

Psychiatric Rehabilitation Association CPRP Certified Psychiatric Rehabilitation Practitioner Exam Questions Get Excellent Scores

Certified Psychiatric Rehabilitation Practitioner (CPRP) Exam Prep Questions With Complete Solutions

291). Mental health affects about 20% of the population.

Ans: True

292). Psychiatric rehabilitation emerged out of the deinstitutionalization movement of the 1930's.

Ans: False

293). _____ is/are example(s) of evidence-based practices.

Ans: All of the above

294). Delusion are bizarre beliefs or ideas that a person cannot be talked out of while hallucinations are incorrect sensory information that the individual experiences as real.

Ans: True

295). Mood disorders effect between

Ans: about 5-20% of the population.

296). The "vermont study" by dr. harding was one of the first longitudinal studies to demonstrate that persons with schizophrenia could have positive long-term outcomes.

Ans: True

297). Illness management and recovery is an evidence based practice consisting of

Ans: psychoeducation and self-management strategies.

298). Recovery is a operationalized construct that can only be measured by medical doctors.

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Psychiatric Rehabilitation Association Certified Psychiatric Rehabilitation Practitioner Sample Questions (Q110-Q115):

NEW QUESTION # 110

Which of the following is a peer-developed service now recognized as an evidence-based practice?

- A. **Wellness Recovery Action Plan**
- B. Advanced Mental Health Directives
- C. Self-Directed Care
- D. Supported Employment

Answer: A

Explanation:

This question falls under Domain V: Strategies for Facilitating Recovery, which emphasizes evidence-based practices (EBPs) in psychiatric rehabilitation, including peer-developed services. The CPRP Exam Blueprint identifies the Wellness Recovery Action Plan (WRAP) as "a peer-developed, evidence-based practice that empowers individuals to manage their mental health through self-directed recovery planning." WRAP, developed by Mary Ellen Copeland and peer advocates, is widely recognized for its research-backed effectiveness in promoting recovery.

* Option D: The Wellness Recovery Action Plan (WRAP) is a peer-developed service that has been established as an EBP through rigorous research demonstrating its impact on symptom management, self-advocacy, and recovery. It involves creating a personalized plan for wellness, triggers, and crisis management, aligning with recovery-oriented principles.

* Option A: Advanced Mental Health Directives (e.g., psychiatric advance directives) are tools for self-directed care but are not peer-developed services nor widely recognized as EBPs in the same way as WRAP.

* Option B: Self-Directed Care is a model allowing individuals to manage their service funds but is not specifically peer-developed or universally classified as an EBP.

* Option C: Supported Employment (e.g., Individual Placement and Support) is an EBP but was developed by researchers and professionals, not primarily by peers.

Extract from CPRP Exam Blueprint (Domain V: Strategies for Facilitating Recovery):

"Tasks include: 3. Implementing peer-developed evidence-based practices, such as the Wellness Recovery Action Plan (WRAP), to support self-directed recovery."

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Psychiatric Rehabilitation Association (PRA). (2014). CPRP Exam Blueprint. Retrieved from PRA Certification Handbook.

PRA. (2024). CPRP Exam Preparation & Primer Online 2024 Course: Module 6 - Strategies for Facilitating Recovery.

Copeland, M. E. (2002). Wellness Recovery Action Plan. Peach Press (recommended CPRP study literature, details WRAP as an EBP).

NEW QUESTION # 111

A practitioner provides services to two individuals with psychiatric disabilities who are roommates. One roommate told the practitioner she is concerned that the other is not taking his medications correctly. The practitioner would:

- A. Privately convey the concern to the other roommate.
- B. Talk about the issue with the two roommates together.
- **C. Listen to the roommate without disclosing any information.**
- D. Report the information to the roommate's psychiatrist.

Answer: C

Explanation:

This question pertains to Domain II: Professional Role Competencies, which emphasizes maintaining confidentiality and professional boundaries in interactions with individuals and stakeholders. The CPRP Exam Blueprint and PRA Code of Ethics state that "practitioners must protect confidentiality by not disclosing information about one individual to another, even in shared living situations, unless consent is provided." The scenario involves a roommate sharing concerns about another's medication adherence, and the practitioner must respond ethically while respecting confidentiality.

* Option A: Listening to the roommate without disclosing any information is the best response, as it respects the confidentiality of the

other roommate while allowing the practitioner to hear the concern.

The practitioner can then address the issue separately (e.g., checking in with the other roommate without revealing the source) or encourage the concerned roommate to discuss it directly, maintaining ethical boundaries.

* Option B: Conveying the concern privately to the other roommate risks breaching confidentiality by implying the source of the information, violating ethical standards.

* Option C: Reporting to the psychiatrist without the individual's consent breaches confidentiality and is inappropriate unless there is imminent risk, which is not indicated.

* Option D: Discussing the issue with both roommates together violates confidentiality by revealing the concern to the other roommate without consent, compromising trust.

Extract from CPRP Exam Blueprint (Domain II: Professional Role Competencies):

"Tasks include: 2. Maintaining confidentiality and professional boundaries, even in shared living arrangements, unless consent is provided or imminent risk is present."

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Psychiatric Rehabilitation Association (PRA). (2014). CPRP Exam Blueprint. Retrieved from PRA Certification Handbook.

PRA. (2024). CPRP Exam Preparation & Primer Online 2024 Course: Module 3 - Professional Role Competencies.

PRA Code of Ethics (2019). Emphasizes confidentiality in multi-client scenarios.

NEW QUESTION # 112

An Illness Management group should include which of the following areas?

- A. Psychoeducation, behavioral tailoring, relapse prevention, and coping skills training
- B. Medication adherence, relapse prevention, and social skills
- C. Behavioral tailoring, conflict resolution, and psychopharmacology
- D. Psychoeducation, conflict resolution, psychopharmacology, and coping skills training

Answer: A

Explanation:

This question pertains to Domain V: Strategies for Facilitating Recovery, which includes implementing evidence-based practices like Illness Management and Recovery (IMR). The CPRP Exam Blueprint specifies that IMR groups focus on "psychoeducation, behavioral tailoring, relapse prevention, and coping skills training to empower individuals to manage their mental health." The question tests knowledge of the core components of an IMR group, an evidence-based practice in psychiatric rehabilitation.

* Option D: This option lists psychoeducation (education about mental health), behavioral tailoring (strategies to incorporate medication or treatment into daily routines), relapse prevention (identifying and managing early warning signs), and coping skills training (techniques to manage symptoms). These are the core components of IMR, as outlined in PRA study materials and IMR protocols.

* Option A: Includes conflict resolution, which is not a standard component of IMR, and psychopharmacology, which is too specific (IMR covers medication management broadly, not detailed pharmacology).

* Option B: Includes conflict resolution, which is not part of IMR, and omits key components like psychoeducation and coping skills training.

* Option C: Includes social skills, which is not a core IMR component (though related to other interventions), and omits psychoeducation and behavioral tailoring, making it incomplete.

Extract from CPRP Exam Blueprint (Domain V: Strategies for Facilitating Recovery):

"Tasks include: 3. Implementing evidence-based practices, such as Illness Management and Recovery, which include psychoeducation, behavioral tailoring, relapse prevention, and coping skills training."

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Psychiatric Rehabilitation Association (PRA). (2014). CPRP Exam Blueprint. Retrieved from PRA Certification Handbook.

PRA. (2024). CPRP Exam Preparation & Primer Online 2024 Course: Module 6 - Strategies for Facilitating Recovery.

Mueser, K. T., et al. (2006). The Illness Management and Recovery Program: Rationale, Development, and Preliminary Findings.

Schizophrenia Bulletin (recommended CPRP study literature, details IMR components).

NEW QUESTION # 113

An individual with a history of substance abuse and problems with anger management has been living with his family for the last four years. His parents told him that he must stop using drugs or move out. When discussing his situation with the practitioner, the individual becomes angry and threatens that he will hurt his family. What is the best initial action for the practitioner?

- A. Provide a quiet environment to speak with the individual
- B. Judge the individual's level of emotional upset

- C. Determine the level of risk in this situation
- D. Encourage the individual to calm down

Answer: C

Explanation:

When an individual makes a threat of harm, the practitioner must prioritize safety through a structured risk assessment. The CPRP Exam Blueprint (Domain I: Interpersonal Competencies) emphasizes assessing risk to ensure safety for the individual and others when threats are expressed (Task I.C.1: "Assess and respond to safety concerns in a trauma-informed manner"). Option A (determine the level of risk in this situation) aligns with this, as it involves evaluating the seriousness, intent, and means of the threat to guide immediate actions, such as de-escalation or referral to crisis services, protecting the family and individual.

Option B (provide a quiet environment) may be a follow-up but is not the initial priority over safety. Option C (judge emotional upset) is vague and less actionable than risk assessment. Option D (encourage calming down) risks escalating the situation without assessing risk. The PRA Study Guide underscores risk assessment as the first step in managing threats, supporting Option A.

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CPRP Exam Blueprint (2014), Domain I: Interpersonal Competencies, Task I.C.1.

PRA Study Guide (2024), Section on Safety and Risk Assessment.

CPRP Exam Preparation & Primer Online 2024, Module on Interpersonal Competencies.

NEW QUESTION # 114

An individual asks a practitioner whether or not he should disclose his disability to a potential employer after being offered a position. One thing the practitioner recommends the individual to consider is:

- A. The relationship between the agency and that employer.
- B. The right of the employer to be made aware of his disability.
- C. That the offer will be rescinded.
- D. How much detail to disclose.

Answer: D

Explanation:

This question falls under Domain III: Community Integration, which focuses on supporting individuals in employment settings, including navigating disability disclosure decisions. The CPRP Exam Blueprint emphasizes "assisting individuals in making informed decisions about disability disclosure, including considering the level of detail to share based on their needs and workplace context." The individual has been offered a job and is deciding whether to disclose his disability, and the practitioner's role is to guide him in weighing relevant factors.

* Option C: Recommending that the individual consider how much detail to disclose is the best guidance, as it empowers him to make an informed decision about whether to disclose and, if so, to what extent (e.g., general disability vs. specific diagnosis). This aligns with recovery-oriented principles of self-determination and the Americans with Disabilities Act (ADA), which does not require disclosure unless accommodations are needed.

* Option A: There is no legal "right" for an employer to be aware of a disability unless it directly impacts job performance or accommodations are requested, making this inaccurate and potentially coercive.

* Option B: Warning that the offer will be rescinded assumes a negative outcome, which is speculative and may discourage the individual unnecessarily.

* Option D: The agency's relationship with the employer is irrelevant to the individual's personal decision about disclosure and does not prioritize his autonomy or needs.

Extract from CPRP Exam Blueprint (Domain III: Community Integration):

"Tasks include: 2. Supporting individuals in making informed decisions about disability disclosure in employment settings, including the level of detail to share. 3. Promoting self-advocacy in workplace contexts."

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Psychiatric Rehabilitation Association (PRA). (2014). CPRP Exam Blueprint. Retrieved from PRA Certification Handbook.

PRA. (2024). CPRP Exam Preparation & Primer Online 2024 Course: Module 4 - Community Integration.

U.S. Equal Employment Opportunity Commission. (2000). EEOC Enforcement Guidance on Disability- Related Inquiries (referenced in CPRP study materials for disclosure guidance).

NEW QUESTION # 115

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