**ABILITY TO SELF PRESERVE CHECKLIST**

This checklist is used as a tool to assess an individual’s ability to self preserve in case of a fire or severe weather including emergency situations. Maintain with individual tracking/training records.

| Name: ____________________________________________ | Date reviewed/revised: ____________________________________________ |

Describe any difficulty in the following areas:

**Vision:**
- Glasses [ ] Yes [ ] No
- Other vision problems: ____________________________________________

**Hearing:**
- Hearing Aids [ ] Yes [ ] No
- Other hearing problems: ____________________________________________

**Communication:** Check One
- [ ] Clear and Understandable—can give correct information/communicate needs
- [ ] Limited—has few understandable words, can communicate some needs, and may use signs/gestures
- [ ] Impaired—cannot communicate needs

**Ambulation/Mobility:**
- Can walk independently [ ] Yes [ ] No
- Uses walker/cane [ ] Yes [ ] No
- Uses wheelchair independently [ ] Yes [ ] No
- Dependent [ ] Yes [ ] No

**Behavior Problems: Violent or Aggressive Behaviors [ ] Yes [ ] No**
Describe ____________________________________________________________

Best way to approach/handle the situation: ____________________________________________________________

Reaction(s) to loud or sudden noises/movements: ____________________________________________

Can understand and follow directions: [ ] Yes [ ] No (If no indicate additional support required)

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________
<table>
<thead>
<tr>
<th></th>
<th>S</th>
<th>U</th>
<th>Comments to include:</th>
<th>Indicate the level of assistance required (Individual dependent for some activities — unable to perform)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has adequate knowledge of fire signs and signals?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Has adequate knowledge of procedures during a fire? Reacts appropriately—exits area, stays calm, follows directions</td>
<td></td>
<td></td>
<td>Indicate if assistance needed.</td>
<td></td>
</tr>
<tr>
<td>Able to exit the building in 2 ½ minutes or less from the appropriate route of exit?</td>
<td></td>
<td></td>
<td>Indicate if assistance needed.</td>
<td></td>
</tr>
<tr>
<td>Has adequate knowledge of severe weather sounds and signals?</td>
<td></td>
<td></td>
<td>Indicate if assistance needed.</td>
<td></td>
</tr>
<tr>
<td>Has adequate knowledge of procedures during severe weather? Reacts appropriately—goes to appropriate area, stays calm, follows directions.</td>
<td></td>
<td></td>
<td>Indicate if assistance needed.</td>
<td></td>
</tr>
<tr>
<td>Able to go to designated area 2 ½ minutes or less from the appropriate route of exit?</td>
<td></td>
<td></td>
<td>Indicate if assistance needed.</td>
<td></td>
</tr>
<tr>
<td>Has a basic skill to contact 911 in an emergency? Reacts appropriately—dials number correctly, stays calm, answers questions and can give basic directions to the emergency operator.</td>
<td></td>
<td></td>
<td>Indicate if assistance is needed.</td>
<td></td>
</tr>
<tr>
<td>Understands emergency and non-emergency procedures? (emergency: fire, severe weather, injury requiring medical attention vs. cut on finger)</td>
<td></td>
<td></td>
<td>Indicate if assistance is needed.</td>
<td></td>
</tr>
<tr>
<td>Has adequate knowledge of Vehicle safety skills? Use of seatbelt, reacts appropriately in heavy traffic, vehicle fire awareness.</td>
<td></td>
<td></td>
<td>Indicate if assistance is needed.</td>
<td></td>
</tr>
<tr>
<td>Has adequate knowledge of Personal safety skills? Stranger awareness, ability to determine when/not to give out personal information.</td>
<td></td>
<td></td>
<td>Indicate if assistance is needed.</td>
<td></td>
</tr>
</tbody>
</table>

S: satisfactory    U: unsatisfactory
Self-preservation Status:
☐ Capable of independent self-preservation (unimpaired)
☐ Capable of self-preservation with verbal instruction (partially impaired)
☐ Capable of self-preservation with physical instruction (impaired)
☐ Not capable of self-preservation at this time.

Additional Training required ☐ YES ☐ NO

Indicate the need to develop a plan to train in the following areas of self-preservation:

☐ Fire
☐ Severe weather (to include tornado, thunder storm, power outages, disaster/ evacuation plans)
☐ Medical Emergencies (to include medical emergency needs)
☐ Emergency calling abilities (911)
☐ Vehicle Safety (to include while accident safety skills)
☐ Personal Safety (to include identity theft)

___________________________________________________________________________________________________________________

Printed Name or names of employee (s) who conducted assessment of skills with the individual and their credentials

__________________________________________ Date

__________________________________________ Date

__________________________________________ Date