



**NYC CERT After Action Review
FORM 420-2 pages**

Date prepared:

Prepared by:

Borough/please circle: Brooklyn Bronx Manhattan Queens Staten Island

Community Board: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18

Date of Deployment: _____

Deployment Notification:

- Team notified OEM Watch Command
- OEM notified Team

Location/Address of Incident (please describe):

Location within your Community Board: Yes No

Hours of Deployment:

Time notified: _____ : _____ AM/PM

Time ended: _____ : _____ AM/PM

Number of credentialed team members deployed: _____

Other NYC CERT Teams present/assisting: Yes, please list:

No

Type of Incident (please check all that apply):

- Fire
- Utility Failure/Problem
- Flood
- Extreme Weather
- Building Collapse
- Mass Care
- Other, please list below

Please turn page over:

NYC CERT TEAM Notification/Call-down:

- Phone E-mail In person Other

Team Chief/Designee initiated phone tree/pre-determined notification system:

- Yes No

Incident Description/Roles and Responsibilities Given:

Team Successes:

- | | |
|---|---|
| <input type="checkbox"/> Team members notified responded | <input type="checkbox"/> Team notification system worked well |
| <input type="checkbox"/> Team recognized by first responders at scene | <input type="checkbox"/> Team members clear on assigned roles |
| <input type="checkbox"/> Team followed ICS protocols | <input type="checkbox"/> Team members responded with proper equipment/
gear. |

Other, please explain:

Team Challenges:

- | | |
|---|--|
| <input type="checkbox"/> Team members did not respond to notification | <input type="checkbox"/> Team notification system did not work well |
| <input type="checkbox"/> Team not recognized by first responders at scene | <input type="checkbox"/> Team not aware of assigned roles |
| <input type="checkbox"/> Team did not follow ICS protocols | <input type="checkbox"/> Team members did not respond with proper
equipment/gear. |

Other, please explain:

Suggestions/Lessons Learned: