitions.
Number of qualified personnel primarily assigned and rostered in this position	Enter the <b>actual number of individuals</b> on your current roster who are <b>assigned and ready</b> to serve in that position. Individuals must be deployable and not double-counted.

### Staffing Strategy and Recommendations

- Teams aiming for reliable deployment coverage should strive for **2 to 3 times the minimum requirement** listed in the table for each position.
- This depth allows for personnel rotations, shift coverage during long operations, leave/vacancy coverage, and backup deployment capabilities.
- For high-demand roles (e.g., Diver, Tender), deeper staffing is highly encouraged.

### Disclaimer on Double Counting

**Important:** Each responder may only be counted **once** in the **"Assigned and Rostered"** column, even if they hold multiple certifications or fulfill several roles.

### Minimum Totals by Team Type

At the bottom of the table, a **Totals Row** reflects the **minimum required number of personnel** for each Task Force type (Type VI 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 IV Dive 60 ft	Type III Dive 100 ft	Type II Dive 130 ft	Type I Dive more than 130 ft	Number of qualified personnel primarily assigned and rostered in this position
NIMS Type 2 Dive Team Leader	1	1	1	0	
NIMS Type 1 Dive Team Leader	0	0	0	1	
NIMS Type 4 Diver	2	0	0	0	
NIMS Type 3 Diver	0	4	0	0	
NIMS Type 2 Diver	0	0	4	0	
NIMS Type 1 Diver	0	0	0	4	
NIMS Type 2 Tender	1	2	2	0	
NIMS Type 1 Tender	0	0	0	2	
NIMS Type 1 Paramedic or EMT	1	1	1	1	
Assistant Safety Officer – Dive Team	1	1	1	1	
<b>Totals</b>	<b>6</b>	<b>9</b>	<b>9</b>	<b>9</b>	

**Team Narrative (Optional):**



## Section 5: Equipment and Cache Readiness

This section assesses the team's alignment with FEMA's RTLT standards across the core equipment listed within the standard. Self-score each area using the scale below, and be prepared to reference inventory lists, cache photos, or live presentations during the assessment.

### Scoring Key

- 3 – Fully meets standard – mission ready
- 2 – Substantially meets standard – minor gaps
- 1 – Partially meets – major gaps or dependencies
- 0 – Not Capable
- X – Not Applicable (NA)

*\*Teams should only use NA if an area being assessed does not apply to their Team's Assessment.*

### Dive Equipment Per Team. Type IV

Includes Dive flag, Assorted buoy markers, Assorted ropes and throw bags, Evidence containers, GPS tracking/marketing device, Air compressor, Basic first aid kit, Jackstays, Body bags, Mesh collection bags, Underwater lighting system, and Personal flotation devices for all personnel

### Dive Equipment Per Team. Type III

Includes the same equipment as Type 4, PLUS: Gear for attaching lift bags to objects (chains, webbing, rope), Floor or sonar mapping equipment, and Recording cameras

### Dive Equipment Per Team. Type II-I

Includes the same equipment as Type 3, PLUS: Full face mask with dive communications, Dredging equipment, and Mask-mounted lighting system

### Dive Equipment Per Diver. Type IV

Includes a Wet suit, Scuba gear, Redundant air supply suitable for the underwater depth, Buoyancy Compensator Device (BCD), Scuba regulator, Weight with weight belt, Mask, Gloves suitable for dive conditions, Fins, Snorkel, Dive boots, Cuttings devices, such as dive knife, shears or wire cutters, Timing device, and Whistle or surface noisemaking device

### Dive Equipment Per Diver. Type III

Includes a Wet suit, Scuba gear, Redundant air supply suitable for the underwater depth, Buoyancy Compensator Device (BCD), Scuba regulator, Weight with weight belt, Mask, Gloves suitable for dive conditions, Fins, Snorkel, Dive boots, Cuttings devices, such as dive knife, shears or wire cutters, Timing device, and Whistle or surface noisemaking device, PLUS: dry suit



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## Dive Equipment Per Diver. Type II

Includes a Wet suit, Scuba gear, Redundant air supply suitable for the underwater depth, Buoyancy Compensator Device (BCD), Scuba regulator, Weight with weight belt, Mask, Gloves suitable for dive conditions, Fins, Snorkel, Dive boots, Cuttings devices, such as dive knife, shears or wire cutters, Timing device, and Whistle or surface noisemaking device, dry suit, PLUS: 1. Full-face mask 2. Mask-mounted lighting

## Dive Equipment Per Diver. Type I

Includes a Wet suit, Scuba gear, Redundant air supply suitable for the underwater depth, Buoyancy Compensator Device (BCD), Scuba regulator, Weight with weight belt, Mask, Gloves suitable for dive conditions, Fins, Snorkel, Dive boots, Cuttings devices, such as dive knife, shears or wire cutters, Timing device, and Whistle or surface noisemaking device, dry suit, Full-face mask, Mask-mounted lighting, PLUS: Equipment for specialty dive conditions, such as: Dry suit and full-face mask for diving in a hazmat environment, Detection and monitoring equipment for diving in a hazmat environment, Rebreather, and Ice suit

## Equipment – Personal Protective Equipment (PPE): Type IV-I: Score: \_\_\_\_

Includes Life preservers, Helmets, Protective gloves, and Protective footwear

## Equipment – Communications. Type IV: Score: \_\_\_\_

Includes 4 – Short-range, handheld two-way portable radio, and 4 – Cell phone or satellite phone

## Equipment – Communications. Type III-I: Score: \_\_\_\_

Includes Type IV, PLUS: Hardwire or radio-based diver-to-surface and diver-to-diver communications equipment

## Equipment – Transportation Equipment. Type IV&III: Score: \_\_\_\_

Includes a Support Vehicle

## Equipment – Transportation Equipment. Type II: Score: \_\_\_\_

Includes the same equipment as a Type III, PLUS: 1 – Support vehicle 1 – Boat for boat-based search patterns and transportation

## Equipment – Transportation Equipment. Type I: Score: \_\_\_\_

Includes the same equipment as a Type II, PLUS: 1 – Support vehicle

## Team Narrative (List additional acquired team equipment here (Optional):



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



## Equipment Gap Identification

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

Equipment Need Description	Units Needed	Unit Cost	Cost



## Section 6: Operational and Support Capabilities Self-Assessment

Use the scale below to evaluate your team's capability to perform core Bomb 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 – Not Capable
- X – Not Applicable (NA)

Teams should use NA if an area being assessed does not apply to their Team's Assessment.

**Perform basic search patterns:** Score: \_\_\_\_

Capability:

Standard:

**Can operate with a tethered diver:** Score: \_\_\_\_

Capability:

Standard:

**Can perform victim rescue and body recovery:** Score: \_\_\_\_

Capability:

Standard:

**Can perform evidence marking and recovery:** Score: \_\_\_\_

Capability:

Standard:

**Can map flood of water body:** Score: \_\_\_\_

Capability:

Standard:

**Can record underwater scene:** Score: \_\_\_\_

Capability:

Standard:

**Can use underwater metal detectors:** Score: \_\_\_\_



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Capability:

Standard:

Equipment:

**Can perform grid searches: Score: \_\_\_\_**

Capability:

Standard:

Equipment:

**Can use side scan sonar equipment: Score: \_\_\_\_**

Capability:

Standard:

Equipment:

**Can perform boat-based search patterns: Score: \_\_\_\_**

Capability:

Standard:

Equipment:

**Can perform specialty dives, including but not limited to confined space/cave search dives, hazardous materials and contaminated water dives, and ice dives: Score: \_\_\_\_**

Capability:

Standard:

Equipment:

**Provide additional (Not Listed) capabilities here (optional):**



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



## 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.

### Public Safety Dive Team Specific 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 \_\_\_\_\_

**What additional training does your agency require for your Public Safety Dive Team?**

Training Topic	Class Description



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



## Instructions for the Training Improvement Plan Table

In the chart below, enter your expectations for how much training time by position you are forecasting for each of the positions below for the next thirty-six (36) months. Use the notes column to explain any gaps, upcoming training, or special considerations.

Position Title	Training Goal 36 months	Notes	Cost

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



## Section 8: Exercises Evaluation

This section captures the team’s recent operational testing through 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	
Seminars		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	
Workshops		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	
Games		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	
Drill		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	



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



## Team Narrative-additional exercises (Optional):

### 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.

Issue	Opportunities for Improvement	Anticipated Completion Date	Cost (leave blank if none)



## 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's RTLTL typing or give your team added mission flexibility.

**Does your team have enacted policies and the ability to sustain operations?**  Yes  No

### Estimated Average Callout Cost

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

Type III: Estimated Average Callout Cost: \$ \_\_\_\_\_

Team Size this Estimate Reflects: \_\_\_\_\_ personnel

Type II: Estimated Average Callout Cost: \$ \_\_\_\_\_

Team Size this Estimate Reflects: \_\_\_\_\_ personnel

Type I: Estimated Average Callout Cost: \$ \_\_\_\_\_

Team Size this Estimate Reflects: \_\_\_\_\_ personnel



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



## Team Narrative (Optional):

*This Space Left Intentionally Blank*

DRAFT





## Section 11: Certification Statement

This section must be completed by the Agency Administrator, Police Chief/Sheriff or Dive Team Commander. 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, Police Chief/Sheriff or Public Safety Dive Team Commander.

### 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: \_\_\_\_\_