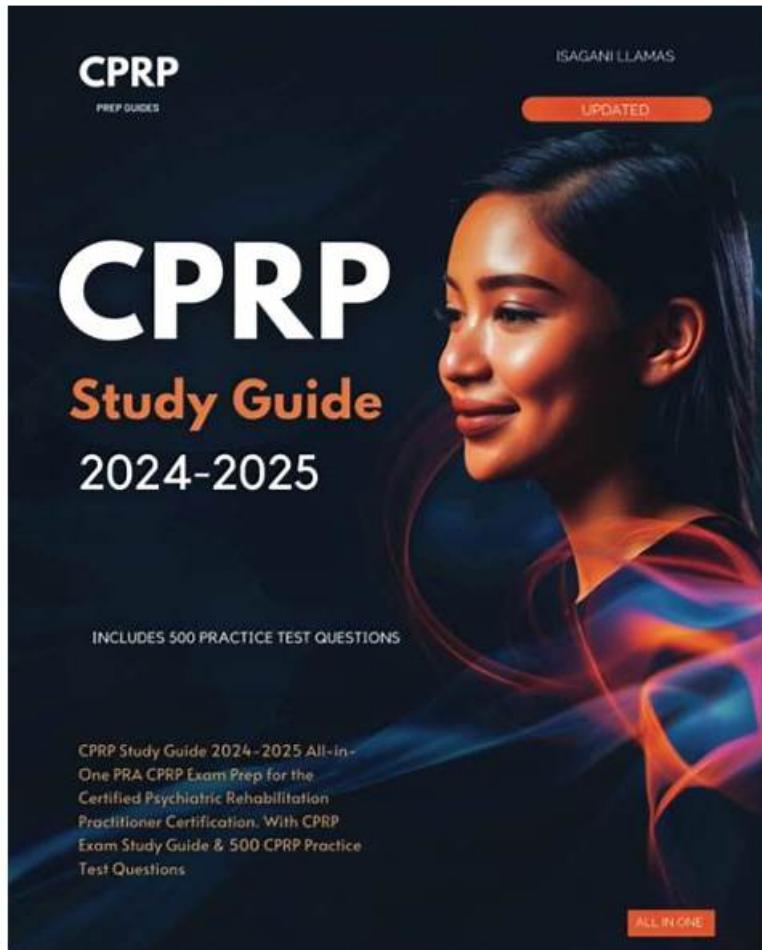


実用的CPRP | 正確的なCPRP日本語試験対策試験 | 試験の準備方法Certified Psychiatric Rehabilitation Practitioner練習問題集



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CPRP練習問題集 & CPRP日本語版受験参考書

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トピック 3	<ul style="list-style-type: none"> 地域社会への統合: この領域は、精神科リハビリテーション専門家のスキルを測定し、個人が地域社会と関わるための支援に焦点を当てています。地域社会における自立と包摂を促進する住宅、雇用、教育、そして社会ネットワークへのアクセス支援も網羅しています。

Psychiatric Rehabilitation Association Certified Psychiatric Rehabilitation Practitioner 認定 CPRP 試験問題 (Q22-Q27):

質問 #22

An individual is frequently hospitalized in a locked unit after expressing suicidal thoughts to staff in her residential facility. As a result, she runs away when becoming symptomatic. This is an example of

- A. the effects of learned helplessness.
- B. the breakdown of the therapeutic relationship.
- C. avoiding re-traumatization.**
- D. attention-seeking behavior.

正解: C

解説:

The individual's pattern of running away when symptomatic, following repeated hospitalizations in a locked unit, suggests a response to potentially traumatic experiences. The CPRP Exam Blueprint (Domain I:

Interpersonal Competencies) emphasizes trauma-informed care, which recognizes that institutional settings like locked units can re-traumatize individuals, prompting avoidance behaviors (Task I.A.4: "Apply trauma-informed principles in service delivery"). Option A (avoiding re-traumatization) aligns with this, as the individual's running away likely reflects an attempt to avoid the distress and loss of autonomy associated with involuntary hospitalizations, which can feel re-traumatizing, especially for someone with a history of mental health challenges.

Option B (breakdown of the therapeutic relationship) is possible but not directly supported, as the scenario focuses on hospitalization, not staff interactions. Option C (attention-seeking behavior) is a stigmatizing assumption that contradicts recovery-oriented care. Option D (learned helplessness) implies passivity, not the proactive avoidance behavior described. The PRA Study Guide highlights avoidance as a trauma-informed response to re-traumatizing settings, supporting Option A.

CPRP Exam Blueprint (2014), Domain I: Interpersonal Competencies, Task I.A.4.

PRA Study Guide (2024), Section on Trauma-Informed Care and Re-Traumatization.

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

質問 #23

The parents of an individual visit the group home and complain to the practitioner that the home is a mess and insist that the staff should clean it. The practitioner:

- A. Suggests to the parents that they speak to a supervisor.
- B. Acknowledges that the home might not be as clean as the parents would like and listens to their suggestions.
- C. Explains to the parents that the residents are required to do their chores and that it is not the staff's responsibility.
- D. Advises the parents to explore alternative housing for their child.

正解: B

解説:

This question aligns with Domain II: Professional Role Competencies, which focuses on professional ethics, boundaries, advocacy, and effective communication with stakeholders, including family members. The CPRP Exam Blueprint highlights that practitioners must "maintain professional boundaries while engaging with families and other stakeholders in a collaborative and respectful manner." The scenario involves a practitioner responding to parents' concerns about the cleanliness of a group home, requiring a response that balances professionalism, collaboration, and respect for the recovery-oriented environment.

* Option A: Acknowledging the parents' concern and listening to their suggestions demonstrates professionalism, respect, and a collaborative approach. It opens a dialogue without deflecting responsibility or escalating the situation, aligning with the PRA's emphasis on engaging stakeholders respectfully. This response also maintains boundaries by not immediately deferring to a supervisor or dismissing the concern.

* Option B: Suggesting the parents speak to a supervisor deflects responsibility and may be perceived as dismissive, failing to address the concern directly or collaboratively.

* Option C: Advising alternative housing is an extreme response that does not address the parents' concern or promote collaboration. It also risks undermining the individual's recovery environment without justification.

* Option D: Explaining that residents are responsible for chores, while factually correct in many recovery-oriented settings, may come across as defensive and dismissive of the parents' valid concern.

It does not foster collaboration or invite further discussion.

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

"Tasks include: 1. Adhering to professional ethics and boundaries. 2. Engaging with families, caregivers, and other stakeholders in a collaborative manner. 3. Advocating for individuals while maintaining professionalism in all interactions."

:

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 respectful and collaborative engagement with stakeholders.

質問 #24

Rehabilitation readiness refers to an individual's

- A. functional capacity.
- B. ability to reach a goal.
- C. specific skill set.
- D. desire to set a goal.

正解: D

解説:

Rehabilitation readiness assesses an individual's preparedness to engage in the process of setting and pursuing recovery-oriented goals. The CPRP Exam Blueprint (Domain IV: Assessment, Planning, and Outcomes) defines readiness as the individual's desire and motivation to set goals, reflecting their hope, confidence, and commitment to change (Task IV.A.2: "Assess individual's stage of change and readiness for goal-setting").

Option A (desire to set a goal) aligns with this, as readiness focuses on the individual's willingness to identify and work toward specific objectives, such as employment or education, often evaluated through tools like the Stages of Change model.

Option B (specific skill set) relates to functional assessment, not readiness. Option C (ability to reach a goal) focuses on outcomes, not the initial motivation. Option D (functional capacity) assesses skills and deficits, not motivational readiness. The PRA Study Guide emphasizes desire as the core of rehabilitation readiness, supporting Option A.

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CPRP Exam Blueprint (2014), Domain IV: Assessment, Planning, and Outcomes, Task IV.A.2.

PRA Study Guide (2024), Section on Rehabilitation Readiness Assessment.

CPRP Exam Preparation & Primer Online 2024, Module on Assessment, Planning, and Outcomes.

質問 #25

An individual states, "I think I made a really huge mistake at work today! I was asked to make 200 copies of a

20-page report, and I copied the wrong document. I told my supervisor, and he seemed pretty annoyed." What response is the best example of paraphrasing?

- A. "You're frustrated because you made a mistake at work and disappointed your supervisor."
- B. "You made an error, but you did admit it. That took a lot of courage."
- C. **"You made an error today on your job and your boss seemed upset with you."**
- D. "You're frustrated because you made a mistake, but it wasn't such a big mistake."

正解: C

解説:

This question falls under Domain I: Interpersonal Competencies, which emphasizes active listening and communication techniques such as paraphrasing to validate and clarify an individual's statements. The CPRP Exam Blueprint specifies that paraphrasing involves "restating the individual's message in the practitioner's own words to confirm understanding and demonstrate empathy, focusing on the content and facts of the statement." The scenario requires the practitioner to paraphrase the individual's description of a work mistake and their supervisor's reaction without adding interpretations or judgments.

Option A: This response restates the key facts of the individual's statement (making an error at work and the supervisor seeming upset) in a concise, neutral manner. It accurately reflects the content without adding emotional assumptions or judgments, making it the best example of paraphrasing.

Option B: This response includes praise for the individual's courage, which is an interpretation rather than a restatement, and does not fully capture the supervisor's reaction, making it less accurate as paraphrasing.

Option C: This response assumes the individual is frustrated and disappointed the supervisor, which adds emotional interpretations not explicitly stated, diverging from pure paraphrasing.

Option D: This response also assumes frustration and minimizes the mistake's significance, which introduces judgment and does not accurately restate the original statement.

Extract from CPRP Exam Blueprint (Domain I: Interpersonal Competencies):

"Tasks include: 2. Demonstrating active listening skills, including paraphrasing to confirm understanding of the individual's message. 3. Using person-centered communication to validate individuals' experiences." References:

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

PRA. (2024). CPRP Exam Preparation & Primer Online 2024 Course: Module 2 - Interpersonal Competencies.

Rogers, C. R. (1951). Client-Centered Therapy. Houghton Mifflin (influential in PRA's person-centered approach, emphasizes paraphrasing).

質問 # 26

What are the components of a psychiatric rehabilitation diagnosis?

- A. Functional assessment, diagnostic assessment, and skill programming
- B. Social skill assessment, psychiatric diagnosis, and an overall rehabilitation goal
- C. Readiness assessment, skill management, and resource evaluation
- D. **Resource assessment, functional assessment, and an overall rehabilitation goal**

正解: D

解説:

A psychiatric rehabilitation diagnosis focuses on identifying an individual's strengths, needs, and aspirations to guide recovery-oriented planning, distinct from a clinical diagnosis. The CPRP Exam Blueprint (Domain IV: Assessment, Planning, and Outcomes) outlines the components as a functional assessment (to identify strengths and deficits), a resource assessment (to evaluate available supports), and an overall rehabilitation goal (to set a person-centered objective) (Task IV.A.1: "Conduct functional assessments to identify individual goals and strengths" and Task IV.A.3: "Assess available resources to support goal attainment"). Option A (resource assessment, functional assessment, and an overall rehabilitation goal) aligns with this framework, capturing the holistic, recovery-focused approach of psychiatric rehabilitation.

Option B (social skill assessment, psychiatric diagnosis, rehabilitation goal) is incorrect, as psychiatric diagnosis is clinical and not part of rehabilitation diagnosis, and social skills are a subset of functional assessment. Option C (readiness assessment, skill management, resource evaluation) mixes assessment and intervention terms, missing the goal component. Option D (functional assessment, diagnostic assessment, skill programming) includes clinical diagnostic assessment, which is not relevant, and skill programming is an intervention, not a diagnostic component. The PRA Study Guide details these components as essential for rehabilitation planning, supporting Option A.

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CPRP Exam Blueprint (2014), Domain IV: Assessment, Planning, and Outcomes, Tasks IV.A.1 and IV.A.3.

PRA Study Guide (2024), Section on Psychiatric Rehabilitation Diagnosis.

質問 #27

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