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Mental Health Association, Inc.
STANDARD CAPABILITY OF SELF-PRESERVATION TEST

Participant Tested: _____ DOB: _____

Location of Test: _____ Date of Test: _____

Program Model: _____ Individual Administering Test: _____

1. Name some ways that you can tell when there's a fire: (check all that was indicated)

- Seeing Smoke _____ Smelling Smoke _____
- Seeing Flames _____ Feeling Heat _____
- Hearing the Smoke Alarm _____ Hearing Someone Yell Fire _____

(Three out of the above six responses must be mentioned to satisfactorily answer this question.)

GRADE: _____ Satisfactory _____ Unsatisfactory

2. What would you do if the house were on fire: _____

(Note: Must mention leaving or getting out of the house/apartment.)

GRADE: _____ Satisfactory _____ Unsatisfactory

3. This question must be asked: "Please leave the house/apartment." Time Taken: _____

Note: The person must be able to leave the apartment from the sleeping area or farthest point from the main route or egress. Maximum time acceptable is 2 ½ minutes.

GRADE: _____ Satisfactory _____ Unsatisfactory

CONCLUSIONS OF TEST ADMINISTRATION:

To be capable of self-preservation there must be no unsatisfactory scores.

- _____ Capable of self-preservation at this time.
- _____ Limited Capability (Specify restrictions) _____
- _____ Not capable of self-preservation at this time.

Signature of Verification: _____ Date: _____