



YFS Complete Screening Tool

Youth Name (Last, First)

Case Number

Date of Screening

Specialist Name

Agency

Date of Incident

PART A — YOUTH INTERVIEW

Ask each question directly to the youth. Record responses and score as indicated. Adapt language for the youth's developmental level.

A1. How did the fire start? Tell me what happened.

- ☐ Youth not involved / unclear
- ☐ Accidental — playing with fire
- ☐ Intentional

Notes: _____

A2. Have you ever started a fire before?

- ☐ No prior incidents
- ☐ 1 prior incident
- ☐ 2 or more prior incidents

Notes: _____

A3. Why did you start the fire?

- ☐ Curiosity / experimentation
- ☐ Peer pressure / dares
- ☐ Anger / intentional harm
- ☐ Other

Notes: _____

A4. What do you think happens when something catches fire?

- ☐ Demonstrates understanding of danger
- ☐ Partial understanding
- ☐ No understanding of risk

Notes: _____

A5. Did anyone know you were playing with fire?

- ☐ No — unsupervised
- ☐ Peers present
- ☐ Adult was nearby

Notes: _____

A6. Where did you get the matches / lighter / ignition source?

- ☐ Did not know source
- ☐ Easily accessible in home
- ☐ Obtained deliberately

Notes: _____

A7. How do you feel about what happened?

- ☐ Remorse expressed
- ☐ Indifferent
- ☐ No remorse / proud

Notes: _____

A8. Has anyone talked to you about fire safety before?

- ☐ Yes — recalls education
- ☐ Vague recollection
- ☐ No prior education

Notes: _____



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PART B — PARENT / CAREGIVER CHECKLIST

Complete with caregiver while youth completes pre-test. Rate each item.

B1	Youth has prior firesetting incidents	■	■	■
B2	Youth has access to ignition sources at home	■	■	■
B3	Youth shows general impulsivity or lack of judgment	■	■	■
B4	Youth has witnessed or experienced violence or trauma	■	■	■
B5	Youth has a diagnosed behavioral or mental health disorder	■	■	■
B6	Youth is currently receiving mental health services	■	■	■
B7	Youth has had recent significant stressor (loss, move, divorce, etc.)	■	■	■
B8	Caregiver feels equipped to address firesetting behavior at home	■	■	■
B9	Caregiver is aware of how youth obtained ignition source	■	■	■
B10	Home has functioning smoke alarms	■	■	■
B11	Family has a practiced home escape plan	■	■	■
B12	Youth has peer relationships or social connections	■	■	■

PART C — PARENT / CAREGIVER INTERVIEW

C1. Describe the youth's behavior in the days leading up to the incident.

C2. Has the youth been under unusual stress recently? Describe.

C3. Does the youth have a history of fire-related behavior or curiosity?

C4. What is the youth's typical response to rules and discipline?

C5. What support does the family have at home?



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PART D — SCORING SUMMARY

Score based on combined findings from Parts A, B, and C. Use your actuarial screening tool results to determine the intervention pathway.

Part A — Youth Interview		
Part B — Caregiver Checklist		
Part C — Caregiver Interview		
Overall Risk Level	■ Low ■ Moderate ■ High	

PART E — SPECIALIST OBSERVATIONS

Youth appearance and demeanor during interview

Quality of parent/caregiver engagement

Home environment observations (if applicable)

Barriers to intervention (language, resistance, logistics)

Strengths observed (protective factors)

PART F — ASSESSMENT SUMMARY & INTERVENTION PLAN

Recommended intervention pathway:

- Educational intervention only — low concern
- Educational intervention + monitoring — moderate concern
- Mental health referral before / alongside education — high concern
- Referral to juvenile justice / other agency
- No further action — accidental / no risk factors

Summary and plan notes:



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PART G — FOLLOW-UP RECORD

Complete at 6, 12, and 18 months post-intervention. Document contact attempts and outcomes.

6-Month Follow-Up

Date of Contact

Method

Contact Made?

☐ Yes ☐ No ☐ Attempted

Any recurrence of firesetting? ☐ Yes ☐ No ☐ Unknown

Notes:

12-Month Follow-Up

Date of Contact

Method

Contact Made?

☐ Yes ☐ No ☐ Attempted

Any recurrence of firesetting? ☐ Yes ☐ No ☐ Unknown

Notes:

18-Month Follow-Up

Date of Contact

Method

Contact Made?

☐ Yes ☐ No ☐ Attempted

Any recurrence of firesetting? ☐ Yes ☐ No ☐ Unknown

Notes:

Specialist Signature

Printed Name

Date