

PENNSYLVANIA FIRE SERVICE VOLUNTARY CERTIFICATION PROGRAM



YOUTH FIRESETTING PREVENTION & INTERVENTION PROGRAM MANAGER

CANDIDATE HANDBOOK

OFFICE OF THE STATE FIRE COMMISSIONER
PENNSYLVANIA STATE FIRE ACADEMY

Dear Certification Candidate,

Welcome to the Pennsylvania Fire Service Voluntary Certification Program. The purpose of this manual is to provide you with information to successfully participate in certification testing. This manual outlines the pre-requisites, testing and application process, and provides you with a study guide reference list. Tests are conducted under the sanction and approval of the Pennsylvania Office of the State Fire Commissioner with accreditation granted by the National Board on Fire Service Professional Qualifications (National Pro-Board) and the International Fire Service Accreditation Congress (IFSAC)

In accordance with *Act 61 of 1995, The State Fire Commissioner Act*, the Office of the State Fire Commissioner is the certifying agency within the Commonwealth of Pennsylvania, and the Pennsylvania State Fire Academy is the administering agency. Any United States Citizen eighteen (18) years of age or older who resides in Pennsylvania may apply for consideration as a test candidate.

Effective March 1, 2026:

- All certification candidates are required to maintain an active Acadis user portal account. (Acadis portal location = OSFC website/ Training and Certification Portal, or click here: [ENVISAGE Acadis®](#))
- All certification candidates are to be registered with the designated test site and rostered for the certification test.

Good luck and thank you for participating in the Pennsylvania Voluntary Fire Service Certification Program.

Application Process

Obtain an application from the Office of the State Fire Commissioner (OSFC) [website](#) or the PA State Fire Academy (PSFA), fill out the form in full, and provide all required documentation. The completed application and accompanying documents are to be submitted to the PSFA certification staff. Your application is reviewed for completeness, and either accepted or rejected based on compliance and deficiencies (i.e., lacks prerequisites, signatures, etc.).

The general test process is as follows:

1. A candidate must submit a complete application including all supporting documents;
2. After the application is approved, the candidate takes the written and subsequently the skills tests (NOTE: The skills test cannot be taken before the written test; waivers from this rule are done based on a case-by-case review and as warranted by the test methodology);
3. Upon successful completion of the written and skills tests and a review of the application for completeness by the PSFA certification staff, the candidate can be certified for the level tested. If a candidate should not pass any part of the test process, a retest can be administered and must be completed within one (1) year of the original test date.

Application Pointers

1. Make sure the application is legible and complete. **Applications MUST be typed.**
2. Application **MUST** have your FEMA Student Identification Number (SID).
3. Social Security Number: Please provide the last four (4) digits.
4. Provide your complete name including suffix (Jr, Sr, III, etc.) **NO** nicknames please.
5. Make sure your mailing address includes street, apartment number, city, state, and zip code.
6. Make sure all appropriate signatures are obtained and are signed in **all areas, either in Blue or Black ink, or via digital, electronic signatures (MUST be Adobe signature, NOT a Freeform signature).**
 - a. *Chief Officers CANNOT sign for themselves where a Chief Officer's signature is required;*
 - b. *For this requirement, another Chief Officer MUST sign this section of the application.*
7. Legible copies of all pre-requisites must be attached and signed were applicable. **NOTE:** *Copies must include both the front and back of the document where applicable. (i.e. CPR & Medical cards).*
Make sure your Prerequisite Verification Form (found in the back of the application) is appropriately marked and signed in **BLUE** or **BLACK** ink or via digital, electronic signatures (**MUST be Adobe signature, NOT a Freeform signature**).

Prerequisites

A candidate for the YFPIPM certification shall hold and maintain a professional credential in one of the:

- Law Enforcement Officer
- Health Care Professional (EMT, EMTP, Physician or Nurse)
- Social Service Worker
- Mental Health Worker
- Educator
- OR**
- Fire and Life Safety Educator I (Pro-Board and/or IFSAC certification)
- OR**
- Fire Investigator (Pro-Board or IFSAC certification, OR another nationally recognized, and approved credential)

Test Policy

Written Test: The written test consists of one hundred (100) questions and is randomly generated. Candidates have a maximum of two (2) hours to complete the test. Passing score for the written test is seventy percent (70%).

Skills Test: Candidates must pass one hundred percent (100%) of the skill stations assigned.

NOTE: For Skill E (Present a Fire Education Lesson), an equivalency exists whereby if the candidate holds a valid Fire Service Instructor I or higher national certification (ProBoard or IFSAC) then the competencies for this skill are met.

Re-test Policy

Written Test: If you are unsuccessful, you have a total of two (2) retest attempts and have one (1) year to complete the retest. You will need to contact the fire academy or a test site of your choice to schedule a retest.

Skills Test: You must pass 100% of the skill stations offered.

- If you are unsuccessful on three (3) or less skill stations, you may retest the same day (only one retest per skill station);
- If you are unsuccessful on four (4) or more skill stations, you may NOT retest the same day. Skill retests must be scheduled for a later date and time.
- A total of eight (8) retest attempts are permitted and must be completed in one (1) year to successfully complete the testing process.

Appeals

A candidate may request a review of his/her performance records by the State Fire Academy within thirty (30) days of receipt of a failure notice. Appeals **MUST** be in writing and in accordance with the policies and procedures of the Certification Program.

Send to: Pennsylvania State Fire Academy
Attn: Certification Program Manager
1150 Riverside Drive
Lewistown, PA 17044

Accommodations

The Pennsylvania Fire Service Voluntary Certification Program offers reasonable accommodations for the written certification exams for individuals with documented disabilities. Only written requests for accommodations for certification examinations are reviewed and each request is reviewed on a case-by-case basis. Requests must be submitted on the Accommodation Request Form. The Pennsylvania Fire Service Voluntary Certification Program provides written notification of its decision to the candidate upon completion of its review and the review by legal counsel of the request for accommodation.

The *Accommodation Request Form* is located on Page 6 of this manual or is available from the Pennsylvania State Fire Academy and test site coordinators. Please contact the Certification Program Manager for further information. The candidate who is requesting an accommodation must complete the request form at the time of application submission or as soon as the need for an accommodation is recognized. All requests must be made prior to the scheduled date of the examination. Any request for accommodation not submitted at least twenty (20) working days prior to the scheduled examination will result in a delay in the candidate's date of examination.

Documentation of a specific disability which would impact a candidate's performance on the written examination must be current (within five (5) years of the date of application). Such documentation should include a signed explanation on letterhead stationery from a professional who is familiar with the applicant's disability or a copy of an Individual Education Plan (IEP) from an educational institution. See below comment.

The statement must confirm and describe the disability for which the accommodation is requested. The professional must have expertise in the specific disability for which the accommodation is being requested.

Recertification

In the Commonwealth of Pennsylvania, certification is a voluntary process; currently there is no requirement for recertification. Issuance of a certificate indicates the candidate has successfully passed the certification test. The certificate issued indicates the candidate is certified based on the edition and year of the standard under which the candidate certified. Furthermore, issuance of a certification certificate does not imply nor guarantee any indication of future performance because of the testing process.

Safety Policy

A candidate should meet the requirements of NFPA 1582 *Standard on Medical Requirements for Firefighters and information for Fire Department Physicians* prior to participating in any physical test to ensure his/her ability to safely perform the required tasks.

For the safety and protection of all participants, all equipment, and Personal Protective Equipment (PPE) used in a test **MUST** meet the NFPA standard at the time of manufacturing. PPE will be inspected prior to use in a test.

The facial hair policy states candidates with facial hair which interferes with the operation or use of a Self-Contained Breathing Apparatus (SCBA) will not be permitted to participate in a test that requires use of a SCBA.

Test Results & Release of Results

The Office of the State Fire Commissioner / PA State Fire Academy notifies candidates of their results in writing via US Postal Service (i.e., mail). Only Pass/Fail grades are given.

In accordance with the Federal Education Records and Privacy Act (FERPA) of 1974 (a federal law that established a minimum standard for the protection of educational records), PSFA requires prior consent from a candidate before any records or other personally identifiable information can be released. In the event a third-party requests test result, a Consent to Release Information form **MUST** be completed, signed, and submitted by the candidate to the PSFA before records are released to the third party.

No show policy

If a candidate is accepted for testing and fails to show up without an acceptable reason, the test site has the right to enforce their no-show policy that could include but is not limited to suspension from testing for an identified period of time and/or financial penalties.

Professional Testing Integrity and Dishonesty

Dishonesty in the professional test environment includes but is not limited to: cheating, plagiarizing, facilitating acts of testing dishonesty by others, having unauthorized possession of examinations, or submitting work of another person. Any instance(s) of testing dishonesty constitutes the need for disciplinary and/or legal actions. All certification candidates shall act with personal integrity, respect others' rights and property, and help maintain a professional environment in which all can be successful.

Test Site Coordinators, Assistant Coordinators, Test Proctors, Evaluators, and Instructors should take reasonable steps to anticipate and deter acts of dishonesty, reinforce integrity, and support appropriate behavior to protect the rights and trust of honest candidates. At the beginning of each test process, it is the responsibility of those to provide candidates with the "Testing Integrity and Dishonesty" policy and clarify questions that may arise.

Falsification of Documents

Any individual found to have forged, altered, or falsified documentation for the purpose of certification testing will be indefinitely suspended from participating in any certification exam within the Commonwealth of Pennsylvania. Further action may be taken in accordance with the Pennsylvania Crimes Code 18 Pa C.S. 4904, relating to unsworn falsifications.

Cheating on Test

All candidates are expected to work entirely on his/her own while taking any exam. Violations of test integrity consist of any attempt to receive assistance from written or printed aids unless provided by the test proctor for the purpose of a specific test, or any persons, papers, or electronic devices, or of any attempt to give assistance

Document Integrity

Certification candidates are expected to complete any and all work individually. For any material obtained from other sources such as plot plans, web maps, etc., a source reference must be given. All essay answers must be the candidate's own work.

Study Reference List

The following is a list of text that may be reference in preparation for testing.

1. National Fire Protection Association NFPA 030 Chapter 13 (2024 Ed) Standard for Professional Qualifications for Fire Prevention Program Position;
2. IFSTA, Fire and Life Safety Educator, 3rd Edition;
3. Jones and Bartlett, Fire and Life Safety Educator, Principles and Practices, 2nd Edition;
4. FEMA Youth Firesetting Prevention and Intervention, YFPI-Student Manual, 3rd Edition;
5. Skill Sheets can be found under [“Skills we’re looking for”](#)

Additional Information:

1. Applications shall be submitted to the test site by their established deadline or no later than 3 weeks prior to the test date.
2. Please contact the test site of your choice to receive information about fees for testing.
3. Photo ID is required at the time of the written and skills tests.

Certification applications and skill sheets, in addition to the test schedule and test site contact information, can be found at [Firefighter Certifications | Commonwealth of Pennsylvania](#). A page will open with information about the certification program and process. Scroll through the page to find the links for certification applications, skill sheets, test schedule, and test site contact information.

If you have additional questions or concerns about the test process, please contact the test site coordinator at the site where you applied to be tested or contact the PA State Fire Academy Certification Program Staff.

Appendix A

Assessment Tool



Prevention & Intervention

Child and Parent

Juvenile Firesetter Assessment Tool

Revised: 12 March 2009

ACKNOWLEDGEMENT

The Pennsylvania Juvenile Firesetter Intervention Advisory Group gratefully acknowledges the contribution of the Oregon's Office of the State Fire Marshal for material and content contained in this Assessment Tool. The *Pennsylvania Child and Parent Juvenile Firesetter Assessment Tool* was developed utilizing components of the *Oregon Juvenile with Fire Screening Tool*. The Pennsylvania model uses components of the Oregon Screening Tool, supplemented by a series of additional questions/probes, to facilitate administration of the original Oregon Screening Tool and to develop a comprehensive understanding of the child's fire-setting and mental health histories. The integration and explanation of this assessment information for this expanded model follows.

BACKGROUND

The *Oregon Juvenile with Fire Screening Tool* was designed for use by fire service personnel to screen youth referred to them for a fire-related incident. It is a basic screening tool used to give fire service personnel or community partners a "broad brush" approach to understanding the fire-setting behavior of youth. Under the Oregon model, the steps include a mental health evaluation, psychosocial history, firesetter history, and diagnosis and treatment recommendations. The Oregon Screening Tool was designed to meet the needs of Oregon's paid and volunteer fire service. The instrument is flexible and focuses mainly on the fire incident. The Oregon Screening Tool reflects the work of many fire and mental health professionals in Oregon and is based on statistical analysis of 130 juvenile firesetter assessments. However, the format of the interview is based on the work of Laurie Birchill, LCSW.

In its original form, the Oregon Juvenile with Fire Screening Tool serves the needs of the Oregon model for juvenile firesetter intervention. However, the basic Oregon Screening Tool is not completely compatible with the Pennsylvania doctrine for juvenile firesetter intervention as prescribed in the *Pennsylvania Juvenile Firesetter Intervention Protocol*; the PA protocol was written to the Pennsylvania standard for all state-recognized juvenile firesetter intervention programs in the Commonwealth. Pennsylvania's approach to 'assessing' juvenile firesetters mandates the participation of both a fire service official and a mental health practitioner, working cooperatively to conduct an assessment of the youth and their family or caregivers. Additional questions and probes in addition to other supporting forms were incorporated in the Oregon basic screening tool to create the *Pennsylvania Child and Parent Juvenile Firesetter Assessment Tool*; hence the PA instrument complies with the mandates of the state's protocol. The combination of the Oregon screening tool and the Pennsylvania components created a highly successful tool for abating the impact of youth fire-setting in the Commonwealth. The validity of the *Pennsylvania Assessment Tool* has been challenged in Commonwealth courts and to date has successfully turned aside all challenges. The use of the *Pennsylvania Assessment Tool*, in conjunction with all elements of the state juvenile firesetter intervention protocol, has a regionally demonstrated juvenile firesetter recidivism rate below the national average.

To obtain information about Oregon's *Juvenile with Fire* screening tool please email Oregon.sfm@state.or.us.

INTRODUCTION TO THE PENNSYLVANIA CHILD AND PARENT JUVENILE FIRESETTER ASSESSMENT TOOL

Pennsylvania's *Child and Parent Juvenile Firesetter Assessment Tool* is utilized to identify and gather information regarding the youth firesetter and family. It is not a stand-alone assessment tool. It should be used, following the Pennsylvania Intervention Protocol for the Prevention and Mitigation of Juvenile Fire-setting, in conjunction with reports from fire service, police, psychologists, schools, etc. Members of the Multidisciplinary Team reviews all information to form specific recommendations for the youth and the family.

The Assessment Tool is composed of two sections: (a) the Youth/Child Interview, and (b) the Parent Interview with Checklist. To gather the most comprehensive information, it is recommended that:

1. Trained professionals, one each from fire service and mental health community, conjointly conduct the interviews;
2. Both the child/youth interview and the parent interview with checklist should be conducted in the juvenile's home. While face-to-face interviewing of the youth and parent(s) is preferred, at times and to complete the parent interview and checklist, it may be necessary to conduct the parent interview by telephone;
3. The child/youth interview should be conducted with the youth separate from the parent(s). Also, the parent portion of the interview should be conducted separate from youth.
4. Those questions and the subsequent answers that are *italicized* and underlined is information to be gathered for the state's data collection system. It is important these items be completed.

Prior to or on the way to the youth's home, the assessment team should determine who will lead during the interview and the order in which the participants will be interviewed. However, it is important to remember these decisions may need to change based on the youth and family. When using the Pennsylvania Child and Parent Juvenile Firesetter Assessment Tool, the following interview process is recommended:

1. Introduction and Rapport Building:
 - a. Introduce the participants to include the youth(s), parents, assessors, etc.
 - b. Develop rapport with the juvenile and the parent(s)
 - c. Outline the reasons for the interview (e.g., the referral source, fire incident, etc.)
 - d. Outline the purpose of interview (e.g., to gather information regarding the juvenile and family history, current circumstances, the juvenile's fire-setting history, etc.)
 - e. Outline the program's process (e.g., interview, Multidisciplinary Team (MDT) process, recommendations, etc.)
2. Obtain signatures on the *Authorization to Release Information* and the *Release of Liability*. If the juvenile is 14 years-of-age or older, the juvenile must sign the Authorization to Release Information form. However, youth under 18 years-of-age cannot sign the Release of Liability form. Therefore, a legal parent or guardian (18 years-of-age or older) must sign the Release of Liability form.
3. Interviews:
 - a. Conduct interviews with the juvenile and parent(s). As stated previously, the juvenile and the parent(s) should be interviewed separately. It is recommended the parent(s) interview be completed first to give a better understand of the child's social relationships.
 - b. Ask the parent(s) to complete the Parent Questionnaire while the juvenile is being interviewed, or they may do it while the assessors are present.
 - c. Following the parent(s) interview, review the completed questionnaire.
4. Fire Safety Check: Complete a Fire Safety Check review by the Fire Service representative.

5. Wrap up:
 - a. Review the program process related to the MDT, recommendations, and future follow-up(s).
 - b. Provide the parent(s) and juvenile with the program telephone number.
6. Assessor Collaboration:
 - a. Following the interviews, the assessor team should discuss what was learned to prepare the report.
 - b. The assessor team should collaborate in writing the report.
7. Submit the report, when completed, to the individual coordinating the MDT and enter the indicated data into the data system.
8. Multidisciplinary Team Meeting: At least one member of the assessor team (although both are preferred) should attend the MDT review to present the juvenile, the family, and noted issues as well as answer any questions the MDT might have.
9. Following the MDT meeting, a letter outlining the MDT recommendations should be written and sent to both the family and the referral source. Enter the indicated data into the data system.

Pennsylvania Child and Parent Juvenile Firesetter Assessment Tool Referral Form

Referral Date: _____

Date Received: _____

Screening Date: _____

Juvenile's Name: _____ Age: _____ DOB: ___/___/___ Gender: M / F

Address: _____

School: _____ Grade: _____ Classroom: REG / SPED

Referring Agency:

Agency: _____ Contact: _____

Address: _____

Phone O#: _____ Cell#: _____

Referring Agency:

Agency: _____ Contact: _____

Address: _____

Phone O#: _____ Cell#: _____

Primary Caregivers:

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

Address: _____

Phone H#: _____ C#: _____ W#: _____

Other Adults in Home:

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

Siblings in Household:

Sibling: _____ Age: _____ Relationship: _____

Sibling: _____ Age: _____ Relationship: _____

Sibling: _____ Age: _____ Relationship: _____

Sibling: _____ Age: _____ Relationship: _____

Biological Father (If different from caregiver):

Name: _____ Age: ____ Employment: _____

Address: _____

Phone H#: _____ C#: _____ W#: _____

Biological Mother (If different from caregiver):

Name: _____ Age: ____ Employment: _____

Address: _____

Phone H#: _____ C#: _____ W#: _____

Fire Incident That Initiated This Referral:

What was set on fire (describe incident)? _____

Did Fire Dept. respond? Y / N If yes, how destructive was the fire? ___ None ___ Little ___ Much Did

Law Enforcement Respond? Y / N If yes, what department? _____

Are there any safety concerns the assessors should know prior to going into the juvenile's home?

Fire History: *List all child/youth fire related activities*

Mental Health History: *List all mental health issues of child/youth and family*

Criminal History: *List all criminal history and/or police contact with child/youth and family*

PENNSYLVANIA JUVENILE FIRESETTER INTERVENTION PROGRAM

PROGRAM: _____

Release of Liability

Case #: _____

Child's Name: _____

Parent/Guardian Name: _____

Address: _____

Phone Number: _____

I/We give permission for the child named above to participate in the _____ . I/We understand
Program Name

that no screening or assessment tool, or fire safety education program can definitively determine the future behavior of a child for that it depends on the response of the individual child. Therefore, I/we hereby release, indemnify, and hold harmless the _____ and all its employees, volunteers, and
Program Name

independent contractors against all claims, suits, and/or actions. I/We recognize and agree to hold harmless the _____ of all past, present, and future actions of the participants of the Program. I/
Program Name

We understand that any statement made during the assessment may be used before the courts.

Signature of Parent/Guardian

Date

Signature of Parent/Guardian

Date

Signature of Child (14 years-of-age or older)

Date

Signature of Witness

Date

Pennsylvania Juvenile Firesetter Intervention Program



Child/Youth Interview

CHILD/YOUTH INTERVIEW

Case #: _____

Instructions: Place a check mark next to the scoring level that best describes the situation for this youth. Expand the questions as you feel necessary to complete the interview with confidence. Responses/comments should be recorded in the space provided for each question.

1. Is the youth experiencing any school problems?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
What school do you go to?	
What grade are you in?	
What do you like about school? What don't you like?	
What grades did you receive this past year?	
Have you gotten in trouble at school?	
Do you listen to your teacher(s) most of the time?	
Who is your best friend?	
Do you like school/learning?	
Have you ever been bullied? Have your ever bullied someone?	

- #1 The youth likes school and has minimal problems.
- #2 The youth has some trouble in school socially.
- #3 The youth has some trouble in school academically.
- #4 The youth has some trouble in school both socially and academically.
- #5 The youth has frequently been in trouble at school, hates the teacher, doesn't like the classes, etc.

2. How does this youth get along with the others in the neighborhood?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
Do you have any friends in the neighborhood that you hang-out with?	
What do you like to do with your friend(s)?	
Do you get along with most of your friends?	
Do you ever get picked on by the kids in the neighborhood?	
Do you have as many friends as you want?	

Continue to Next Page

Do you think your friends are a bad influence on you?	
Do you want to be alone or with other kids?	
Have you ever stolen or shoplifted?	
<u>Have you ever used drugs, alcohol, or inhalants?</u>	<u>Alcohol:</u> <u>Drugs:</u> <u>Inhalants:</u> <u>Other:</u>

- #1 The youth has friends in the neighborhood.
- #2 The youth gets into fights frequently in the neighborhood or has few friends. The youth may get picked on by others.
- #3 The youth is involved in a gang.
- #4 The youth is “hanging out” with other youths involved in delinquent or criminal activity.
- #5 The youth is involved with a gang and is “hanging out” with other youths involved in delinquent or criminal activity

3. What was set on fire? Was there anything significant about the object?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
Tell me about what was burned?	
Have you ever burned this/these item(s) before?	
Whose stuff did you burn?	
What other types of things have you burned?	
Tell me about the fire - I wonder why you wanted to burn?	

- #1 The object burned had little emotional significance for the youth. (i.e. paper, leaves or trash)
- #2 The object that was burned had some emotional significance for the youth (i.e. Plastic army figures, other person’s possessions)
- #3 For an adolescent, the object may not have any significance but may be an act of vandalism.
- #4 The object that was burned had emotional significance for the youth or someone else (i.e. sibling’s crib or favorite toy, a parent’s, or caregiver’s possession)

4. Where was the fire set? Was there any significance to the location of the fire?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
Where did the fire start?	
If at home, what room were you in, or were you outside?	
If not at home, do you go to this place often?	
Do you like being there?	
What was used to light the fire?	

- #1 The fire was started in a place where the youth plays such as his/her bedroom, a closet, a fort, a hiding place.
- #2 The fire was started in a place with community significance i.e. church, a school, a park, in the forest.
- #3 The fire was set in a building occupied with people with the intent to place people at-risk.

5. How much planning was done prior to the fire?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
When did you first think of setting the fire?	
Tell me what you were doing right before the fire?	
What was used to light the fire?	
Where did it come from?	
Where did you get the things that were burned?	
What was your plan in setting the fire?	
Did you drink or take any drugs before, during, or after the fire?	

- #1 The fire was started using available materials; the act of fire-setting was spontaneous and done without planning. Matches and lighters were readily available.
- #2 There was some pre-planning for the fire and some gathering of materials; however, the fire was not especially thought out.
- #3 There was definite planning for the fire, materials were sought out, and matches and lighters were stashed and/or hidden at the site beforehand. Accelerants may have been used.

6. Who was with the youth at the time of fire?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
Was anyone with you when the fire(s) started? Who?	
Whose idea was it to start the fire(s)?	
Did the person with you do anything as the fire started burning?	
What did they say about the fire?	

- #1 The youth was with many peers/siblings when the fire was set.
- #2 The youth was with other peers/siblings and this youth might have instigated the fire.
- #3 The youth was alone when the fire was set.

7. What was the youth's response to the fire?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
What was the first thing you did when the fire started to burn?	
What was the next thing you did? (Did the youth try to put out the fire, call for help, run away, do nothing?)	
Did you stay to watch the fire?	
Did you tell someone (an adult) about the fire? If so, who?	

- #1 The youth tried to extinguish the fire and called for help.
- #2 The youth engaged in match or lighter play.
- #3 The youth may have made some attempts to extinguish the fire, but called for help only after others discovered the fire.
- #4 The youth ignored the fire, did not call for help, may have stayed to watch, or may have left the fire scene.

8. How did the youth feel after the fire?

<i>Suggested question:</i>	<i>Reponses/Comments:</i>
Did the fire you started make you happy or make you laugh?	
Did you feel like you had done something bad or did the fire scare you?	
What did your (parents/caregivers/principal/dad/mom) say to you about the fire?	
Was anyone angry with you about the fire?	
Do you care about what others think of you for having started a fire?	
Did you think you would be in trouble?	

- #1 The youth showed remorse for the fire.
- #2 The youth showed interest in how others reacted.
- #3 The youth is unconcerned about others' reactions or is pleased with the fire.

9. A) Was the youth supervised when the fire occurred at home? (For fires outside the home – see #10 below)

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
Was anybody at home at the time?	
When you were playing around with the matches and lighters, where was mom or dad/guardian?	
Who was taking care of you?	

- #1 Parents or caregivers were home at the time of the fire incident.
- #2 Parents or caregivers were home but unavailable (i.e. sleeping, watching TV, not being attentive).
- #3 Youth was left alone or with younger children.

10. B) Was the youth supervised when the fire occurred outside of the home?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
Was anybody supervising you at the time?	
When you were playing around with the matches and lighters, where was mom / dad / the guardian?	
Who was taking care of you?	

- #1 The youth was under appropriate adult supervision (i.e. school, church, neighbor’s home, babysitter).
- #2 The youth was NOT directly supervised at the time of the fire (i.e. at recess, in bathroom, at the park).
- #3 Youth was left alone or with younger children.

11. How knowledgeable is the youth about fire? How much does the youth understand about the dangers of fire? Does the youth use fire for power or control?

<i>Suggested question:</i>	<i>Reponses/Comments:</i>
What happened? (Review step-by-step events that led up to fire/fire play. Use reverse side if necessary)	
What do you think made you want to start the fire or fire play? <ul style="list-style-type: none"> - express anger - destroy something - see it burn - hurt self - bored - hurt others - show power or control - get attention - reaction to stress - peer pressure - rebellion/was told not to so - didn't want to (accident or curiosity) - don't know 	
What did you want to have happen when you started the fire?	
Do you feel you can control the fire you start?	
How can you control it?	
Did you think your fire could get out of control and get really big?	
Can you determine how big the fire will get?	

- #1 The youth is knowledgeable about some aspects of fire survival but is unaware of the destructiveness or speed of fire.
- #2 The youth may indicate some concern about the dangers and risk of fire-setting but thinks he can control it.
- #3 The youth does have an understanding of fire and uses it to defy authority, to gain status or attention, to express anger or for revenge.

12. Has the family experienced any kind of crisis in the past six months?

<i>Suggested question:</i>	<i>Reponses/Comments:</i>
Tell me about home.	
Do you like being at home?	
Is there anything about home you don't like?	
Is there anything different at home lately?	
Has anything happened at home in the last six months that upset you?	
Has there been an ongoing (chronic) crisis/problem in your life or in the family?	

- #1 There has been no major crisis in the family in the last six months.
- #2 There have been some changes in the family structure in the last six months, i.e. divorce, death, moving, death of a pet, etc.
- #3 The family is in a state of crisis or chaos.

13. Does the youth have a fire history?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
Tell me about the fires that you started or your fire play before this one. [Use a common time frame (e.g., Christmas, school starting, etc.) to help the child describe when fires were started or fire play occurred.]	
<u>How old were you when you first engaged in fire play or set your first fire?</u>	
<u>How about fireworks? If yes, what explosives did you use?</u>	<i>Firecrackers:</i> <i>Other fireworks:</i> <i>M-80s:</i> <i>Dynamite:</i> <i>Home-made explosives:</i> <i>Chemical explosives:</i> <i>Other:</i>
Have you ever altered fireworks?	
Do you dream about fires at night?	
Do you think about or daydream about fires in the day?	
Do you like to look at fire for long periods of time?	
<u>What word best describes the juvenile's level of interest in fire?</u>	<i>None</i> <i>Curiosity</i> <i>Fascination with fire in real life</i> <i>Fascination with fire in the media (e.g., video games, movies, television, computers, etc.)</i>

FIRE HISTORY (Use reverse side if necessary)

<u>Date of Fire/ Time of Fire</u>	<u>What Set (including # of structures)</u>	<u>Where Set</u>	<u>With Whom</u>	<u>Ignition Source</u>	<u>Accelerant</u>	<u>FD Response</u>

- #1 This is the first known incidence of fire play or fire-setting
- #2 The youth admitted to setting from 2-5 fires or played with matches/lighters.
- #3 The youth started more than 5 unsupervised or inappropriate fires. One or more of the fires resulted in property damage or injury.

14. How concerned was the youth for accepting responsibility for the fire?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
<u>When you were asked about the fire, did you deny that you set the fire, deny at first then admit it or admit that you set the fire from the beginning?</u>	<u>Denial:</u> <u>Denial, then acceptance:</u> <u>Regret (wishes fire had not been set):</u> <u>Remorse (feels bad for setting fire):</u> <u>Other:</u>
Now the fire is out and you have had a chance to think about what has happened would you do it again?	
Tell me your reasons for setting the fires?	

- #1 The youth acknowledges the seriousness of the fire-setting and accepts help appropriately.
- #2 The youth acknowledges the seriousness of the fire-setting but seeks to blame others and denies his/her responsibility.
- #3 The youth denies the seriousness of the fire-setting and his/her own responsibility for it or takes full responsibility for it because he/she intended to cause destruction or injury.

15. Was the youth ever been burned?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
Have you ever been hurt by fire?	
Tell me what happened?	
Where did it happen?	
Who was involved?	

- #1 The youth has never been burned.
- #2 The youth has been burned unintentionally.
- #3 The youth has been burned by another person, may have scars from this burn.

PARENT'S CHECKLIST

Case #: _____

Please check if any of the following statements are true for your son or daughter

Yes	No	Some-times	<i>Statements /Questions</i>
			My son or daughter set more than one fire or played with matches more than once.
			My son or daughter has set fires outside of the home before.
			Other people in the home have set fires.
			My son or daughter is fascinated with fire (for example, often stares at flames).
			My son or daughter has misused or altered fireworks.
			My son or daughter has easy access to matches and/or lighters.
			My son or daughter daydreams or talks about fires.
			My son or daughter is proud or boastful about the fire he/she started.
			My son or daughter expressed concern about the fire getting out of control.
			There is a fireplace, wood stove, and/or candles or incense frequently in use in our home.
			There are smokers living in my son's or daughter's home
			My son or daughter fights with their brothers and/or sisters.
			My son or daughter argues with parents/caregivers.
			My son or daughter has witnessed their parents arguing.
			My son or daughter spends as much time as he/she would like with father/male caregiver.
			My son/daughter spends as much time as he/she would like with mother/female caregiver.
			There was a traumatic experience in my child's life or family in the last year.
			There was physical or sexual abuse in the family.
			The family moves frequently.
			My son or daughter has special education needs.
			My son or daughter has been suspended/expelled from school, the school bus or youth organization.
			My son or daughter has few friends.

Continue to next page

			My son or daughter is often picked on by others.
			My son or daughter has friends who are a bad influence.
			My son or daughter has a history of lying.
			My son or daughter has stolen/shoplifted.
			My son or daughter destroys his/her own possessions.
			My son or daughter was or is now in counseling.
			My son or daughter is physically aggressive or hurts others.
			My son or daughter is physically aggressive or injured an animal.
			My son or daughter is verbally aggressive towards others.
			My son or daughter expresses anger by hurting self or something he/she likes.
			My son or daughter uses drugs or alcohol.
			I feel like I have no control over my son or daughter.
			My son or daughter has nightmares.
			My son or daughter has unusual fantasies (e.g. destructive ideas, sexual ideas, spiritual ideas, etc.).
			My son or daughter is out of touch with reality and sees or hears things that are not there.
			My son or daughter has trouble staying focused on one topic at a time (may skip around from topic to topic).
			My son or daughter experiences serious sadness or withdrawal (including sadness, crying, guilt feelings and a sense of hopelessness).
			My son or daughter has either threatened or attempted to hurt self.
			My son or daughter was/is in a cult or a gang.
			My son or daughter was enrolled in or has completed a firesetter program.

PARENT INTERVIEW

Case #: _____

1. What was the parent or caregiver's response to the fire?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
What was your reaction to the fire?	
<u>How much fire damage occurred from the fire (estimate)?</u>	<u>Less than \$500.00</u> <u>Between \$501.00 - \$5000.00</u> <u>Between \$5001.00 - \$20,000.00</u> <u>Over \$20,001.00</u>

- #1 The reaction of the fire was an immediate and appropriate response, with concern for any victims.
- #2 The reaction of the parents to the fire was one that appears too lax or too punitive.
- #3 The reaction of the parents to the fire was either nonexistent or was an immediate and overly punitive response (such as burning of the youth's hands).

2. Is there a family history of fire?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
Did anybody else in the family play with fire or get burned from a fire that got out of control?	
Have you ever had a house fire or a fire in your home?	

- #1 There is no traceable history of fire in the family. There are no parents, siblings, or close relatives who are/were firefighters, who were burned in a fire, lost their home in a fire or were firesetters.
- #2 There is some fire history in the family that the youth has or may have heard about.
- #3 There is a fire history about which the youth has direct knowledge.

3. Does the youth have a history of fire play or fire-setting?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
<u>Regarding the fire that led to the referral, was anyone injured in the fire?</u>	<u>Self</u> <u>Family member</u> <u>Fire Service</u> <u>Other</u> <u>None</u>
<u>Regarding the fire that led to the referral, if any one was injured, what was the extent of the injury?</u>	<u>Injured party missed school or work due to injury</u> <u>Injury required doctor's care</u> <u>Injury required Emergency Room care</u> <u>Injury required admission to the hospital</u> <u>Death</u>
<u>How old was your child when he or she first engaged in fire play or set first fire?</u>	
<u>Has your child used or altered explosives? If yes, what explosives were used? (cont. next page)</u>	<u>Firecrackers</u> <u>Other fireworks</u>

	<u>M-80s</u> <u>Dynamite</u> <u>Home-made explosives</u> <u>Chemical explosives</u> <u>Other</u>
Do you know if the juvenile ever threatened anybody with fire?	
Was the juvenile ever hurt by fire?	

FIRE HISTORY

<u>Date of Fire/ Time of Fire</u>	<u>What Set (including # of structures)</u>	<u>Where Set</u>	<u>With Whom</u>	<u>Ignition Source</u>	<u>Accelerant</u>	<u>FD Response</u>

- #1 This is the first known incidence of fireplay for the youth.
- #2 The youth has a sporadic history of fireplay. There was little or no damage from previous fireplay.
- #3 The youth has a history of chronic fireplay and/or has set at least on fire with serious consequences.

4. What kind of modeling is going on in the home? How did the parents/caregivers teach their youth about fire? What kinds of fire safety practices occur in the home? Are there any cultural or traditional ways the family uses fire?

<u>Suggested question:</u>	<u>Reponses/Comments:</u>
<u>Do you have working smoke detectors in your home?</u>	
<u>Do you have working fire extinguishers?</u>	
Do you have candles or a woodstove?	
Are there smokers in the home?	
How do you store matches and lighters?	
How does your family use fire?	
How did you teach your child about fire?	

- #1 Appropriate fire safety is observed in the home. Smoke detectors work, woodstoves are safely installed. Parents, siblings, or other family members avoid modeling fire play.
(Continue on next page)

- #2 There is modeling of fire play at home and fire safety is only moderately observed by parents and siblings.
- #3 Family members have used fire inappropriately. The youth's home is not fire safe.

5. How is the youth supervised?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
When you are not at home, who takes care of the child?	
Do you believe that you have adequate influence and control over your child?	
What were you doing when the fire occurred?	

- #1 The youth has good, continual parental and/or caregiver supervision.
- #2 The youth has some supervision, but the supervision is often sporadic.
- #3 The youth has minimal supervision.

6. Does the youth have any problems in school?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
Is your child in the age appropriate grade?	
<u>Is your child in a special classroom of any kind? If yes, what kind?</u>	
Does your child have any learning problems, i.e. school referral for problem behaviors, trouble paying attention or being impulsive?	
<u>Have there been any discipline problems at school within the last year?</u>	

- #1 The youth has minimal problems in school.
- #2 The youth gets some school referrals.
- #3 The youth receives special education services.
- #4 The youth has been suspended or expelled from school.

7. Has the youth ever been in counseling?

Suggested questions:	<i>Reponses/Comments:</i>
Has your child ever seen the school counselor or other mental health provider for problems?	
<u>Is your child currently in counseling of any kind?</u> <u>If so, what kind?</u>	
<u>Has your child been diagnosed with:</u>	<u>ADHD</u> <u>Oppositional Defiant Disorder (ODD)</u> <u>Depression</u> <u>Conduct Disorder</u> <u>Bipolar Disorder</u> <u>Other</u> <u>None</u>
<u>Is your child currently taking medications?</u> <u>If so, what medications and dosages are prescribed (ask to see the medication vials)?</u>	
<u>Does your child frequently say no when he/she is asked to do something?</u> <u>If so, what happens?</u> <u>(Task Demand)</u>	
<u>Does your child frequently become upset when he/she is not permitted to do something he/she desires?</u> <u>If so, what happens?</u> <u>(Limited Access)</u>	
Has your child been in trouble outside of school for non-fire related behaviors?	
<u>Has your child ever been arrested for a</u>	<u>Fire related offense?</u> <u>Non-fire related offense?</u>
<u>Has your child ever been adjudicated / found guilty of a</u>	<u>Crime against people?</u> <u>Crime against property?</u> <u>Sexual offense?</u>
<u>Has your child been physically aggressive or injured animals?</u>	

What word best describes your child's interest in fire?	<u>Curiosity</u> <u>Fascination with fire in real life</u> <u>Fascination with fire in the media (e.g. video games, movies, television, computers, etc.)</u>
<u>Has your child ever used drugs / alcohol / inhalants?</u>	<u>Alcohol</u> <u>Drugs</u> <u>Inhalants</u> <u>Other</u>
Has your child ever beat up or hurt others?	
Has your child ever stolen or shoplifted?	
Has your child ever lied excessively?	

- #1 The youth has never been in counseling.
 #2 The youth has been in counseling in the past.
 #3 The youth is currently or has been referred for counseling.

8. How would you describe your youth's friends?

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
Does your child frequently play/stay alone rather than with other children?	
Do you like your child's friends?	
Are they a positive influence?	
Does your child get into fights frequently?	
Does your child interact normally with peers?	
Does your child frequently get picked on by other children?	

- #1 The youth has a healthy, supportive peer group.
 #2 The youth has some peer support, but his/her behavior is influenced by peers (bad friends).
 #3 The youth has little or no peer support, is shunned by peers and is isolated and withdrawn.

9. Has any kind of crisis or traumatic event happened in your family in the past 1 or 2 years? Please describe.

<i>Suggested questions:</i>	<i>Reponses/Comments:</i>
Has there been an ongoing (chronic) crisis/problem in or child's life or in the family?	
Is there a history of emotional abuse in the family?	Who: By whom:
Is there a history of physical abuse in the family?	Who/By Whom:

Cont. of Question 9

Is there a history of sexual abuse in the family?	Who By Whom:
Is there a history of neglect in the family?	Who: By Whom:

- #1 There has not been a traumatic family experience in the past year.
- #2 There has been a major traumatic family experience in the past year.
- #3 There has been a major traumatic family event in the past that may be influencing the youth's behavior.

10. Would you be willing to seek additional help for your child, such as counseling if necessary?

<u>Are parent(s)/guardian(s) willing to seek additional help for the juvenile and or family?</u>	<u>Sees problem and wants help</u> <u>Willing to get help</u> <u>Denial of need for assistance</u> <u>Justifies child's behavior</u> <u>Hostile towards potential help</u>
--	--

- #1 The youth's family acknowledges the seriousness of the fire-setting and seeks help appropriately.
- #2 The family protects the child, seeks to blame others and denies their own and the child's responsibility for the fire.
- #3 The family doesn't seem to take the behavior seriously and simply wants the fire department to "fix" the youth and/or doesn't see the need for other services. They may even refuse services

Pennsylvania Child and Parent Juvenile Firesetter Assessment Tool

HOME FIRE SAFETY CHECK

Questions About Smoke Detectors	Yes	No
Does the family have sufficient working smoke detectors?		
If no, answer the following questions:		
What is the overall functioning of the smoke detectors?		
Do the smoke detectors need batteries?		
How many smoke detectors are needed?		
Where should the needed smoke detectors be installed?		
What is the plan for obtaining and installing the smoke detector(s)?		
Questions About Fire Extinguishers	Yes	No
Does the family have fire extinguishers?		
If yes, answer the following questions:		
Where are the fire extinguishers located?		
What is their overall condition?		
Do individuals in the home know how to properly use the extinguisher?		
If no, answer the following questions:		
How many fire extinguishers are needed?		
Where should they be stored?		
What is the plan for obtaining the needed fire extinguishers?		
Do individuals in the home know when and how to use fire extinguishers?		
Questions About Escape Plans	Yes	No
Does the family have an established escape plan		
If the family does not have a practiced escape plan encourage them to develop one.		
Are the family's means of egress blocked by clutter?		
If exits are blocked by clutter, furniture, etc., encourage the family to remove the items which are blocking the exits.		
Does the family have escape ladders for the second floor?		
If no, discuss the need for adequate escape routes and answer the following questions:		

JUVENILE FIRESETTER ASSESSMENT TOOL

SCORING AND REPORT WRITING

As previously stated, the Pennsylvania Child and Parent Juvenile Firesetter Assessment Tool is not intended to be a stand-alone screening of juvenile firesetters. It is designed for use in conjunction with other pertinent sources of information regarding the juvenile and the family in addition to the MDT process.

SCORING:

Add the face value of the checked responses for both the youth and the parent interview. Generally, the higher the score the more significant the fire-setting issue. Enter the total for the youth interview and the parent interview on the lines provided in the report.

The parent checklist is not scored but should be summarized in the Screening Report by the assessor team.

It is important to note the assessor team should consider if Questions 4, 11 and/or 13 are answered with a # 3 response, suggesting the juvenile may need to be referred for a crisis mental health evaluation.

REPORT WRITING:

As the assessor team reviews the information gathered from the screening and other information sources, it remains important not to confuse the juvenile's motivations for fire-setting with more significant fire-setting concerns. They are not the same. However, both are important factors in assessing fire-setting. The assessor team should consider motivation when reviewing information gathered during interviews and from the parent questionnaire, other sources of information, as well as the following indicators of more significant fire-setting concerns:

1. a heightened level of family stress or transition;
2. a strong relationship to fire (i.e. the juvenile has set numerous fires);
3. a high level of general delinquency or conduct disorder;
4. a high level of impulsivity including ADD or ADHD;
5. a high probability important triggers regarding the juvenile's fire-setting behavior will reoccur in the near future;
6. a history of fire events at multiple developmental stages.

In collaboration, the assessor team completes each section of the report. In the body of the report, a basic description is given to guide the assessor team in completing each section. **It is important that the assessor team NOT attempt to assign risk levels for future fire-setting activities.**

Pennsylvania Child and Parent Juvenile Firesetter Assessment Tool Report

PENNSYLVANIA CHILD AND PARENT JUVENILE FIRESETTER ASSESSMENT TOOL

FOLLOW-UP

To determine the effectiveness of any program, and to determine if additional intervention is required, follow-ups at specified intervals are essential. To obtain follow up information regarding the juvenile and follow through of MDT recommendations, it is recommended the parent or guardian be contacted by telephone at three (3), six (6), twelve (12) and twenty-four (24) months.

When contacting the parent or guardian remember that the juvenile's participation in the program is confidential. Therefore, when asking for the parent or guardian, or when leaving a message, do not identify the program name or the reason for the call. Simply leave the needed contact information. If a return call is not received, attempt to contact the parent or guardian again at a different time of day.

When contacting the parent or guardian of a juvenile who has completed the juvenile firesetter intervention program, the following process may be helpful:

1. Introduction of Contact:

- a. Introduce self and ask for the parent or guardian by name.
- b. When the parent or guardian is speaking make introductions, identify the program affiliation, and state the purpose of the call.

[For example, "Hello my name is (Your Name). I am from (Program Name). When (Juvenile's Name) was in the juvenile firesetter program we discussed that someone would be contacting you to see how (Juvenile's Name) is doing. Do you have a time for a few questions?"]

2. Survey:

- a. When the parent or guardian agrees to participate in the follow-up survey, record the answers on the appropriate form.
- b. If the parent has questions or concerns note them on the form.
- c. If a question or concern cannot be addressed at the time of the call, inform the parent or guardian someone from the program will contact them to answer the question(s).
- d. Relay any question and/or concern to the appropriate program staff.
- e. Those items that are *italicized and underlined* are items that are part of the data collection system and should be completed.
- f. **Be sure to thank the parent or guardian for their ongoing participation in the program.**

3. After recording the information gathered, enter the data into the data collection system.

4. The completed follow-up form should be placed in the juvenile's record.

PENNSYLVANIA CHILD AND PARENT JUVENILE FIRESETTER ASSESSMENT TOOL

THREE MONTHS FOLLOW-UP

Case#: _____

Name _____

Telephone #: _____

Person Conducting Follow-up: _____

Date: _____

Questions About Fire Safety Education	Yes	No
<i>Did the juvenile and his or her family attend Fire Safety Education?</i>		
<i>If yes, ask the following questions:</i>		# of sessions
<i>How many educational sessions did the juvenile attend?</i>		
<i>How many sessions did at least one parental figure attend?</i>		
Has the family checked their smoke detectors since the fire safety class?		
Has the family practiced escape drills since the fire safety class?		
Does the family keep lighters and matches locked away?		
Questions About Mental Health Services	Yes	No
<i>Were Mental Health Services recommended?</i>		
<i>If yes, what Mental Health Services were provided?</i>	<input type="checkbox"/> <i>In home (or school) (e.g. Therapeutic Support Services (TSS))</i> <input type="checkbox"/> <i>Individual therapy</i> <input type="checkbox"/> <i>Family therapy</i> <input type="checkbox"/> <i>Consultation with a psychiatrist for medication</i> <input type="checkbox"/> <i>Other:</i>	
Questions About Referrals	Yes	No
<i>Was a referral made to County Children and Youth Services?</i>		
<i>If yes, what services were provided?</i>		
<i>Did the MDT recommend legal action?</i>		
<i>If yes, what legal action was taken?</i>	<input type="checkbox"/> <i>Placed on probation</i> <input type="checkbox"/> <i>Sent to detention</i> <input type="checkbox"/> <i>Sent to Juvenile Justice System</i> <input type="checkbox"/> <i>Other:</i>	
Questions About Recidivism	Yes	No
<i>Has the juvenile played with matches, lighters or candles since attending the services?</i>		
<i>Has the juvenile been involved with any explosives since services were provided?</i>		
<i>Has the juvenile set another fire?</i>		
<i>Was the juvenile removed from their home environment due to their fire risk?</i>		

PENNSYLVANIA CHILD AND PARENT JUVENILE FIRESETTER ASSESSMENT TOOL

SIX MONTHS FOLLOW-UP

Case#: _____

Name _____ Telephone #: _____

Person Conducting Follow-up: _____ Date: _____

Questions About Fire Safety Education	Yes	No
<i>Did the juvenile and his or her family attend Fire Safety Education?</i>		
<i>If yes, ask the following questions:</i>		# of sessions
<i>How many educational sessions did the juvenile attend?</i>		
<i>How many sessions did at least one parental figure attend?</i>		
Has the family checked their smoke detectors since the fire safety class?		
Has the family practiced escape drills since the fire safety class?		
Does the family keep lighters and matches locked away?		
Questions About Mental Health Services	Yes	No
<i>Were Mental Health Services recommended?</i>		
<i>If yes, what Mental Health Services have been provided?</i>	<input type="checkbox"/> <i>In home (or school) (e.g. Therapeutic Support Services (TSS))</i> <input type="checkbox"/> <i>Individual therapy</i> <input type="checkbox"/> <i>Family therapy</i> <input type="checkbox"/> <i>Consultation with a psychiatrist for medication</i> <input type="checkbox"/> <i>Other:</i>	
Questions About Referrals	Yes	No
<i>Was a referral made to County Children and Youth Services?</i>		
<i>If yes, what services were provided?</i>		
<i>Did the MDT recommend legal action?</i>		
<i>If yes, what legal action was taken?</i>	<input type="checkbox"/> <i>Placed on probation</i> <input type="checkbox"/> <i>Sent to detention</i> <input type="checkbox"/> <i>Sent to Juvenile Justice System</i> <input type="checkbox"/> <i>Other:</i>	
Questions About Recidivism	Yes	No
<i>Has the juvenile played with matches, lighters, or candles since attending the services?</i>		
<i>Has the juvenile been involved with any explosives since services were provided?</i>		
<i>Has the juvenile set another fire?</i>		
<i>Was the juvenile removed from their home environment due to their fire risk?</i>		

PENNSYLVANIA CHILD AND PARENT JUVENILE FIRESETTER ASSESSMENT TOOL

TWELVE MONTHS FOLLOW-UP

Case#: _____

Name _____ Telephone #: _____

Person Conducting Follow-up: _____ Date: _____

Questions About Fire Safety Education	Yes	No
<i>Did the juvenile and his or her family attend Fire Safety Education?</i>		
<i>If yes, ask the following questions:</i>		# of sessions
<i>How many educational sessions did the juvenile attend?</i>		
<i>How many sessions did at least one parental figure attend?</i>		
Has the family checked their smoke detectors since the fire safety class?		
Has the family practiced escape drills since the fire safety class?		
Does the family keep lighters and matches locked away?		
Questions About Mental Health Services	Yes	No
<i>Were Mental Health Services recommended?</i>		
<i>If yes, what Mental Health Services have been provided?</i>	<input type="checkbox"/> <i>In home (or school) (e.g. Therapeutic Support Services (TSS))</i> <input type="checkbox"/> <i>Individual therapy</i> <input type="checkbox"/> <i>Family therapy</i> <input type="checkbox"/> <i>Consultation with a psychiatrist for medication</i> <input type="checkbox"/> <i>Other:</i>	
Questions About Referrals	Yes	No
<i>Was a referral made to County Children and Youth Services?</i>		
<i>If yes, what services were provided?</i>		
<i>Did the MDT recommend legal action?</i>		
<i>If yes, what legal action was taken?</i>	<input type="checkbox"/> <i>Placed on probation</i> <input type="checkbox"/> <i>Sent to detention</i> <input type="checkbox"/> <i>Sent to Juvenile Justice System</i> <input type="checkbox"/> <i>Other:</i>	
Questions About Recidivism	Yes	No
<i>Has the juvenile played with matches, lighters or candles since attending services?</i>		
<i>Has the juvenile been involved with any explosives since services were provided?</i>		
<i>Has the juvenile set another fire?</i>		
<i>Was the juvenile removed from their home environment due to their fire risk?</i>		

PENNSYLVANIA CHILD AND PARENT JUVENILE FIRESETTER ASSESSMENT TOOL

TWENTY-FOUR MONTHS FOLLOW-UP

Case#: _____

Name _____

Telephone #: _____

Person Conducting Follow-up: _____ Date: _____

Questions About Fire Safety Education	Yes	No
<i>Did the juvenile and his or her family attend Fire Safety Education?</i>		
<i>If yes, ask the following questions:</i>		# of sessions
<i>How many educational sessions did the juvenile attend?</i>		
<i>How many sessions did at least one parental figure attend?</i>		
Has the family checked their smoke detectors since the fire safety class?		
Has the family practiced escape drills since the fire safety class?		
Does the family keep lighters and matches locked away?		
Questions About Mental Health Services	Yes	No
<i>Were Mental Health Services recommended?</i>		
<i>If yes, what Mental Health Services have been provided?</i>	<input type="checkbox"/> <i>In home (or school) (e.g. Therapeutic Support Services (TSS))</i> <input type="checkbox"/> <i>Individual therapy</i> <input type="checkbox"/> <i>Family therapy</i> <input type="checkbox"/> <i>Consultation with a psychiatrist for medication</i> <input type="checkbox"/> <i>Other:</i>	
Questions About Referrals	Yes	No
<i>Was a referral made to County Children and Youth Services?</i>		
<i>If yes, what services were provided?</i>		
<i>Did the MDT recommend legal action?</i>		
<i>If yes, what legal action was taken?</i>	<input type="checkbox"/> <i>Placed on probation</i> <input type="checkbox"/> <i>Sent to detention</i> <input type="checkbox"/> <i>Sent to Juvenile Justice System</i> <input type="checkbox"/> <i>Other:</i>	
Questions About Recidivism	Yes	No
<i>Has the juvenile played with matches, lighters, or candles since attending services?</i>		
<i>Has the juvenile been involved with any explosives since services were provided?</i>		
<i>Has the juvenile set another fire?</i>		
<i>Was the juvenile removed from their home environment due to their fire risk?</i>		

Notes:

APPENDIX B

PA State Protocol

Pennsylvania

Juvenile Firesetter Intervention

Protocol



Pennsylvania Juvenile Firesetter Intervention Advisory Group



Revised: 2 December 2008

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STATEMENT OF PURPOSE

This Protocol is designed as a resource and guide to assist communities and regional organizations in creating, operating, and managing effective Juvenile Firesetter Intervention programs. The protocol is divided into eight major divisions considered essential for creating and sustaining a successful program. These divisions are:

1. Division One -- Juvenile Firesetters and their Families
2. Division Two -- Identification and Screening
3. Division Three -- Juvenile and Family Interview
4. Division Four -- Program Components and Intervention
5. Division Five -- The Optimal Community / Regional Network
6. Division Six -- Program Operations and Management
7. Division Seven -- Program Educational Component
8. Division Eight -- Regional/Local Program Components

Individuals engaged in the prevention and mitigation of youth-set fires must understand the personality profiles of juvenile firesetters and their families. This understanding leads to identifying at-risk children and youth for intervention practices. Once a juvenile firesetter is identified, they are referred to an intervention program where the process of helping to correct the problem behavior(s) begins. Following the referral, the child is screened and a report generated. The results of that screening and subsequent report are reviewed by a Multi-Disciplinary Team (MDT) who provide specific direction toward appropriate interventions. A juvenile fire-setting intervention program must be part of a community or regionally based network offering a continuum of care designed to provide a range of intervention services including prevention, education, immediate treatment, and graduated sanctions to juveniles and their families. The *Pennsylvania Intervention Protocol for the Prevention and Mitigation of Juvenile Fire-setting* offers a specific set of programmatic tasks ensuring swift delivery of effective intervention(s) to address this at-risk population and their families.

Community and regional juvenile firesetter intervention programs must be diverse in composition and include multiple disciplines that continually have contact with juveniles. These disciplines include: public and private school systems, fire service professionals, mental health professionals, school social workers and counselors, children and youth social service workers, juvenile justice probation officers, law enforcement personnel, and other like team members. All these professionals should be part of the planned and coordinated effort to reduce child set fires. This protocol is designed to provide those who seek to establish a juvenile fire-setting program in their area with the necessary tools to accomplish that goal.

GOALS AND OBJECTIVES

- To educate the public regarding the dangers of children and fire.
- To provide fire safety/science/prevention education to families participating in the program.
- To see that needed psychological services are provided to individuals and families in the program.
- To develop and maintain a network of inter-agency cooperation, jointly addressing the problem, and relieving the risk associated with juvenile fire-setting behavior.

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FOREWARD

The occurrence of juvenile set fires is both pervasive and an incredibly destructive event. Each year, fires set by juveniles account for a large percentage of injuries, property damage, and deaths in the United States. According to the National Fire Protection Association (NFPA), children “playing” with fire start 100,000 fires that are reported to fire departments annually. On a yearly basis, fires set by juveniles cause an estimated 350 deaths and 3,500 injuries. The cost of providing protection from these fires and the property loss attributed to juvenile fire setters easily exceeds \$300 million annually. And it is a fact that more than 50% of persons arrested for the crime of arson are under the age of 18 years while a far greater number of juvenile fire-setting behaviors never attain that status of criminal arson.

For clarification, the term firesetter is used to identify any child, youth, or adolescent who: engages in the act of burning/melting anything, regardless of its value and regardless of their intent, or who; plays with fire for any given reason. There are only two types of fires started by juveniles, intentional and accidental. Children’s interest in fire is almost universal and there is a tendency to dismiss fire play of children under the adage that “kids will be kids.” As a result, families, law enforcement administrators, fire service officials, and other professional agencies are often reluctant to take a proactive position. Studies show that a large portion of those children who engage in fire play are acting on motives other than simple curiosity as is often suspected with children who play with fire. Additionally, statistics demonstrate that child fire play can be a deadly and costly activity, that it is in fact, the leading cause of fire deaths among preschoolers. The juvenile fire-setting problem encompasses the realm of many juvenile related professional and technical disciplines and is a statewide problem that must be addressed by programs involving those disciplines. Such disciplines may include agencies and individuals trained and experienced in dealing with the myriad of psychological, social and legal aspects associated with these children and youth.

The prevalence of juvenile-set fires warrants serious consideration. It is this consideration that was the driving force for the Pennsylvania State Fire Commissioner’s Office, in 2001 to recruit and empower the *Pennsylvania Child - Fire-setting and Juvenile Arson Task Force* to address the problem. The Task Force was charged with the responsibility of establishing intervention efforts to address the problem associated with juvenile fire-setting within the Commonwealth of Pennsylvania, and in developing and implementing statewide juvenile firesetter intervention programs. Task Force members were carefully selected based on their knowledge, experience and interest in the subject and represent the disciplines needed to successfully deal with the problem of children setting fires.

In 2006 the *Task Force*, having accomplished all their charges, transitioned into the *Pennsylvania State Juvenile Firesetter Intervention Advisory Group*. The *Group*, composed of some original *Task Force* members as well as newly recruited professionals is now the state “brain trust” and administers juvenile firesetter intervention activities at the state level.

Ed Mann
Pennsylvania State Fire Commissioner

July 2004 / July 2007

PENNSYLVANIA CHILD FIRESETTER AND JUVENILE ARSON TASK FORCE (2001)

- Paul Reichenbach, Public Education/Information Specialist and Chairperson
Office of the State Fire Commissioner
- Mary Brady, Program Director
Enhanced Children Program Community Services Group
- Dan Dillard, Executive Director
Burn Prevention Foundation
- Alan Feldberg, Ph.D. Psychologist
Cornell Abraxas Youth Center
- Randy Isenberg, Fire Marshal
Altoona Fire Department
- Larry Johnson, Chief Fire Inspector
City of Erie Fire Department
- Edmund Knight, Arson Investigator
Robson Lapina Forensic Engineers, Fire Investigators
- David J. Kolko, Professor of Psychiatry, Psychology, & Pediatrics
University of Pittsburgh School of Medicine
- John Lawson, Corporal
Pennsylvania State Police Fire Marshal Unit
- Andrew Mount, Fire Marshal
Plymouth Township
- Jerry Poland, Deputy Fire Marshal
Adams County
- Nicholas Rafferty, Assistant Fire Marshal
Bucks County Department of Fire Marshal
- Kathy Ray, Director, Prevention Education
Burn Prevention Foundation
- Russell Smith, Fire Chief
City of Erie Fire Department
- Daniel Soulier, Deputy Chief
Harrisburg Bureau of Fire
- Timothy L. Shatto, C.F.E.I.
Kufta Associates, Ltd.
- Dian L. William, President
Center for Arson Research

REGIONAL CONCEPT FOR JUVENILE FIRESETTER INTERVENTION PROGRAMS

STATEWIDE REGIONAL PROGRAM DEVELOPMENT

The statewide regional concept is based on the premise that numerous community-based programs across the Commonwealth would be cost prohibitive and an unnecessary duplication of effort. Regionally based programs would better serve the individual communities throughout the state to address the juvenile fire-setting problems. A region is defined as a combination of population, geography, and socio-economic demographics. Juvenile-related agencies and professionals within a delineated region must be sought and encouraged to work within the program and to execute the principles applied to intervention strategies. A special emphasis would be placed on developing programs to learn how to interview, screen, evaluate and apply the appropriate interventions through the multi-disciplinary team concept.

REGIONAL STRATEGY

To promote a statewide program with the goals and objectives outlined in this protocol, a cadre of experienced and trained personnel should be recruited for each established region. These persons should receive training recommended in the protocol developed by the *Pennsylvania Child Fire-setting and Juvenile Arson Task Force*. Training these individuals enables them to develop, implement, and maintain a juvenile firesetter intervention program within their regions utilizing the state's protocol. Data collected by a regional program would be forwarded to the Office of the State Fire Commissioner for compiling, analysis, and submittal to national data collection agencies. The data collected would be used to improve, expand, and revise regional programs to ensure statewide success.

MISSION STATEMENT

To address the problem of juvenile fire-setting behavior(s) within the Commonwealth of Pennsylvania and to reduce the risk of fire-related loss of life, personal injury, and property destruction. The goals and objectives of the statewide program will be accomplished through interventions including fire safety / science / prevention education and professional mental health counseling, and by working cooperatively with those agencies and individuals serving the juvenile population.

REFERENCES

This Protocol was derived from information and material widely circulated within the arena focused on the problem of juvenile fire-setting in our society. Some information may reflect those agencies listed below as they relate to this topic and can be utilized as a sound resource and reference in managing Juvenile Firesetter Intervention programs.

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Special Report. *A review of teen fire-setting and interventions*, FEMA, USFA
Technical Report Series, Report 095 of the Major Fires Investigation Project
- **FIRE PROFESSIONALS AIDING CHILDREN ~ BUCKS COUNTY FIRE P-A-C**
A Juvenile Firesetter Intervention Program
Nicholas E. Rafferty, CFI, Assistant Fire Marshal
Director, Bucks County FIRE P-A-C Program
Buck County Fire Marshall's Office
- **CHILDREN AND FIRE**
Massachusetts Coalition for Juvenile Firesetter Programs, 2000 Report
- **EXECUTIVE SUMMARY**
The National Juvenile Firesetter/Arson Control and Prevention Program, November 1993
FEMA, USFA, FA-148/June 1994
- **FIRE SERVICE GUIDE TO A JUVENILE FIRESETTER EARLY INTERVENTION PROGRAM**
The National Juvenile Firesetter/Arson Control and Prevention Program, November 1993
FEMA, USFA, FA-146/June 1994
- **GUIDELINES FOR IMPLEMENTATION**
The National Juvenile Firesetter/Arson Control and Prevention Program, November 1993
FEMA, USFA, FA-147/June 1994
- **HANDBOOK ON FIRESETTING IN CHILDREN AND YOUTH**
Edited by David J. Kolko
University of Pittsburgh School of Medicine
Western Psychiatric Institute and Clinic
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- **JUVENILE FIRESETTER INTERVENTION RESEARCH PROJECT: FINAL REPORT, 03/30/2001, Phase I**
National Association of State Fire Marshals (NASFM)
A semi-annual report submitted to the Department of Justice's Office of Juvenile Justice and Delinquency Prevention. July 2000
- **JUVENILE FIRESETTER INTERVENTION HANDBOOK**
FEMA, USFA, FA-210/June 2002
- **MASSACHUSETTS COALITION FOR JUVENILE FIRESETTER INTERVENTION PROGRAMS**
Irene Pinsonneault, Coordinator
P.O. Box 416
Westport, MA 02791
- **OREGON OFFICE OF STATE FIRE MARSHAL**
Oregon Department of State Police
Juvenile Firesetter Intervention Unit
4760 Portland Road NE
Salem, Oregon 97305-1760

- PARENT GUIDE (2001)
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Corporate Communications, Publication Section
City of Phoenix, Arizona Fire Department

DIVISION ONE: JUVENILE FIRESETTERS AND THEIR FAMILIES

FIRE BEHAVIOR

Juvenile fire-setting behavior is a growing and largely untreated problem in our nation today. The act of fire play, as a fire behavior, may seem non-threatening but can create havoc and produce devastation in seconds. The beginning of this dangerous behavior may be viewed in numerous ways including playing with lighters, matches, BBQ lighters, BBQ -grills, stoves, and the burning of candles, paper, or brush. Young people, at times, may also express a strong interest in fire given the portrayals seen in movies and the repetitious talking about fire. Fire-setting is both a learned and progressive behavior that commonly does not go away on its own. It is often hidden from the parent's view and yet may be a "cry for help" for underlying problems. Fire-setting behavior is often found to continue and worsen in time if not appropriately addressed.

There remains considerable debate as to whether fire behavior generally follows a natural developmental sequence in children and as to whether there are specific subtypes of child/youth firesetters. Although no clear-cut profiles or subtypes based on research exists, professionals working with this population often described several important characteristics (some of which are described below) to consider in an evaluation which may help to identify an appropriate intervention for a particular child or youth. These characteristics can be influenced by other psychological and social factors which can cause a certain percentage of children to become involved in fire risk behavior or to continue engaging in the behavior.

This Protocol offers a few general ideas about the types of children who present fire-setting behavior(s) and their key characteristics. To better identify and understand the progressive nature of these behaviors, the Pennsylvania State Fire Commissioner's *Child Fire-setting and Juvenile Arson Task Force* (now the *PA JFS Intervention Advisory Group*) acknowledges three general subgroups of firesetters:

- 1) Incipient / Curiosity Fireplay
- 2) Troubled Fire-use / Burning
- 3) Delinquent / Severely Troubled Fire-setting.

These activity types or levels may, at times, represent a chronological and increasing development in the child's involvement with fire, although a child's fire-setting may not necessarily have progressed in this fashion. It seems important to understand the social and psychological factors such as emotional disorders, family dysfunction, and chronic stressors that influence fire behavior and can lead to progressive unsupervised fire starting, and repeated, intentional, and malicious fire-setting.

INCIPIENT /CURIOSITY FIREPLAY

According to the United States Fire Administration (USFA), some children may experience fire curiosity between the ages of three and five; however, it is not limited to this age-range alone. This interest can be expressed in many ways. Children may question the physical properties of fire such as how hot a fire is or what makes a fire burn. This interest is seen as a natural curiosity in the development of a child.

Unfortunately, most of these children engage in at least one unsupervised fire motivated by curiosity. Fires resulting from these incidents are often accidental or unintentional and generally not a significant fire event. Young children will often attempt to put these fires out or go for help but may also hide or run away.

Incipient/Curiosity fireplay in the form of curiosity and experimentation is perhaps the most common motive of children involved in unsupervised fire starting. If these children are identified and evaluated at an early age, and receive proper supervision and educational intervention, there should be little concern for future fire incidents and continued fire-setting behavior. At the same time, some young children may exhibit more serious psychological problems or be exposed to stressful circumstances that increase their likelihood of using fire repeatedly. Such children may therefore require additional clinical assessment and intervention.

TROUBLED FIRE-USE /BURNING

Fire-use/burning can occur when children experiment with ignition sources such as matches and lighters. Young boys of school age may experiment at least once with fire, although some children and even adolescents may go beyond experimentation to include their use of fire attributed to other motives. Consider the influence of today's electronic age wherein children are exposed to vast amounts of information regarding the negative aspects of fire. Those aspects as seen on TV, commercials and movies can portray detrimental meanings that include power, control, revenge, and rage, as well as inappropriate problem solving.

Such inappropriate fire-use / burning can provide a child with feelings of warmth and happiness as well as a sense of power and control over their lives and others. Fire use / burning may be a form of communication when verbal skills are lacking; its use can be for gaining attention or expressing anger, and even as a weapon for revenge.

When a young juvenile progresses to repeated intentional fire-setting, it may be triggered by underlying psychological or social problems or issues. These fires are deliberate and may include the gathering of fuels and the possible selection of a target to be affected by the fire. They may be set for different reasons including anger, revenge, attention getting, malicious mischief, crime concealment, problem solving, the intent to harm people or destroy property, or simply to make something or someone go away when they have no other solution. Children setting these fires rarely attempt to put them out and will often retreat from the fire but may remain close enough to watch its effect.

Emotionally motivated fire-setting can serve as a "cry for help." Fire safety and prevention education may help these youngsters but once identified and evaluated, they should be referred to the appropriate mental health services for intervention. With help provided in a timely fashion, the youth and their families have a reasonably good chance the fire-setting behavior will be stopped with minimal risk for future incidents.

NOTE: Keep in mind, a child or youth can be petitioned into juvenile court for offenses relating to their fire-setting behavior; this course of action should be done to assure services will be administered. This approach is used when parents of these children who have serious fire-setting behavior issues remain reluctant to pursue any service once the immediate incident has passed; furthermore, the effectiveness of intervention lessens as time between the initial incident and a potential practical intervention occurs widens. Keep in mind intervention is an inclusive approach, one that commonly needs the involvement of the parents. Consequently, the only guarantee of intervention, often, is the court system itself.

DELINQUENT/SEVERELY TROUBLED FIRESETTING

Delinquent/Severely troubled firesetters may reflect those same aspects listed above. They also can present a successively more severe form of fire-setting behavior that may be influenced by psychological and social factors of individual traits, social circumstances, and fire-setting scenarios. These youths generally reflect a small subgroup of Firesetter, but they are often considered at-risk for engaging in future fire-setting incidents.

Delinquent juveniles can exhibit certain patterns of aggressive, deviant, and criminal behavior that occurs with greater frequency as the juvenile matures. The longer the delinquent behavior continues, the harder it is to reverse; therefore, early identification and intervention are critical but not always possible. Fire safety education may impact but not reverse their behavior. Dependent on their histories and how they come to the attention of the fire and other professional services, these juveniles can be referred to mental health, social services, other community agencies, or if the fire-setting is classified as arson, they should be referred to the juvenile justice system.

NOTE: Keep in mind, a child or youth can be petitioned into juvenile court for offenses relating to their fire-setting behavior; this course of action should be done to assure services will be administered. This approach is used when parents of these children who have serious fire-setting behavior issues remain reluctant to pursue any service once the immediate incident has passed; furthermore, the effectiveness of intervention lessens as time between the initial incident and a potential practical intervention occurs widens. Keep in mind intervention is an inclusive approach, one that commonly needs the involvement of the parents. Consequently, the only guarantee of intervention, often, is the court system itself.

It is important to recognize these individuals may suffer from significant mental health dysfunctions or disorders. These include psychotic disturbances of schizophrenia and affective disorders as well as organically impaired disturbances of mental retardation and fetal alcohol syndrome. These severely disturbed children and adolescents are beyond most fire safety and prevention programs and may in fact be a significant danger to themselves or others. Local mental health agencies should be contacted immediately if these individuals are encountered.

NOTE: Generally, the mental health community, like that of the fire services, may not be well acquainted with the various aspects of fire-setting behavior and the children who set them. Both systems should seek and respect each other's knowledge of their particular fields while concurrently working together towards a corrective remedy for the behavior, a process aided by the use of a multi-disciplinary team approach.

SUMMARY

Interest in fire often emerges in children around the age of three. If guided by parents, caregivers, schools, and the fire service, most children learn how to properly respect and utilize fire in their environment. However, because of the impact of various psychological and social factors, a certain percentage of children become involved in fire risk behaviors that include unsupervised fire starting and intentional fire-setting. Additionally, the characteristics of any single child / youth may or may not correspond to the characteristics described in each of the three general categories of firesetters described above. You may see very young children with serious clinical problems and an extensive history of fire-setting; likewise, you could encounter an adolescent with a recent interest in fire but very few problems and no prior history of fire-setting. In either case, it is important to conduct a careful and comprehensive screening and evaluation with each child to determine the nature of the child's fire-setting problem, the presence of key psychological and social problems, and any other relevant details of the child's history, family environment, and service needs.

DIVISION TWO: IDENTIFICATION AND SCREENING

The heart of Pennsylvania's juvenile firesetter intervention program lies in its ability to identify and screen at-risk youth and their families. The intent is to provide intervention services to deter fire-setting behavior and reduce or eliminate the potential risk of fire. When a juvenile is suspected of fire-setting and/or a fire results from the actions of a juvenile, intake procedures are initiated. Those procedures begin with a referral followed by the screening of the youth and family to determine the threat or severity for fire concern, along with a path for intervention.

IDENTIFICATION, REFERRAL, & RELEASE of INFORMATION

Typically, juveniles can be referred from any source including: the fire service, parents, caregivers, schools, community agencies (i.e., law enforcement, mental health, or child protective services), and youth aid programs.

Observations by fire service personnel during fire suppression and investigation procedures can lead to the identification of juvenile firesetters. Persons and agencies outside of the fire service may identify these juveniles by the personal observation of telltale signs such as burned items found in the youth's bedroom, or in or around the home. The individual's fire related activities may be made known through reported fire incidents and/or the juvenile's own admission.

Once a firesetter is identified, referral can be initiated by either direct application to a firesetter intervention program or via the juvenile justice system. These steps depend on factors including the nature and severity of the fire, violations of local or state laws, the amount of evidence from the origin and cause investigation, local fire service operating procedures, and the age and history of the juvenile.

When a referral is made, the parent and/or legal guardian are required to sign a Release of Information form permitting the program the legal rights to release information to those parties who need to be involved, and which will serve the goal of implementing appropriate interventions for a successful outcome of the case.

INTAKE – SCREENING

A juvenile firesetter program must have an intake process that includes the following five basic procedures.

1. **Points of Entry:** the juvenile makes initial contact with the program.
2. **Reasonable Response Time:** the best window of opportunity is immediately after the fire.
3. **Contact Person(s):** intake personnel and their availability.
4. **Record of Contact / Referral Form:** written or automated record of contact established for all cases. A Fire Incident form and Contact Referral form are recommended.
5. **Prioritization of Cases:** methods for responding to urgent cases that require a more rapid intervention.

The screening process of juveniles and their families are always completed immediately following their referral to a juvenile firesetter intervention program. Referrals can be the result of either a legal action initiated by law enforcement and/or the juvenile justice system, or voluntarily when the parent is cooperative in seeking aid for their child. In any case, a screening should not be used as a determining factor for legal action, only for purposes of intervention efforts for the sake of prevention. It is for this reason law enforcement professionals should be a member of the multi-disciplinary team working as part of the intervention effort.

NOTE: Whenever possible, it is recommended the child be petitioned to juvenile court for offenses relating to their fire-setting behavior to assure services will be administered by the parent. Often parents of children with serious fire-setting behavior problems are reluctant to pursue services when offered through a normal course of programming. Hence, by utilizing the juvenile court system, a guarantee exists the services of intervention will be administered by the parent, thus serving to prevent the risk of potential future fires.

Initiating legal action is a serious matter, however, and mandates compliance with all jurisdictional requirements, including recognizing and honoring defendant civil rights. Because policies and procedures can vary from jurisdiction-to-jurisdiction regarding the juvenile code, it is imperative each juvenile firesetter intervention program consult with the local district attorney regarding protecting the legal rights of the juvenile. Local law enforcement and the district attorney are responsible for how a case is conducted and can involve the following actions after a juvenile arrest.

- Citation: The juvenile can be issued a citation to appear before the probation officer at juvenile court and may be subject to release, remanded to custody, or released to the family under house arrest. The case will be investigated for further action.
- Diversion: A decision is made to not take legal action but to refer to alternative interventions such as a juvenile firesetter program.
- Probation: An option of sentencing if legal action is taken wherein the juvenile is put on probation. Conditions of probation may include the following:
 - The child may be released to the custody of his or her parents with conditions of probation including such measures as fire safety training, mental health services, drug/alcohol services, or community service;
 - The child may be remanded to a residential treatment program to aid in the removal of stressful conditions and the provision of more intensive mental health services;
 - The child may be remanded to a specialized approved residential juvenile firesetter program to provide in-depth rehabilitation for juveniles with fire-setting behaviors.
- Detention: The harshest form of legal action if the juvenile is in immediate personal danger or could cause immediate harm to someone else.

As soon as possible after a fire incident involving juveniles, a referral should be made to a juvenile firesetter intervention program for screening procedures to get the juvenile involved with the appropriate interventions.

SUMMARY

Parents, schools, community agencies, social services, mental health professionals, fire service, law enforcement, and juvenile justice professionals represent avenues for referral to juvenile firesetter intervention programs. Programs are designed and equipped to initiate the mechanisms for proper identification and intervention of referred juveniles. The application of a multi-disciplinary team approach is critical for successful outcome of any given case.

DIVISION THREE: JUVENILE AND FAMILY INTERVIEW

The success of a juvenile firesetter intervention program is in its ability to accurately gather information, deliver it to the multi-disciplinary team for their evaluation, and apply proven interventions.

RISK DETERMINATION

While no given screening or assessment tool can definitively determine future behavior of a child or youth regarding fire, the attention given each case by the program leaders and the success of the interventions directed toward each child and family remains essential to mitigate impact. Likewise, the level of concern is often dependent upon the degree and severity of fire-setting behavior reported in each case, which most often is obvious from the information received in the referral and discovered during the screening process. Even though a scoring system may be incorporated in a screening or assessment tool, it is simply designed as a mechanism to assure the need for review by the multi-disciplinary team, for purposes of accurate intervention in each case.

THE INTERVIEW

A structured interview consists of a series of questions designed to gather information that will yield facts and circumstances concerning the fire incident(s), as well as attitudes, behaviors, and levels of understanding of those being interviewed. The *Pennsylvania Juvenile Firesetter Intervention Advisory Group* adopted a proven assessment tool that provides the structure for accurately accomplishing the goal of interviewing juveniles and their parents. This tool is used in sync with the six essential elements that comprise a structured interview and include the target population, the interview format, the interview style, special situations, confidentiality, supplementary interviews, and legal issues.

TARGET POPULATIONS

Three target populations – the young child, the preadolescent, and the adolescent – are primarily distinguished by age and often require different considerations when conducting a structured interview.

THE INTERVIEW FORMAT

The interview format consists of those factors that influence how the interview is conducted including location, setting, scheduled time, and the sequence of the interview. Each must be considered and planned prior to the start of the interview.

RECORDING THE INTERVIEW

The practical means for recording the interview is to use the assessment tool advocated by this Protocol. The actual recording of information can be done either by conventional handwriting or laptop computer using the assessment tool available on CD Rom or Desktop file.

INTERVIEW STYLE

The purpose of a structured interview is to learn as much as possible about the juvenile and family so the interviewer and multi-disciplinary team can make an informed decision regarding intervention for the youth. The interviewer's style may impact the quality and amount of information gathered. This interview should be an informational event where questions and answers lead to resolving problematic fire-setting behavior, not an interrogation that would normally lead to legal action. The interview should be conducted by two people, one of whom is a fire service professional and the other a mental health practitioner. The benefit of a two-person team is two-fold: (1) each interviewer can serve as an observer looking for those things that may go unnoticed by the other interviewer (due to their focus on listening and recording the narratives) that would give hint to the fire-setting problem with the juvenile and in the home, and (2) to serve as support to the other interviewer, and a witness of good faith while conducting business in an individual's home.

THE INTERVIEWER

The *Pennsylvania Intervention Protocol* recommends all interviewers acquire, at a minimum, the knowledge consistent with the USFA National Fire Academy Juvenile Firesetter Specialist Level I course which is based on professional qualification standards in NFPA 1035, Standard for Professional Qualifications for Public Fire and Life Safety Educators. It is highly recommended interviewers be Pennsylvania certified at Juvenile Firesetter Specialist Level One.

Individuals responsible for conducting interviews should have previous experience in dealing directly with the public in difficult situations, possess an ability to comfortably communicate critical information, and be able to relate to juveniles and parents. Dress code for interviewers may vary, with some wearing uniforms due to departmental policy, while others wear semi-casual attire. A “uniformed look” may portray a strong adversarial posture and thereby deter the juvenile and parent from divulging information critical to the case. The semi-casual appearance may help to place the person(s) more at ease and open doors for communication. Yet above all, it is what the interviewer does and says that’s critical in building rapport and communication with the juvenile and parent(s). Although the Child and Parent Screening Tools present a set of structured questions with the objective of scoring responses to questions, many questions may require further explanation or lead to other questions or topics of importance and should be pursued and recorded.

SPECIAL SITUATIONS

Although the interviewer cannot be prepared for every situation during the interview process, some scenarios can be anticipated and effectively handled. When interviewing, several special situations can occur or be identified such as dealing with very young children, language barriers, resistance on the part of the juvenile or parent, physical or sexual abuse, severe mental disorder, and criminal behavior. It is important to determine the level of understanding (age dependent) of the child.

If English is not the first language of the juvenile and family, an interpreter should be present to speak during the interview. It may also be useful to have identified a sign language interpreter in the community who can help during interviews.

Resistance or the lack of cooperation by the juvenile or family may be encountered at any time and can take several forms. Resistance may be expressed by refusal to talk, lying, sarcasm, hostility, anger, and rudeness, cracking jokes, or trying to divert attention to another subject. Parents may resist by making it difficult to schedule an interview, skipping the appointment, or not talking during the session. Interviewers should be prepared to work through these difficult situations.

State laws regarding reporting physical and sexual abuse to child welfare agencies should be complied with immediately in all cases. Having representatives from the child welfare agency on the program multi-disciplinary team serves well in handling such situations.

Interviewers may encounter rare situations wherein signs of severe mental disorder are identified. The three major types of severe mental disorder are psychosis, depression, and suicide risk. Interviewers should be cognizant of the signs and symptoms of these disorders and make an immediate referral of the juvenile and family to mental health services.

Situations can occur during interviews wherein the juvenile or family discloses they have or intend to commit arson or another criminal act. The regional juvenile firesetter intervention program guidelines should include the mechanism, based on state and local jurisdiction legal code, and the qualification or background of the interviewer for handling this problem. Disclosure of criminal activity or of the intent to commit arson or any other crime must be taken seriously and the interviewer must move to prevent the occurrence of criminal activity.

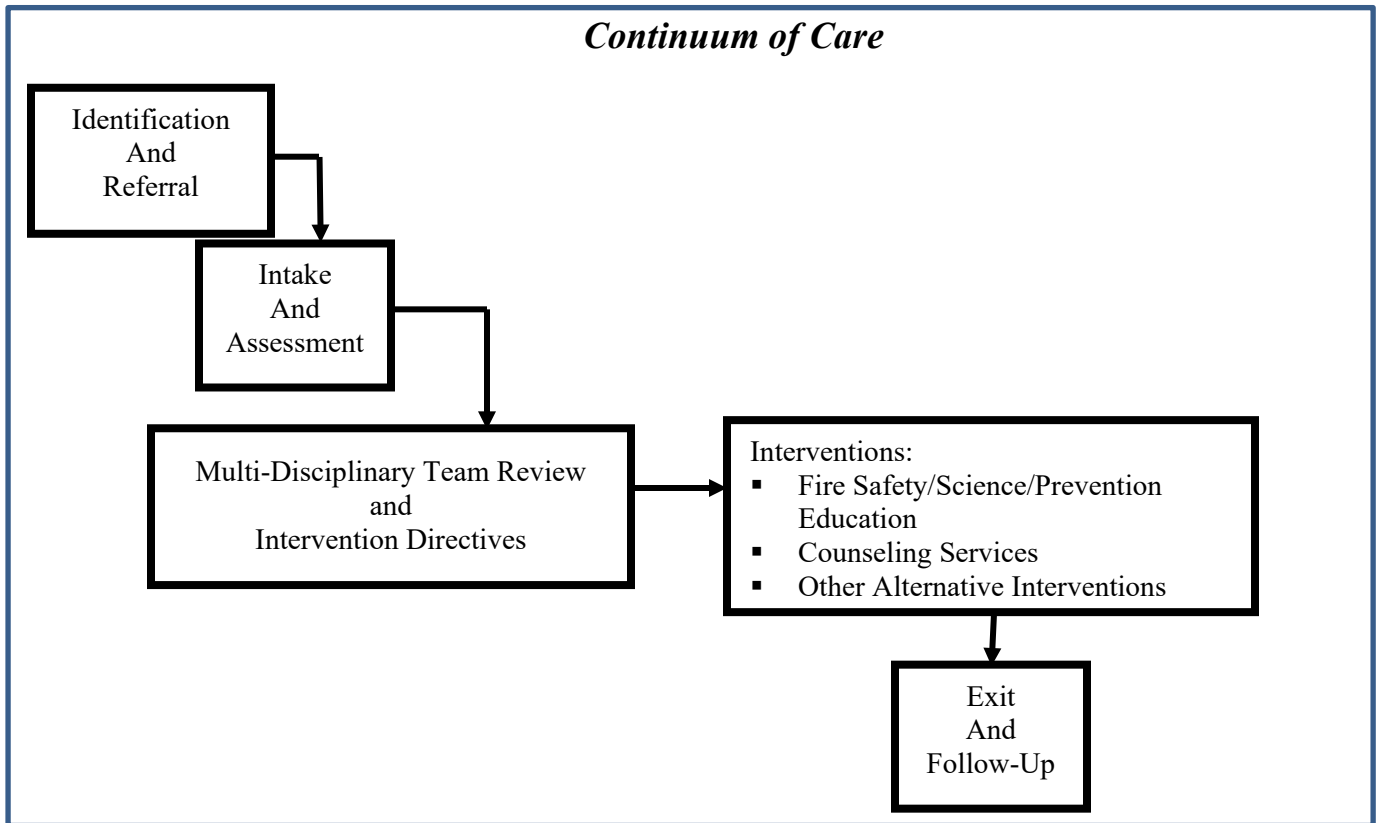
CONFIDENTIALITY

The nature of the relationship between the interviewer, the juvenile, and the family is one of trust. However, juveniles and family members may want to share information in confidence. Such information may be critical to the case; therefore, it is important for the juvenile and family to understand that any or all information may be recorded as deemed necessary. Additionally, it needs to be understood that by signing the release of information document prior to the interview, they have agreed to permit such information to be shared with the multi-disciplinary team and others as is necessary for the handling of the case in the best interest of the child.

DIVISION FOUR: PROGRAM COMPONENTS & INTERVENTION

CONTINUUM OF CARE

Juvenile Firesetter Intervention Programs must build a comprehensive network designed to intervene and prevent child fire-setting occurrences within their sphere of influence and jurisdiction. The focal point of this approach is a “continuum of care” network designed to provide consistent intervention for all youth and children. The continuum of care network provides a range of interventions based on the screening process and recommendations of the multi-disciplinary team. The following graph depicts elements of the continuum of care for a juvenile entered into a program.



Note: See Division 8 for Program Coalition Site components.

THE JUVENILE FIRESETTER INTERVENTION PROGRAM COMPONENTS

There are six components to any juvenile firesetter intervention program.

1. Identification
2. Referral / Intake / Release of Information
3. Assessment and Safety Considerations
4. Multi-Disciplinary Team (MDT) Review
5. Interventions
6. Exit and Follow-up

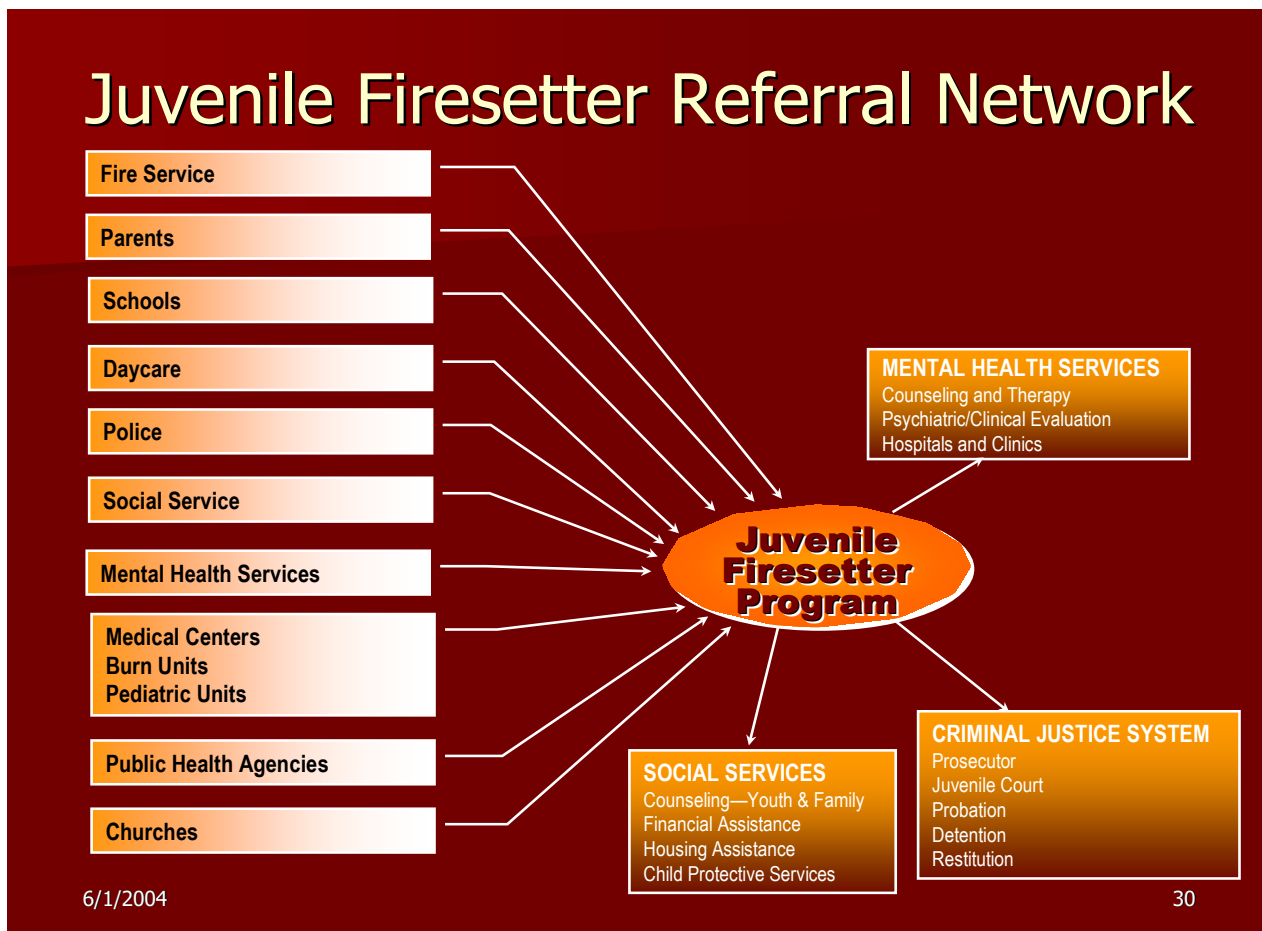
IDENTIFICATION

The point of entry into a firesetter intervention program follows the identification of at-risk youth and children. The earlier the identification is initiated the better the chances of a successful intervention. Typically, any community agency or service that can or does have contact with juveniles may serve as an initial point of contact for at-risk youth and children to enter a program by means of an established referral system.

REFERRAL/INTAKE/RELEASE OF INFORMATION

A firesetter intervention program must have an in-take / referral system established for receiving cases. A referral needs to be made using an established form which provides the information necessary to initiate the case. The referral system must make provisions for a specific contact person(s) to receive and record all new incoming cases and arrange for the screening of the referred juvenile. When a referral form is submitted, it must be accompanied with a “Release of Information” form signed by the parent(s) or legal guardian and the youth if they are age 14 or above. [A “Release of Information” form for this purpose can be found in the Assessment Tool documents.]

The “Release of Information” form is critical to the success of any case. It provides program officials the right to release information collected to persons and/or agencies necessary for intervention. Without it no information can be exchanged thereby preventing any intervention from occurring and wasting program resources and time.



This diagram represents a typical referral system for intake and screening, and pathways for intervention.

ASSESSMENT AND SAFETY CONSIDERATIONS

Assessment: The main component of the intervention process is assessment. The purpose of an assessment interview is primarily to gain information for the multi-disciplinary team (MDT) to use in making their determination regarding the type(s) of intervention needed for a favorable outcome in each case. The interview should be conducted in the home of the referred family so that the interviewer(s) have an opportunity to experience the usual environment (living conditions) of the family. It will also help the individuals being interviewed feel more comfortable and thereby potentially provide more information.

The use of the structured assessment tool often produces an understanding as to why the juvenile engages in the use of fire (fire-setting behavior) and may provide an indication of the likelihood or risk of continued fire-setting behavior. Additionally, this tool is helpful in determining the course of action for intervention. The structured screening interview should be the only method of fact finding employed by any program for gaining information that will lead to appropriate intervention strategies established and initiated by the MDT.

Safety: At the time of the assessment interview a home fire safety inspection should be conducted to assure a safe environment. The inspection should ensure the installation and proper operation of smoke detectors in each room of the home (except bath and kitchen), clear exit ways, and the reduction and elimination of obvious fire hazards. It can address replacing incandescent light bulbs with fluorescent tube-bulbs, removal of combustible clutter, and such fire prevention aspects as securing matches and lighters.

MULTI-DISCIPLINARY TEAM (MDT) REVIEW

The multi-disciplinary team is comprised of professionals who are involved with those agencies and departments that are concerned with and/or may provide services to juveniles. It is the MDT's responsibility to periodically meet to review and evaluate each case Screening Interview Report and matters related to the case; and to identify the level of concern for each case and the best type of intervention(s) necessary to address the behavior. Minimal multi-disciplinary team composition should consist of representatives of the fire services, law enforcement, juvenile court system, mental health services, school systems and a county or local children and youth social service agency.

INTERVENTIONS

Interventions are decided upon by the multi-disciplinary team and delivered by those departments and agencies designated for that function. Interventions consist of any method and/or means of breaking the cycle that causes and/or results in fire-setting behavior. Most common interventions are:

1. Fire Safety/Science/Prevention Education
2. Mental Health Services
 - a. Individual and/or family counseling
 - b. Behavior modification
 - c. Prescription drug adjustment and/or implementation
 - d. Residential treatment
3. Social Services
 - a. Parenting classes
 - b. Medical
 - c. Abuse intervention
 - d. Foster care

EXIT AND FOLLOW-UP

Exit from a firesetter intervention program follows the completion and/or adequate implementation of intervention(s) as directed by the MDT. Anyone who exits the program prior to the completion and/or adequate implementation of any intervention(s) fails the program. However, the most typical exit for juveniles is after education and/or referral to an appropriate intervention.

Once a person exits a program it is important that follow-up procedures take place. Follow-up is established so the youth and families understand that the firesetter intervention program will continue to be concerned about their welfare. Follow-ups generally occur:

- 1) Four to six weeks after exit
- 2) A secondary follow-up between six and twelve months after exit.

Follow-ups can be conducted in a number of different ways including telephone calls (most cost-effective and least time-consuming), written contacts, and visits. The content of the follow-up needs also to be considered and may include a standard set of questions. (Note: For children less than 6 years old, a one or two-year follow-up may be appropriate. These children will be entering the primary age of fire-setting behaviors.)

ADDITIONAL COMPONENTS

There are two additional components that may be used when working with juveniles.

1. Community Service
2. Restitution

Both components are commonly derived from and should remain at the direction of the court system. Community service, typically employed for older juveniles, can be used as a consequence of fire-setting and might include such activities as food and clothing drives, senior citizen assistance work, and community clean-up. Community service at a fire station should be avoided as the excitement of the fire service may have contributed to the original development of the fire-setting behavior. However, community service at a fire station may be permitted only after careful consideration of and approval by the MDT. It should then be limited strictly to fire prevention activities outside of the station and under the direct guidance of a fire officer or appointed senior firefighter.

Restitution programs require juveniles and parents to be responsible for dollar damage caused by fire-setting and in some cases, the cost to suppress fires. Restitution may be mandated by the court system; and a juvenile firesetter intervention program may arrange for some agreement with the local court to hold juveniles and parents responsible, and to assess restitution.

SUMMARY

The continuum of care for juvenile fire-setting strategy dictates six components. They include: Identification, Referral/Intake/Release of Information, Assessment and Safety Considerations, Multi-Disciplinary Team (MDT) Review, Interventions, and Exit and Follow-up. Other program components could involve community service, and restitution as ordered by the courts. Intervention strategies result from the review by the multi-disciplinary team. Fire safety/science/prevention education benefits everyone who enters the program with exceptions for rare cases where the child lacks the ability for true remorse and only seeks to harm others. In such cases education may only serve to enhance the child's endeavors to do harm. Follow-up will let juveniles and their families know there is a continued concern for their welfare and that of the public.

DIVISION FIVE: *THE OPTIMAL COMMUNITY / REGIONAL NETWORK*

OPTIMAL CONTINUUM OF CARE

The Optimal Continuum of Care (OCC) for any community or regional network represents a way to organize community / regional initiatives / programs designed to prevent and control child and youthful fire-setting related activities. The three major elements for a continuum of care include: prevention, early identification, and immediate treatment through an approved Juvenile Firesetter Intervention Program. Each of the three represents a distinct level of community/regional intervention.

- Prevention is designed to inhibit the fire-setting activity and can be implemented by special educational programs through the local school systems.
- Early identification can be achieved through the education of parents, and juvenile related agencies that may encounter children with fire-setting behavior. Providing parents and agencies with the level of awareness necessary to identify this unwanted behavior in children and youth will greatly enhance the prevention of juvenile set fires. One should understand that the earlier a problem is identified, the better the chance for resolution.
- Immediate treatment can be achieved through an approved Juvenile Firesetter Intervention Program which would provide rapid access to appropriate care and therapy.

PREVENTION

Juvenile fire-setting does not have to occur. Prevention efforts using education, support and protection focus on a broad base of community/regional programs that are available to serve all children and their parents.

Specialized fire education can include such programs as the *Prevent Arson Loss in Schools* (P.A.L.S.) program, the National Fire Protection Association's (NFPA) *Risk Watch Child Injury Prevention Curriculum*, the NFPA *Learn Not to Burn* program and other national, state, and local programs that are designed to increase fire safety awareness which in turn will deter fire-setting activity.

The fire service has a long history of providing communities with fire safety education. Other organizations such as the American Red Cross, many burn centers, the YMCA, community centers, Big Brothers and Sisters, church groups, recreational athletic programs, and other supervised school programs support programs that help improve the quality of life for children, offer safety education, and can help prevent youth involvement in fire-setting behavior.

EARLY IDENTIFICATION

Early identification focuses on recognizing at-risk youth and preventing their further involvement in fire-setting. A community/regional juvenile firesetter intervention program is the major access point for early intervention to a network of community/regional services. The community/regional program refers youth into the system and provides screening, evaluation by a multi-disciplinary team and intervention. Each community/regional program will develop their own specific links to referral services and associated agencies and to maintain an effective working relationship with them. It is critical the referral agencies are educated about the services of a juvenile firesetter program. Referral agencies need to understand the types of problems they can expect to encounter. Key people in the referral agencies must be identified, especially those who will be working directly with the firesetter program. Those who will approve the working agreements between the agency and the program must also be identified.

IMMEDIATE TREATMENT

Swift and effective help are imperative for juveniles having active fire-setting behavior. Referral to one or both types of immediate treatment format – mental health and social services – depends on the directives of the MDT. This is an example of where the firesetter program must have a strong link with these immediate treatment formats.

GRADUATED SANCTIONS

Graduated sanctions components – rehabilitation and corrections – are commonly the product of the juvenile justice system and consist of sub-levels or graduations that provide an integrated approach to interrupt the progression of delinquent and criminal activity. Rehabilitation encompasses immediate therapy and intermediate sanctions where corrections include community confinement, training schools, and aftercare. For rehabilitation efforts to be effective, they must be swift, certain, consistent, and incorporate increasing sanctions, including loss of freedom.

First-time offenders are likely to be placed in diversion including accountability, making amends to the victim and the community, and exiting the juvenile justice system as a more productive and responsible citizen. If a youth continues fire-setting, he/she will be subjected to more severe sanctions and could ultimately be confined in a secure setting. Firesetters who are not first-time offenders or who fail to respond to rehabilitation are likely to be subject to intermediate sanctions including intensive supervision programs, short-term confinement, day treatment, outreach, twenty-four hour residential and/or secured specialized juvenile fire-setting programs, and discharge and follow-up.

SUMMARY

An organized network of community/regional services is the key to effective prevention and mitigation of juvenile fire-setting. Within any program, fire safety education is essential for everyone and is important in improving the quality of family life and protecting the community. Immediate treatment for those involved in juvenile fire-setting and their families includes mental health and social services. However, juveniles repeatedly arrested for fire-setting and arson will face increasingly severe methods of sanctions, including the loss of freedom, to be imposed by the juvenile justice system.

DIVISION SIX: PROGRAM OPERATIONS AND MANAGEMENT

PROGRAM PLANNING

Once a consensus is reached to address a juvenile fire-setting problem on a community/regional basis, an organized approach (plan) should be developed to resolve the problems. The plan may address bolstering existing programs or to add new features to current activities. In some cases, a program may be required to be built “from the ground up.” The following chart summarizes three elements that would comprise program planning.

Program Planning	
Activity	Description
Leadership	The selection of someone responsible for running the program.
Location	The identification of the primary location to house the program.
Site	The determination of the program’s geographic boundaries and jurisdiction of service delivery.

Typically, the program leader is associated with the fire service although law enforcement, juvenile justice, social services and mental health professionals can also assume the leadership role. Within the Pennsylvania regional concept, it would be beneficial for the program leader (coordinator) to complete or attain certification (if available) as a Juvenile Firesetter Specialist Level II. Additionally, state run training programs may be available along with direct coalition assistance in training persons needed for the implementation and operation of any juvenile firesetter intervention program within the state.

Location for a program is generally the local fire service which may be the best choice to help in identifying children and youthful firesetters. If a local or regional fire service does not have the resources to house a program, there are other options including county owned and operated facilities, state owned and operated facilities, private agencies, non-profit organizations (e.g., YMCA, YWCA, etc.), mental health and counseling agencies.

Most child / youth firesetter intervention programs operate within a fire service area of jurisdiction or basically within community boundaries. However, the Pennsylvania approach involves a regional concept that would operate over a larger geographical area, perhaps countywide or involving several counties and is based on a population basis of one program for every 500,000 residents. This coordinated and wide-spread approach would encourage more referral agencies such as mental health, social services, and juvenile justice to be involved thus providing more opportunity for larger numbers of individuals to receive the needed program interventions.

PROGRAM DEVELOPMENT

Once a program is in place, it is ready to begin work within its area of jurisdiction. Program development involves six steps which are outlined below.

The first step in program development is to establish a multi-disciplinary team that includes representatives from key juvenile related agencies, departments, and schools, headed by a program coordinator. The program coordinator should have certification as a Juvenile Firesetter Specialist Level II, completed the National Fire Academy “Extinguishing Youth Fire-setting” classes, or received or maintained the equivalent thereof.

The MDT with the coordinator needs to identify and establish links with the type of services necessary for intervention of juveniles referred to the program. Services need to include: fire safety/science/prevention education, social service agencies, mental health services and any other community based service that may be applicable to the needs of the juveniles and families referred to the program.

Budgeting will also vary within community/regional programs with some common categories. The major category is personnel costs and budgeting will reflect the level of service provided.

Program Development	
Activity	Description
Management Team	The selection of a team to support the work of the program leader. Team members should have taken NFA course “Extinguishing Youth Fire-setting” class or be certified at Juvenile Firesetter Specialist Level, or the equivalent thereof.
Service Delivery System	Specify program components: identification, referral, screening, MDT evaluation, education and related interventions, and follow-up to be offered in the program.
Budget	Estimate the costs of the program’s services.
Funding	Establish a funding team to develop sources of financial support, donations, grants, and contributions to the program.
Organizational Chart	Specify in writing, the various organizational relationships within the MDT and with program intervention agencies.
Interagency Linkages	Establish and maintain effective, multi-agency community/regional network of services for the program.

PROGRAM IMPLEMENTATION

After all the planning and development for a juvenile firesetter program has been completed, it is time to put the program into action. However, certain implementation steps will need to be accomplished before the first intake is undertaken. Those steps, extracted from the United States Fire Administration’s *Juvenile Firesetter Intervention Handbook* publication are summarized as follows:

Program Implementation	
Activity	Description
Training	The development of a training program for all new management and staff.
Documentation	Setting-up a written or automated record-keeping system for all cases entering the program.
Confidentiality	Program policies must be established regarding the privacy of written and verbal communications, access to and sharing of records, and media involvement.
Liability	The program must be protected from potential legal action because of the behavior of firesetters and their families.

The size of the staff will depend on the size of the program and the selection process will vary by community/region based on available resources.

Regardless of their background, all staff should receive standardized training. Several training venues and opportunities are available throughout the country and within the state. At a minimum, it is advisable that program staff should have completed the National Fire Academy “Extinguishing Youth Firesetters” classes or comparable training. Training of all staff can ensure a coordinated, standardized program for all program providers and may include such topics as the following:

- National, state, and local statistics on child fire-setting and juvenile arson.
- Personality profiles of child firesetters/juvenile arsonists and their families.

- How to interview individuals.
- How to assess and interview individuals and their families using the Child and Parent Assessment Tools.
- How to properly read and interpret assessment reports and interviews.
- Special case studies.
- Educational programs for individuals and their families.
- How to build an effective network of community/regional services.
- Problem solving.

All programs must develop policies and procedures to document its work with juvenile firesetters. Each juvenile and their family should have a case record and assigned identification number that can move through the program. Such components as screening documents and their related reports, education intervention summaries, fire incident reports, and referrals should be documented.

Documentation along with individual and family identification must be kept confidential. Case records can be written or automated. Written records must be kept in locked files and automated files must be password protected. Access to such records must be strictly limited to only authorized individuals. Where legal issues apply to these situations, access to records must be in compliance with applicable local and state legal rules, regulations, laws, and other statutes.

The liability factor of legal action against the program and its associates must be considered because of the behavior of firesetters and their families. Programs must be protected from being held liable for the actions of juveniles. This protection may involve the use of liability waivers that release programs from responsibility and should be developed in consultation with the local district attorney. Additionally, liability insurance for a program should be strongly considered for its protection and that of its associates.

PROGRAM MAINTENANCE

Program maintenance is the final component of Program Operations and Management and involves certain activities that will help sustain and strengthen the program. These activities that affect the day-to-day operation of the program as well as providing continued service to the community/region are outlined in the following tables.

COMMUNITY/REGIONAL MAINTENANCE	
Activity	Description
Information Acquisition	Collect, organize, and evaluate fire incidence data to determine the scope of the community juvenile fire-setting problem.
Consensus Building	Harnessing the support of key community decision-makers to reach an agreement regarding the need and support of a firesetter intervention program to address the juvenile fire-setting concern.
Operations Handbook	This handbook establishes the specifics regarding the program and how it regularly operates.
Resource Directory	This directory lists the names, street addresses, phone numbers, and e-mail addresses of all agencies that work with juvenile firesetters and their families in the geographic area serviced by the juvenile firesetter intervention program.
PROGRAM MAINTENANCE (Continued)	
Activity	Description
Record keeping	Record keeping of a firesetter intervention program allows management the ability to monitor both the level and volume of the caseload in addition to the quality of interventions.

Public Awareness	A publicity and outreach effort educates the general public and specific target populations about the problem of juvenile fire-setting and informs them about the availability of the program.
Continuing Education	Continuing education opportunities for management and staff ensures the program operates with the most current knowledge and information and maintains a high standard for performance.

Community/regional programs need to establish their own handbook of operations and procedures. The content of the handbook will vary between programs but the average should include means and procedures for identification, referral, screening, MDT evaluation, intervention(s) and follow-up. All program managers and staff should receive their own copy of the handbook. Handbooks may also serve as a primary training tool.

Resource directories should include contact data of local, regional, state, and national resource agencies, which can be useful for both daily operations, and when referring youth and families to services outside the program.

Monitoring and Evaluation will involve having current and accurate program data. There are several ways to collect and analyze information using two types of information systems – a Management Information System (MIS) and an Evaluation System (ES). The MIS summarizes program’s caseload, track, and reporting of the number and type of program activities and provides data for the annual reports, funding agencies, and evaluations. Those MIS categories can consist of a myriad of aspects concerning the children and youth referred to the program. Some are listed in the following table.

Management Information System (MIS) Data Collection	
Data Category	Information
Case Characteristics	<ul style="list-style-type: none"> • Referral Source • Age, Sex, Race • Family Status • Details of current & past fire incidents
Services	<ul style="list-style-type: none"> • Educational Services • Referrals • Mental Health Services • Social Services • Juvenile Justice • Other Referrals
Case Disposition	<ul style="list-style-type: none"> • Outcomes of Services • Juvenile Justice Status
Program Activities	<ul style="list-style-type: none"> • Education, Training, and Prevention • Resource Material Development • Media

Evaluation System data is an extension of the MIS data and also contains information on follow-ups, recidivism and other events such as school or family problems, arrests, comparisons and trends, dollar losses, etc. The table below lists data collected in an ES.

Evaluation System (ES) Data Collection	
Data Category	Information
Fire-setting Recidivism	Recurrence of Fire-setting
Delinquency	<ul style="list-style-type: none"> • Arrests • Probation • Conviction • Incarceration
School	<ul style="list-style-type: none"> • Academic Problems • Disciplinary Problems • Truancy • Expulsion
Mental Health	Contacts
Social Services	Contacts
Family Environment	Discipline
Personal	Functioning
Costs	Average Dollar Loss Per Juvenile Firesetter

SUMMARY

This division addresses Program Operations and Management. It includes careful and detailed planning in selecting a site for the firesetter intervention program, naming a program leader, and specifying the geographic areas to be serviced by the program. Following this, the program builds on its plans and sets into motion all the necessary program operations. It begins with establishing an MDT staff and their training, along with establishing documentation procedures, and addressing issues related to confidentiality and liability. Success and longevity of the program depends on the commitment of the program personnel, coupled with short and long-range planning, creating a monitoring and evaluation system for the program itself, mounting a public awareness campaign and providing continuing-related educational opportunities.

DIVISION SEVEN: PROGRAM EDUCATIONAL COMPONENT

DESIGNING A PROGRAM EDUCATIONAL COMPONENT

Education is a key component in the treatment and prevention aspect of fire-setting intervention programs and provides a path for change. For regional/community programs to be effective, their program(s) must utilize a professional and proven fire safety / science / prevention education curriculum which specifically addresses the concerns of fire as it relates to those juveniles referred to the program, in addition to aspects of accountability and responsibility related to the juveniles.

There are numerous educational resources available. Some are specially designed to address specific behaviors within juveniles and are carefully laid-out so that any level of the professional staff can employ them while others are generic fire safety programs that may not specifically address the juvenile fire-setting issues. **Pennsylvania developed an outstanding CD-based fire safety education curriculum in cooperation with the Burn Prevention Foundation that addresses all juvenile firesetters from elementary age through age 17. The curriculum offers three distinct levels designed to facilitate an effective education intervention. The state strongly advocates using the curriculum titled *A Spark of Knowledge, an Intervention Curriculum*© which is available through the Office of the State Fire Commissioner.**

WHO PARTICIPATES IN THE EDUCATION?

Fire safety/science/prevention education is a mechanism for empowering the child with knowledge and self-esteem and is simply one of many other interventions in this process of breaking the dangerous cycle of children connected with fire. Yet the success of these interventions rests fully on the parent(s) and their ability to implement these interventions in the home and life of the child. The responsibility is not that of the educators, intervention specialists or program leaders, but of the parent(s) alone. Parents are the only ones who can effectively make these changes in the child's life by their constant personal contact, discipline, attention, and love. The parent(s)/guardian/caregiver are a key component to the solution and are required to attend and participate with the child in all phases of the educational program. In understanding the dynamics of family responsibilities, it's acknowledged that in some cases only one parent can attend. Often, children who engage in fire-setting behavior lack any personal involvement from either parent, particularly with the father. Hence, the parent(s) involvement and support of the child are crucial to the child's change and development. In this action, the parent(s) presence should demonstrate to the child a mutual concern and effort to stop and prevent fire-setting behavior. In addition, parents often learn as much as their children and can be a focal point within the family to enforce safety awareness. Siblings should not attend the education with the subject child as this may cause rivalry between siblings which may have been one of the underlying causes originally leading to the fire-setting behavior.

The first respondent to a family crisis has a unique opportunity in many cases to make an unusually strong connection and to make a special impression. Fire service personnel may therefore be the best choice for educators or educational program providers. However, other educated individuals from various disciplines associated with juvenile fire-setting may also effectively serve as educators. In any case, educators must be trained in the dynamics of the program, which includes understanding child fire-setting behaviors, child development, and elements of fire safety/science/prevention education and be able to deliver a level of excellence that will spell success for the educational process.

EDUCATIONAL INTERVENTION NOT APPROPRIATE

The United States Fire Administration suggests that there will be times when educational intervention should be delayed or only presented to parents/caregivers. Those times may include when the:

- child and/or his family needs to be referred immediately to a mental health professional for further assessment.
- child's ability to concentrate or comprehend is impaired to the degree that usefulness of the material presented will be minimal or misunderstood in a way that will be counterproductive.
- child's fascination or excitement with fire will only be further enhanced by fire education material; referral to a mental health professional and fire safety education for parents is indicated.
- very young child is better served with education and/or counseling for the parents.
- situation involves a chronic juvenile offender; hence, the screening report and education intervention should be discussed with the child's probation officer, juvenile diversion, District Attorney, etc., in coordination with the MDT to avoid reinforcing the behavior you are attempting to eliminate.

WHEN EDUCATION INTERVENTION IS APPROPRIATE

Other than the previously mentioned exception, educational intervention is almost always appropriate at some level. Education intervention equips the child with an understanding of the nature of fire and helps resolve issues of power and control in an external, concrete process that in itself creates a positive feeling. Educational intervention creates a balance and establishes a safe context within which to examine unsafe fire behaviors and to learn safety through creative learning.

The primary concern is that the information delivered is age-appropriate both in content and context for each child and family. The following are considerations for each age group extracted in part from the United States Fire Administration's (USFA) *Juvenile Firesetter Intervention Handbook*.

The Very Young Child (Ages 2 and 3)

There is a growing concern about the number of young children who are injured or killed as a result of fireplay and fire-setting. This age group is particularly troublesome due to the child's limited ability to:

- ...understand the consequences of the behavior,
- ...problem solve, and
- ...appropriately respond once materials ignite.

Fire-setting and fireplay in this age group usually is a direct result of inadequate supervision or the caregiver's failure to provide a safe environment. Education intervention for this age group is primarily focused on educating parents / caregivers about the basics of fire safety, such as:

- ...fire tools and combustible materials should not be accessible to young children,
- ...child need constant adult supervision, and
- ...children are sensitive to environmental stress.

Children (Ages 3 - 5)

Primarily, children engaging in fireplay in this young age group may be doing so out of experimentation, curiosity, or a drive to learn and imitate adult behavior. Children learn best from material presented to them from curricula that involves auditory and visual learning modalities in increments of twenty minutes or less. Parents should be educated on the proper storage and use of ignition sources. In cases where concerns exist about the child's home environment not being safe, a referral to protective services is in order.

Children (Ages 6 - 9)

This age group of children is capable of participating in fire safety/science/prevention educational curriculum and should be entered in the basic phase of education from that curriculum.

Children (Ages 10 -12)

This age group of children is recommended for fire safety/science/prevention educational curriculum and should be entered in the intermediate phase of education from that curriculum.

Adolescents (Ages 12 - 18)

This age group of children is recommended for fire safety/science/prevention educational curriculum and should be entered in the advanced phase of education from that curriculum.

Note: Any educational resource may be utilized provided it is comparable with the educational curriculum developed for the Commonwealth and recommended by this Protocol.

DIVISION EIGHT: REGIONAL / LOCAL PROGRAM COMPONENTS

Regional / local program sites should include the following components:

- STAFF
- REFERRAL SYSTEM
- SCREENING / INTERVIEW TOOL
- MULTI-DISCIPLINARY TEAM (MDT)
- DATA COLLECTION
- TREATMENT INTERVENTIONS

STAFF

Coalition/team staffing should include the following elements: Coordinator, Investigator, Educator, Case Manager and Secretary. At a minimum, it is recommended that Coordinators have attained a level of competency equivalent to FEMA/USFA Juvenile Firesetter Specialist Level II. Investigators and Educators should have attained a level of competency equivalent to FEMA/USFA Juvenile Firesetter Specialist Level I.

REFERRAL SYSTEM

When a child is suspected of fire-setting behavior, as evidenced by some form of fire involvement, he or she should then be referred by the agency/individual identifying the suspect behavior to a child/youth fire-setting intervention program. Referrals should be made by completing and submitting a form with detailed information regarding the incident and/or behavior, accompanied by a release of information form signed by the parent and/or caregiver of the juvenile.

ASSESSMENT INTERVIEW

Assessment interviews should be conducted by trained professionals who possess minimum qualifications recommended by the *Pennsylvania Juvenile Fire-setting Intervention Protocol*. Those qualifications should be consistent with the standards of NFPA Juvenile Firesetter Specialist Levels I or II. Any assessment tool may be implemented. However, the assessment tool adopted by the State *Protocol* may be required for a regional program to be recognized by the state for funding and other purposes.

MULTI-DISCIPLINARY TEAM (MDT)

A MDT is commonly composed of varied juvenile related disciplines within a program's operating jurisdiction who will be involved in intervention, mitigation, and prevention of child fire-setting and juvenile arson. These disciplines include but are not limited to: government and private mental health services, public and private school officials, public and private children and youth social services, District Attorney's Office, Juvenile Court representatives, fire service representatives, and law enforcement officials. MDTs should meet monthly to review, deliberate and satisfy the needs and other aspects of intervention for children referred to programs, as well as to help in the development of the program.

DATA COLLECTION

It is imperative that data collection be an integral component of all fire-setting intervention programs. The types, use and maintenance of data collected are presented in the *Pennsylvania Juvenile Fire-setting Intervention Protocol*.

TREATMENT INTERVENTIONS

Treatment interventions usually consist of two components:

1. Fire Safety/Science/Prevention Education
2. Mental Health Counseling

At times additional support intervention may be necessary to resolve the fire-setting behavior. They include but are not limited to: family housing, parental employment, alternative schooling, re-establishing parental visitation, food concerns, drug and alcohol issues, etc. Such interventions require cooperation and assistance of multiple disciplines. (MDTs).

AFTERWORD

This document is the result of many hours of labor by several dedicated Pennsylvania professionals who are trained, educated, and experienced in dealing with the problem of juvenile fire-setting. It is intended to be a resource, reference, and guidance tool for those who have an interest and are practitioners in the field of juvenile fire-setting intervention.

The professionals who created this *Protocol* hope that those who have the need will utilize the material contained herein to help them create and/or manage juvenile firesetter intervention programs within their own jurisdiction or sphere of influence.

July 2004

Updated: July 2007

Updated: October 2008

Paul E. Reichenbach, CFI
Director, State Juvenile Firesetter Intervention Advisory Group
Public Education/Information Specialist
Office of the Pennsylvania State Fire Commissioner

APPENDIX C

Data Form

Index Fire Category

County	I.D.	User code

Age <input type="radio"/> 1 <input type="radio"/> 7 <input type="radio"/> 13 <input type="radio"/> 2 <input type="radio"/> 8 <input type="radio"/> 14 <input type="radio"/> 3 <input type="radio"/> 9 <input type="radio"/> 15 <input type="radio"/> 4 <input type="radio"/> 10 <input type="radio"/> 16 <input type="radio"/> 5 <input type="radio"/> 11 <input type="radio"/> 17 <input type="radio"/> 6 <input type="radio"/> 12 <input type="radio"/> 18	Gender <input type="radio"/> Male <input type="radio"/> Female	Grade Placement <input type="radio"/> K <input type="radio"/> 1 <input type="radio"/> 5 <input type="radio"/> 9 <input type="radio"/> 2 <input type="radio"/> 6 <input type="radio"/> 10 <input type="radio"/> 3 <input type="radio"/> 7 <input type="radio"/> 11 <input type="radio"/> 4 <input type="radio"/> 8 <input type="radio"/> 12	Education Status <input type="radio"/> Regular <input type="radio"/> Special
Referral Source <input type="radio"/> Parent <input type="radio"/> Fire Service <input type="radio"/> School <input type="radio"/> Mental Health <input type="radio"/> Probation <input type="radio"/> Other Other: _____		Current M. H. Treatment <input type="radio"/> Yes <input type="radio"/> No	

Ethnic Group of Juvenile
 Caucasian Black
 Hispanic or Mexican Asian or Pacific Rim
 Other _____

Estimated Socioeconomic Status of Juvenile's Family Income
 Poor – Less than approx. \$15,000 High – Over \$75,000
 Lower Middle – Between \$15,000 and \$34,000
 Middle – Between \$35,000 and \$70,000

Reported Psychiatric Diagnosis
 ADD/ADHD Bipolar Disorder
 Depression None
 Conduct Disorder
 Oppositional Defiance Disorder
 Other _____

Prescribed Meds
 Ritalin, Concerta, Adderall, Dexadrine
 Antidepressant (Prozac, Paxil, Zoloft, Lexapro, etc)
 Lithium, Depakote
 Atypicals (Resporidol, Zyprezia, Abilify)
 Straterra
 Other _____

Family Structure
 Both Biological Parents
 Single Parent
 Parent & Step Parent
 Foster Care Group Home
 Adoptive Home
 Other _____

Living Unit - Smoke Detectors
 Has working smoke detectors
 Needs improved smoke detectors

Living Unit – Extinguishers
 Has adequate extinguishers
 Does not have adequate extinguishers

Ignition Source
 Matches Lighter Candle
 Other _____

Location of Index Fire
 Residential Building
 School Barn Outdoors _____
 Shed Trash Can Other ____
 Garage Dumpster

Accelerant Used
 Gasoline Alcohol Spray Can
 Kerosene Mixture Foam
 Other

Previously Referred for Fire Services

- Yes No

Time of Ignition

- 8 am – 3pm 8 pm – 11 pm
 3 pm – 8 pm 11 pm – 8 am
 3 pm – 8 pm 11 pm – 8 am

Fire Damage, Financial

- Est. less than \$500 Est. over \$20,000 (enter amount) _____
 Est. \$501 - \$5,000
 Est. \$501 - \$5,000

Person affected and extent of injury

Physical Injury

- Self
 Family Member _____
 Fire Service
 Other _____
 None

Extent of Injury

- Death
 Admitted to Hospital
 E R Care
 Doctor's Care
 Injured missed school/work

Person/s affected and extent of injury

Physical Injury

- Self
 Family Member _____
 Fire Service
 Other _____
 None

Extent of Injury

- Death
 Admitted to Hospital
 E R Care
 Doctor's Care
 Injured missed school/work

Person affected and extent of injury

Physical Injury

- Self
 Family Member _____
 Fire Service
 Other _____
 None

Extent of Injury

- Death
 Admitted to Hospital
 E R Care
 Doctor's Care
 Injured missed school/work

Person/s affected and extent of injury

Physical Injury

- Self
 Family Member _____
 Fire Service
 Other _____
 None

Extent of Injury

- Death
 Admitted to Hospital
 E R Care
 Doctor's Care
 Injured missed school/work

Juvenile's Attitude

- Denial
 Acceptance
 Regret (wishes the fire had not been set)
 Remorse (feels bad for setting the fire)
 Other school/work

Family's likelihood of following recommendations

- See problem and wants help
 Willing to get help
 Denial of need for assistance
 Justifies child's behavior
 Hostile towards potential help

Substance Abuse at Time of Fire

- Alcohol
 Marijuana
 Other drugs (list) _____

Fire History Data

Occupied Structures Lit on Fire

- None
- One
- Two ~ Fours
- Greater than four

Past Items Burned

- Leaves
- Plastic toys
- Paper
- Chemicals
- Person or clothing that a person is wearing
- Small Objects
- Automobile, truck, van, trailer
- Clothing
- Spray cans/cologne

Age firesetting/play began

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

Locations of Index Fires

- Residential Building
- School
- Shed
- Garage
- Barn
- Trash Can
- Dumpster
- Outdoors (Write-in) _____
- Others (Write-in) _____

Explosive use

- Firecrackers
- Other Fireworks
- M-80s
- Others (Write-in) _____
- Homemade explosive(s)
- Chemical explosives
- Dynamite

Ignition Source

- Match
- Lighter
- Candles
- Others (Write-in) _____
- Spray can torch
- Propane torch

Word Guardian uses to describe level of fire interest

- None
- Curiosity
- Others (Write-in) _____
- Fascination with Fire in real life
- Fascination with fire in media (video games, movies, etc.)

Is youth's fire activity becoming progressively more dangerous?

- YES
- NO
- Unclear

Person affected and extent of injury

Physical Injury

- Self
- Family Member _____
- Fire Service
- Other _____
- None

Extent of Injury

- Death
- Admitted to Hospital
- ER Care
- Doctor's Care
- Injured missed school/work

Person affected and extent of injury

Physical Injury

- Self
- Family Member _____
- Fire Service
- Other _____
- None

Extent of Injury

- Death
- Admitted to Hospital
- ER Care
- Doctor's Care
- Injured missed school/work

Person affected and extent of injury

- | | |
|--|---|
| <input type="radio"/> Self | <input type="radio"/> Death |
| <input type="radio"/> Family Member: _____ | <input type="radio"/> Admitted to Hospital |
| <input type="radio"/> Fire Service | <input type="radio"/> ER Care |
| <input type="radio"/> Other: _____ | <input type="radio"/> Doctor's Care |
| <input type="radio"/> None | <input type="radio"/> Injury missed school/work |

Person affected and extent of injury

- | | |
|--|---|
| <input type="radio"/> Self | <input type="radio"/> Death |
| <input type="radio"/> Family Member: _____ | <input type="radio"/> Admitted to Hospital |
| <input type="radio"/> Fire Service | <input type="radio"/> ER Care |
| <input type="radio"/> Other: _____ | <input type="radio"/> Doctor's Care |
| <input type="radio"/> None | <input type="radio"/> Injury missed school/work |

Seriousness of other conduct problems

- Juvenile has been adjudicated of crimes against people
- Juvenile has been adjudicated on crimes against property
- Significant noncompliance in school
- Significant noncompliance in home
- History of animal cruelty
- History of sexual offense
- Aggression toward people

Maltreatment issues as reported by guardian

- The child was physically abused
- The child was sexually abused
- The child was neglected by a caretaker
- No maltreatment is acknowledged
- Other: _____

Tier II Data – MDT Data and Recommendations

Systems participating in Youth's MDT

- Education Police
 Special Education Juvenile Justice
 Fire Service Mental Health
 Others (Write in) _____

Mental Health Diagnosis – Documented Primary Diagnosis

- ADD/ADHA Oppositional Defiant Disorder
 Depression None
 Conduct Disorder Bipolar Disorder
 Others (Write-in) _____

Mental Health Diagnosis – Documented, Primary Diagnosis Secondary Diagnosis

- ADD/ADHA Oppositional Defiant Disorder
 Depression None
 Conduct Disorder Bipolar Disorder
 Others (Write-in) _____

MDT Recommendations

- Removal from natural environment due to fire risk
 Referral to Children and Youth Agency
 Legal Prosecution of Youth
 Fire Safety Education
 Mental Health Services
 Others (Write-in) _____

Verified Medications for Youth

- Anti-depressant medications (Prozac, Paxal, Zoloft, Lexapro, etc.)
 Atypicals (Risperidol, Zyprezia, Abilify)
 Ritalin, Concerta, Adderall, Dexadrine Strattera
 Lithium, depokote
 Others (Write-in) _____

Tier III Data – Follow Up

Did Juvenile and family follow up on Fire Safety Education?

Yes No

How many education sessions did juvenile attend

1 2 3 4 5
 6 7 8 9 10

If Mental Health services were recommended, what services have been provided?

- In home (or school) services such as Therapeutic Support Services (TSS)
 Individual therapy/counseling Family counseling or therapy
 Consultation with a psychiatrist for medications
 Other _____

How many education sessions did at least one parental figure attend?

1 2 3 4 5 6 7 8 9 10

Did juvenile follow through on Mental Health Recommendations?

Yes No

Was a referral made to Children and Youth?

Yes No

What services did Children and Youth provide?

Did the MDT recommend legal action?

Yes No

What legal action was taken?

- Placed on Probation
 Sent to Detention
 Sent to Juvenile System
 Other _____

Was the child removed from their home environment due to their fire risk?

Yes No

Has the juvenile played with matches, lighters, or candles since attending service?

Yes No

Has the child set another fire?

Yes No

Has the juvenile been involved with any explosives since services were provided?

Yes No

FIRE INDEX

Person affected and extent of injury

Physical Injury	Extent of Injury
<input type="radio"/> Self	<input type="radio"/> Death
<input type="radio"/> Family Member_____	<input type="radio"/> Admitted to Hospital
<input type="radio"/> Fire Service	<input type="radio"/> ER Care
<input type="radio"/> Other_____	<input type="radio"/> Doctor's Care
<input type="radio"/> None	<input type="radio"/> Injured missed school/work

Person affected and extent of injury

Physical Injury	Extent of Injury
<input type="radio"/> Self	<input type="radio"/> Death
<input type="radio"/> Family Member_____	<input type="radio"/> Admitted to Hospital
<input type="radio"/> Fire Service	<input type="radio"/> ER Care
<input type="radio"/> Other_____	<input type="radio"/> Doctor's Care
<input type="radio"/> None	<input type="radio"/> Injured missed school/work

Person affected and extent of injury

Physical Injury	Extent of Injury
<input type="radio"/> Self	<input type="radio"/> Death
<input type="radio"/> Family Member_____	<input type="radio"/> Admitted to Hospital
<input type="radio"/> Fire Service	<input type="radio"/> ER Care
<input type="radio"/> Other_____	<input type="radio"/> Doctor's Care
<input type="radio"/> None	<input type="radio"/> Injured missed school/work

Person affected and extent of injury

Physical Injury	Extent of Injury
<input type="radio"/> Self	<input type="radio"/> Death
<input type="radio"/> Family Member_____	<input type="radio"/> Admitted to Hospital
<input type="radio"/> Fire Service	<input type="radio"/> ER Care
<input type="radio"/> Other_____	<input type="radio"/> Doctor's Care
<input type="radio"/> None	<input type="radio"/> Injured missed school/work

Person affected and extent of injury

Physical Injury	Extent of Injury
<input type="radio"/> Self	<input type="radio"/> Death
<input type="radio"/> Family Member_____	<input type="radio"/> Admitted to Hospital
<input type="radio"/> Fire Service	<input type="radio"/> ER Care
<input type="radio"/> Other_____	<input type="radio"/> Doctor's Care
<input type="radio"/> None	<input type="radio"/> Injured missed school/work

Person affected and extent of injury

Physical Injury	Extent of Injury
<input type="radio"/> Self	<input type="radio"/> Death
<input type="radio"/> Family Member_____	<input type="radio"/> Admitted to Hospital
<input type="radio"/> Fire Service	<input type="radio"/> ER Care
<input type="radio"/> Other_____	<input type="radio"/> Doctor's Care
<input type="radio"/> None	<input type="radio"/> Injured missed school/work



Person affected and extent of injury

<input type="radio"/> Self	<input type="radio"/> Death
<input type="radio"/> Family Member: _____	<input type="radio"/> Admitted to Hospital ER
<input type="radio"/> Fire Service	<input type="radio"/> Care
<input type="radio"/> Other: _____	<input type="radio"/> Doctor's Care
<input type="radio"/> None	<input type="radio"/> Injury missed school/work

Person affected and extent of injury

<input type="radio"/> Self	<input type="radio"/> Death
<input type="radio"/> Family Member: _____	<input type="radio"/> Admitted to Hospital
<input type="radio"/> Fire Service	<input type="radio"/> ER Care
<input type="radio"/> Other: _____	<input type="radio"/> Doctor's Care
<input type="radio"/> None	<input type="radio"/> Injury missed school/work

Person affected and extent of injury

<input type="radio"/> Self	<input type="radio"/> Death
<input type="radio"/> Family Member: _____	<input type="radio"/> Admitted to Hospital
<input type="radio"/> Fire Service	<input type="radio"/> ER Care
<input type="radio"/> Other: _____	<input type="radio"/> Doctor's Care
<input type="radio"/> None	<input type="radio"/> Injury missed school/work

Person affected and extent of injury

<input type="radio"/> Self	<input type="radio"/> Death
<input type="radio"/> Family Member: _____	<input type="radio"/> Admitted to Hospital
<input type="radio"/> Fire Service	<input type="radio"/> ER Care
<input type="radio"/> Other: _____	<input type="radio"/> Doctor's Care
<input type="radio"/> None	<input type="radio"/> Injury missed school/work

Person affected and extent of injury

<input type="radio"/> Self	<input type="radio"/> Death
<input type="radio"/> Family Member: _____	<input type="radio"/> Admitted to Hospital
<input type="radio"/> Fire Service	<input type="radio"/> ER Care
<input type="radio"/> Other: _____	<input type="radio"/> Doctor's Care
<input type="radio"/> None	<input type="radio"/> Injury missed school/work

Person affected and extent of injury

<input type="radio"/> Self	<input type="radio"/> Death
<input type="radio"/> Family Member: _____	<input type="radio"/> Admitted to Hospital
<input type="radio"/> Fire Service	<input type="radio"/> ER Care
<input type="radio"/> Other: _____	<input type="radio"/> Doctor's Care
<input type="radio"/> None	<input type="radio"/> Injury missed school/work

APPENDIX D

MDT Review Form

**Youth Firesetter Intervention Program
MDT Review Form**

Name: _____ **Date of Review:** _____

Address: _____

DOB: _____ **Age:** ____ **Telephone #:** _____

Assessor: _____ **Date of Assessment:** _____

Youth Intervention Score: _____ **Parent Interview Score:** _____

Recommendations: _____ Fire Education _____ Psychological Evaluation
 _____ OPT _____ RTF _____ Therapeutic Foster Care
 _____ BHRS _____ FBMHS _____ Group

Agencies: _____ CYA _____ JPP _____ D/A

Concerns: _____

Panel Participants

Signature – MDT Chair **Organization** **Date**

Candidate Signature **Organization** **Date**

Firefighter Code of Ethics

I understand that I have the responsibility to conduct myself in a manner that reflects proper ethical behavior and integrity. In so doing, I will help foster a continuing positive public perception of the fire service.

Therefore, I pledge the following...

- Always conduct myself, on and off duty, in a manner that reflects positively on myself, my department, and the fire service in general.
- Accept responsibility for my actions and for the consequences of my actions.
- Support the concept of fairness and the value of diverse thoughts and opinions.
- Avoid situations that would adversely affect the credibility or public perception of the fire service profession.
- Be truthful and honest at all times and report instances of cheating or others' dishonest acts that compromise the integrity of the fire service.
- Conduct my personal affairs in a manner that does not improperly influence the performance of my duties or bring discredit to my organization.
- Be respectful and conscious of each member's safety and welfare.
- Recognize that I serve in a position of public trust that requires stewardship in the honest and efficient use of publicly owned resources, including uniforms, facilities, vehicle and equipment, and that these are protected from misuse and theft.
- Exercise professionalism, competence, respect, and loyalty in the performance of my duties and use information, confidential or otherwise, gained by virtue of my position, only to benefit those I am entrusted to serve.
- Avoid financial investments, outside employment, outside business interests or activities that conflict with or are enhanced by my official position or have the potential to create the perception of impropriety.
- Never propose or accept personal rewards, special privileges, benefits, advancement, honors or gifts that may create a conflict of interest, or the appearance thereof.
- Never engage in activities involving alcohol or other substance use or abuse that can impair my mental state or the performance of my duties and compromise safety.
- Never discriminate on the basis of race, religion, color, creed, age, marital status, national origin, ancestry, gender, sexual preference, medical condition, or handicap.
- Never harass, intimidate, or threaten fellow members of the service or the public and stop or report the actions of other firefighters who engage in such behaviors.
- Responsibly use social networking, electronic communications, or other media technology opportunities in a manner that does not discredit, dishonor, or embarrass my organization, the fire service, and the public. I also understand that failure to resolve or report inappropriate use of this media equates to condoning this behavior.

Developed by the National Society of Executive Fire Officers