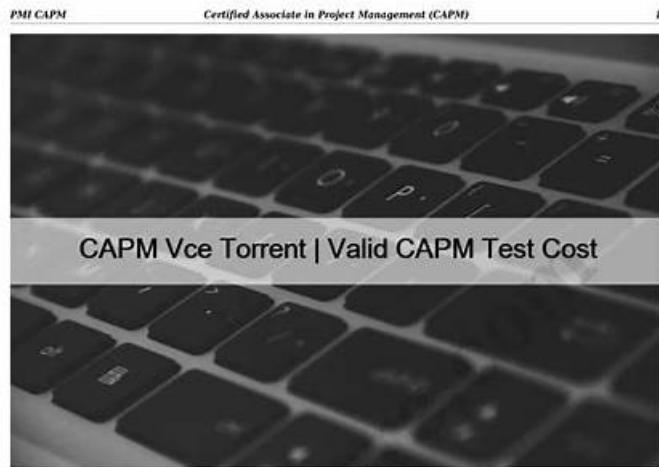


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Psychiatric Rehabilitation Association Certified Child and Family Resiliency Practitioner (CFRP) Sample Questions (Q13-Q18):

NEW QUESTION # 13

When expanding mental health programming for children and families, it is essential that children

- A. be placed in residential treatment to achieve the best outcomes.
- B. are maintained in their home environment to avoid disruption.
- **C. be identified early and provided with effective services and supports.**
- D. are informed of all of their available treatment options and risks.

Answer: C

Explanation:

Systems competencies in the CFRP framework focus on improving mental health service delivery through proactive and effective programming. When expanding mental health programming, it is essential to identify children early and provide them with effective services and supports to prevent escalation of issues and promote recovery. The CFRP study guide states, "Expanding mental health programming requires early identification of children's needs and the provision of effective services and supports to ensure positive outcomes." Informing of treatment options (option A) is important but secondary to early intervention.

Maintaining home environments (option B) is ideal but not always feasible. Residential treatment (option C) is a last resort, not a primary strategy.

* CFRP Study Guide (Section on Systems Competencies): "Essential to expanding mental health programming is the early identification of children and the delivery of effective services and supports to promote recovery and resilience." References: CFRP Study Guide, Section on Systems Competencies, Mental Health Programming.

Psychiatric Rehabilitation Association (PRA) Guidelines on Early Intervention Systems.

NEW QUESTION # 14

During assessment, it is important to encourage children to talk about their experiences and perceptions because children often

- A. repress their memories and feelings.
- B. hide important information about themselves.
- **C. are unaware of their strengths and weaknesses.**
- D. are excited to talk about themselves.

Answer: C

Explanation:

In the CFRP framework, assessment, planning, and outcomes emphasize engaging children in the assessment process to gain insight into their needs and strengths. Encouraging children to talk about their experiences and perceptions is critical because they are often unaware of their strengths and weaknesses, which can inform tailored interventions. The CFRP study guide states, "During assessments, practitioners should encourage children to share their experiences and perceptions, as children are often unaware of their strengths and weaknesses, providing valuable insights for planning." While children may be excited to talk (option A), repress memories (option C), or hide information (option D), these are less universal and less directly tied to the purpose of identifying strengths and weaknesses.

* CFRP Study Guide (Section on Assessment, Planning, and Outcomes): "Encouraging children to discuss their experiences during assessments is essential, as they are often unaware of their strengths and weaknesses, which informs effective planning." References: Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Assessment, Planning, and Outcomes, Child-Centered Assessments.

Psychiatric Rehabilitation Association (PRA) Guidelines on Strengths-Based Assessment.

NEW QUESTION # 15

Assessment of suicidal risk is important because

- A. non-suicidal self-harm should not be considered a predictive suicide risk factor.
- B. there is a need to distinguish between attention-seeking behavior and suicidality.
- **C. there is a continuum of suicidality that determines the level of risk for children.**
- D. children with suicidal thoughts frequently make an attempt within days of the disclosure.

Answer: C

NEW QUESTION # 16

A family is refusing to work with a practitioner, stating they already have too many service providers. They do not want another new person working with their child. What is the BEST course of action for the practitioner to take?

- A. Encourage the family to work with the practitioner for at least one month.
- **B. Coordinate a meeting with the family and all of the service providers.**
- C. Accept the family's decision and move on to the next referral.
- D. Call the other service providers and request they close services with the family.

Answer: B

Explanation:

This question falls under the Systems Competencies domain, which focuses on collaboration with families, service providers, and community systems to support the child's recovery. The PRA CFRP Study Guide 2024-2025 emphasizes that practitioners must prioritize family-centered care and coordinate services to reduce fragmentation and overwhelm, especially when families feel burdened by multiple providers.

Option C (Coordinate a meeting with the family and all of the service providers) is the best course of action. The PRA guidelines highlight that when a family resists additional services due to provider overload, the practitioner should facilitate collaboration among existing providers to streamline care. Coordinating a meeting allows the practitioner to clarify roles, align goals, and address the family's concerns, fostering trust and reducing redundancy. This approach aligns with the PRA's emphasis on systems integration and family empowerment.

Option A (Accept the family's decision and move on to the next referral) is incorrect because it dismisses the family's needs without exploring solutions. The PRA Code of Ethics requires practitioners to advocate for families and seek collaborative resolutions rather than disengaging. Option B (Encourage the family to work with the practitioner for at least one month) is incorrect because it disregards the family's expressed concerns about provider overload. The PRA study guide advises against pressuring families, as this can erode trust and engagement.

Option D (Call the other service providers and request they close services with the family) is incorrect because it oversteps the practitioner's role and disregards the family's autonomy. The PRA framework emphasizes that decisions about service closure should involve the family and be based on their needs, not unilateral action by the practitioner.

References:

Psychiatric Rehabilitation Association, CFRP Study Guide 2024-2025, Section on Systems Competencies: Collaboration and Service Coordination.

PRA Certification Candidate Handbook, Competency Domain 6: Systems Competencies.

PRA Code of Ethics, Principle 2: Family-Centered Practice.

NEW QUESTION # 17

Assessment, planning, linking, and monitoring are core functions of

- A. psychiatric care.
- B. care coordination.
- C. medication management.
- **D. case management.**

Answer: D

Explanation:

In the CFRP framework, community integration involves connecting families to resources through structured processes. Assessment, planning, linking, and monitoring are core functions of case management, which ensures families access appropriate services and supports. The CFRP study guide states, "Case management includes the core functions of assessment, planning, linking, and monitoring to connect children and families with community resources." Medication management (option A) focuses on pharmaceuticals, psychiatric care (option B) involves clinical treatment, and care coordination (option C) is a broader term that

overlaps but is less specific than case management.

* CFRP Study Guide (Section on Community Integration): "The core functions of case management- assessment, planning, linking, and monitoring facilitate access to community resources for children and families." References:
CFRP Study Guide, Section on Community Integration, Case Management.
Psychiatric Rehabilitation Association (PRA) Guidelines on Community Resource Linkage.

NEW QUESTION # 18

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