



PENNSYLVANIA STATE FIRE ACADEMY YOUTH FIRESETTING PREVENTION & INTERVENTION SPECIALIST SKILL STATIONS

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.

Youth Firesetting Prevention & Intervention Specialist Skills

NFPA 1035 – Chapter 13 (2024 Edition)

Station A	Interview Preparation	Mandatory Station
Station B	Schedule the Interview	Mandatory Station
Station C	Data Entry	Mandatory Station
Station D	Conduct the Interview	Mandatory Station
Station E	Present a Fire Education Lesson	Mandatory Station
Station F	Implement the Referral Process	Mandatory Station
Station G	Case Follow-up	Mandatory Station



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STATION A – Interview Preparation		Reference: NFPA 1030 (2024 Edition) Chapter 13 Mandatory Station: JPRs 13.2.1, 13.2.2, 13.1.2, 13.1.3, 13.4.1	
Test Site	Test Date	Candidate #	Check the Test Type ____ Initial ____ Retest

Directions:

Part 1: Given approved forms, and program policies and procedures, assemble the forms and materials so the screening process is conducted in accord with those policies and procedures. Then assemble interview forms, tools, and resources so an interview with the child and the family / care-giver can be conducted.

Part 2: Given the screening information, review a case file to become familiar with the circumstances of the fire-setter’s incident.

Performance Outcome: Pass / Fail is determined by **5 of 5** tasks being correctly performed.

No.	Tasks	Yes	No
1	Identifies, assembles, and prepares all forms for the interview process: <ul style="list-style-type: none"> • Release of Information _____ • Release of Liability _____ • Parent interview _____ • Parent checklist _____ • Youth interview _____ • Home fire safety check _____ • Scoring & report writing _____ • Follow up documents _____ 		
2	Materials were assembled in an organized manner		
3	Reviews and determines information needed to complete the child and family interview		
4	Communicates effectively both orally and in writing		
5	Identifies appropriate forms, tools and/or resources based on policies and procedures of the program		
Please indicate skill outcome		PASS	FAIL

Evaluator Comments: _____

Evaluator Signature: _____ **Evaluator #** _____



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STATION B – Schedule Interview		Reference: NFPA 1030 (2024 Edition) Chapter 13 Mandatory Station: JPRs 13.2.3, 13.2.4, 13.4.2	
Test Site	Test Date	Candidate #	Check the Test Type ____ Initial ____ Retest

Evaluator Note: If a local SOG is used, then a copy of the document must be attached.

Directions: Given a scenario and the PA State Protocol, create a case file and initiate contact with the family. Utilize your personal work schedule so that all interviews will be conducted on time and in a location agreeable to all parties. Report case assessments to the supervisor in a memo format.

Performance Outcome: Pass / Fail is determined by **6 of 6** tasks being correctly performed.

No.	Tasks	Yes	No
1	Initiates contact with the family		
2	Creates a case file		
3	Schedules a time, date, and place for the screening/interview		
4	Explains the program and its benefits		
5	Identifies, summarizes, and communicates relevant case information to the supervisor		
6	Manages the time appropriately		
		Please indicate skill outcome	
		PASS	FAIL

Evaluator Comments: _____

Evaluator Signature: _____

Evaluator # _____



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STATION C – Data Entry		Reference: NFPA 1030 (2024 Edition) Chapter 13 Mandatory Station: JPR 13.2.5	
Test Site	Test Date	Candidate #	Check the Test Type ____ Initial ____ Retest

Directions: Review a completed file, and using approved forms and/or database, program policies and procedures, enter/record and secure data. Refer to the Candidate Handbook Appendix C.

Performance Outcome: Pass / Fail is determined by **4 of 4** tasks being correctly performed.

No.	Tasks	Yes	No
1	Identifies and gathers pertinent data		
2	Complies and organizes all pertinent data		
3	Records data in a database or approved data form		
4	Ensures data is secure		
Please indicate skill outcome		PASS	FAIL

Evaluator Comments: _____

Evaluator Signature: _____ **Evaluator #** _____



**PENNSYLVANIA STATE FIRE ACADEMY
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STATION D – Conduct Interview		Reference: NFPA 1030 (2024 Edition) Chapter 13 Mandatory Station: JPRs 13.4.2, 13.4.3, 13.2.4, 13.2.3, 13.2.1, 13.4.4, 13.5.1	
Test Site	Test Date	Candidate #	Check the Test Type ____ Initial ____ Retest

Evaluator Note: This skill station must be done in person.

Directions: Given approved forms and program policies and procedures, conduct an assessment, interview the needed individuals, and document the findings; additionally, manage your time efficiently and demonstrate the ability to communicate effectively both orally and in a written manner.

Performance Outcome: Pass / Fail is determined by **10 of 12** tasks being correctly performed.

No.	Tasks	Yes	No
1	Identifies self to the individuals		
2	Identifies and assembled all forms for the screening/interview process		
3	Establishes the purpose and limits of the screening/interview		
4	Establishes rapport with the youth/child and family		
5	Gathers relevant information		
6	Identifies and intervenes in any immediately life threatening situations		
7	Reports any suspected abuse or neglect		
8	Advises the family of possible intervention options		
9	Records and reports observations and summarizes the findings		
10	Communicates effectively both orally and in writing		
11	Uses professional interview techniques		
12	Manages time appropriately		
Please indicate skill outcome		PASS	FAIL

Evaluator Comments: _____

Evaluator Signature: _____ **Evaluator #** _____



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STATION E – Present a Fire Education Lesson		Reference: NFPA 1030 (2024 Edition) Chapter 13 Mandatory Station: JPRs 13.4.5, 13.1.2, 13.1.3	
Test Site	Test Date	Candidate #	Check the Test Type ____ Initial ____ Retest

Evaluator Note: This skill station must be done in person.

Directions: Initiate an educational intervention(s) with identified learning objectives, presentation skills and methods, and using the lesson plan, present the lesson. The presentation should cover legal consequences of arson and illegal use of explosives.

Performance Outcome: Pass / Fail will be determined by **7 of 10** tasks being correctly performed.

No.	Tasks	Yes	No
1	Dressed appropriately for the subject taught		
2	Adjusts the learning environment (i.e., seating arrangement, lighting, ventilation, noise control, AV arrangement, etc.) for an effective presentation		
3	Selects an appropriate instructional delivery method (e.g., lecture, demonstration, etc.) for subject matter taught		
4	Uses appropriate voice pitch and modulation and appropriate gestures		
5	Avoids all inappropriate language, slang, and distracting mannerisms		
6	Demonstrates familiarity with and competence in the lesson material, and understands the legal consequences		
7	Utilizes appropriate instructional aids/props in lesson content delivery		
8	Answers a question effectively from the child and/or family		
9	Follows the lesson plans and provides effective transitions using the four-step process		
10	Stays within the lesson time frame (+/- 5 minutes)		
Please indicate skill outcome		PASS	FAIL

Evaluator Comments: _____

Evaluator Signature: _____

Evaluator # _____



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STATION F – Implement Referral Process		Reference: NFPA 1030 (2024 Edition) Chapter 13 Mandatory Station: JPRs 13.4.6, 13.4.4, 13.3.1, 13.1.2, 13.1.3	
Test Site	Test Date	Candidate #	Check the Test Type ____ Initial ____ Retest

Candidate Note: You are required to document your participation in five (5) cases. The following form (next page) shall be used to summarize your participation. Your supervisor must sign the summary sheets verifying you have completed the reports and they are on file. Refer to the Candidate Handbook Appendix D.

Directions: Given a current interagency network list and program policies and procedures, coordinate with the appropriate entities, to include mental wellness, then implement the referral process so the juvenile fire-setter and their family can expediently gain access to needed services and assure that priority needs are met in a timely fashion.

Performance Outcome: Pass / Fail will be determined by **5 of 5** tasks being correctly performed.

No.	Tasks	Yes	No
1	Identifies and utilizes forms/format		
2	Identifies appropriate educational activity information		
3	Selects and assembles information on forms/format provided		
4	Records accurately the appropriate educational activity information on the forms		
	Coordinates with the appropriate entity the mental assessment needs of the youth firesetter.		
5	Materials are properly completed, assembled in an organized manner and submitted		
Please indicate skill outcome		PASS	FAIL

Evaluator Comments: _____

Evaluator Signature: _____ **Evaluator #** _____



PENNSYLVANIA STATE FIRE ACADEMY YOUTH FIRESETTING PREVENTION & INTERVENTION SPECIALIST SKILL STATIONS

STATION G – Case Follow-up		Reference: NFPA 1030 (2024 Edition) Chapter 13 Mandatory Station: JPRs 13.5.1, 13.5.2, 13.1.2, 13.1.3	
Test Site	Test Date	Candidate #	Check the Test Type _____ Initial _____ Retest

Directions: Given a scenario, completed intervention(s) and referrals, and approved forms and materials, collect and record feedback from the juvenile fire-setter and their family at designated intervals, and measure changes in juvenile fire-setter and family behaviors so that program results are documented. Documentation shall be completed in accordance with program policies/procedures and regulations governing confidentiality.

Performance Outcome: Pass / Fail is determined by **4 of 4** tasks being correctly performed.

No.	Tasks	Yes	No
1	Candidate completes the follow-up forms at the listed intervals: a. three months _____ b. six months _____ c. twelve months _____ d. twenty-four months _____		
2	Forms are organized, accurate and complete		
3	Communicates effectively both orally and in writing		
4	Identifies appropriate forms, tools and/or resources based on policies and procedures of the program		
Please indicate skill outcome		PASS	FAIL

Evaluator Comments: _____

Evaluator Signature: _____ **Evaluator #** _____