

CPRP Regualer Update - Reliable CPRP Exam Review



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Psychiatric Rehabilitation Association Certified Psychiatric Rehabilitation Practitioner Sample Questions (Q35-Q40):

NEW QUESTION # 35

An individual living in an agency-owned residence is not following the rules of the house. After multiple warnings, the individual continues to break the rules. He expresses dissatisfaction with the residence. The infractions are causing a safety risk for others in the home. The agency's BEST approach would be to

- A. refer him to the local shelter.
- B. refer him to a higher level of care.
- C. assist him in locating a living environment that will work with his behavior.
- D. encourage him to change his behavior through a reward system.

Answer: C

Explanation:

When an individual in an agency-owned residence repeatedly breaks rules, causing safety risks, and expresses dissatisfaction, the agency must prioritize person-centered, recovery-oriented solutions that support community integration. The CPRP Exam Blueprint

(Domain III: Community Integration) emphasizes assisting individuals in finding housing that aligns with their needs and preferences to promote stability and safety (Task III.A.1: "Support individuals in accessing and maintaining stable housing"). Option B (assist him in locating a living environment that will work with his behavior) aligns with this by addressing the individual's dissatisfaction and safety concerns through a collaborative process to find a more suitable living arrangement, such as independent housing or a setting with different rules or supports that better match his behavior and needs.

Option A (refer to a local shelter) is not recovery-oriented, as it risks homelessness and destabilization, contradicting community integration principles. Option C (refer to a higher level of care) assumes a clinical need without evidence and may not address the individual's dissatisfaction or housing mismatch. Option D (encourage behavior change through rewards) does not address the underlying issue of dissatisfaction or ensure safety for others, as the behavior persists despite warnings. The PRA Study Guide emphasizes person-centered housing solutions to resolve conflicts and promote stability, supporting Option B.

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CPRP Exam Blueprint (2014), Domain III: Community Integration, Task III.A.1.

PRA Study Guide (2024), Section on Housing Stability and Person-Centered Solutions.

CPRP Exam Preparation & Primer Online 2024, Module on Community Integration.

NEW QUESTION # 36

Best practice guidelines used in a permanent supported housing should include

- A. readiness assessment.
- B. medication compliance.
- C. safety planning.
- D. eligibility criteria.

Answer: C

Explanation:

Permanent supported housing provides stable, long-term housing with flexible supports to promote community integration for individuals with psychiatric disabilities. The CPRP Exam Blueprint (Domain III:

Community Integration) emphasizes that best practice guidelines for supported housing include safety planning to ensure a secure living environment while respecting individual autonomy (Task III.A.1: "Support individuals in accessing and maintaining stable housing"). Option D (safety planning) aligns with this, as it involves creating protocols to address potential risks (e.g., crisis management, conflict resolution) while maintaining a recovery-oriented, person-centered approach.

Option A (medication compliance) is a clinical focus, not a housing best practice, and contradicts autonomy principles. Option B (eligibility criteria) is administrative and often minimal (e.g., desire to participate), not a core guideline for ongoing housing support. Option C (readiness assessment) may inform initial placement but is not a best practice for ongoing housing management. The PRA Study Guide and SAMHSA's supported housing guidelines highlight safety planning as essential, supporting Option D.

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CPRP Exam Blueprint (2014), Domain III: Community Integration, Task III.A.1.

PRA Study Guide (2024), Section on Supported Housing Best Practices.

CPRP Exam Preparation & Primer Online 2024, Module on Community Integration.

NEW QUESTION # 37

A woman with a psychiatric disability informs the practitioner that she feels violated in the adult care residence because there are no locks on the bedroom doors. She has awakened to find male residents in her room. She has complained to the manager/owner for months and nothing has been done about it. What is the best way for the practitioner to address this situation?

- A. Provide the individual with the name and telephone number of the local human rights agency.
- B. Demonstrate several self-defense techniques that are effective against intruders.
- C. Call the residence and strongly advise them to address the problem.
- D. Provide the individual with supportive counseling to address underlying sexual concerns.

Answer: A

Explanation:

This question falls under Domain II: Professional Role Competencies, which emphasizes advocacy, ethical practice, and empowering individuals to access resources and assert their rights. The CPRP Exam Blueprint specifies that practitioners must "advocate for individuals' rights and access to appropriate services while maintaining professional boundaries." The scenario involves a serious safety and privacy violation in an adult care residence, requiring the practitioner to empower the individual to address the issue effectively while adhering to ethical standards.

* Option C: Providing the individual with the contact information of a local human rights agency empowers her to seek external advocacy and support to address the residence's failure to ensure her safety and privacy. This aligns with the PRA's emphasis on advocacy and empowerment, as it equips the individual to take action while respecting her autonomy. It also addresses the systemic issue (lack of response from the manager/owner) by connecting her to an authority that can enforce change.

* Option A: Teaching self-defense techniques places the burden on the individual to protect herself, which is inappropriate given the residence's responsibility to provide a safe environment. This does not address the systemic issue or empower the individual to seek resolution.

* Option B: Calling the residence to advise them directly may overstep professional boundaries, as the practitioner is not in a supervisory role over the residence. It also does not empower the individual or ensure a sustainable resolution, as the manager has already ignored her complaints.

* Option D: Providing supportive counseling for "underlying sexual concerns" assumes the issue is psychological rather than a legitimate safety violation, which is dismissive and inappropriate. It fails to address the immediate safety concern or advocate for systemic change.

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

"Tasks include: 2. Advocating for individuals' rights and access to safe and appropriate services. 3.

Empowering individuals to self-advocate and access community resources. 4. Maintaining professional boundaries in all interactions."

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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 advocacy and empowerment in ensuring individuals' rights and safety.

NEW QUESTION # 38

Individuals who experience both substance abuse and psychiatric disabilities have difficulty engaging in supportive housing services due to

- A. negative mental health symptoms.
- B. impairment of reasoning.
- C. past experience with restrictive settings.
- D. preference for homelessness over receiving services.

Answer: C

Explanation:

Engaging individuals with co-occurring substance abuse and psychiatric disabilities in supportive housing requires addressing barriers rooted in their experiences. The CPRP Exam Blueprint (Domain III: Community Integration) highlights past experiences with restrictive or punitive settings (e.g., institutionalization or rigid programs) as a significant barrier to engaging in housing services (Task III.B.1: "Identify and address barriers to community participation"). Option C (past experience with restrictive settings) aligns with this, as individuals with co-occurring disorders often distrust or avoid structured services due to negative encounters with rules-heavy environments, which can feel controlling or stigmatizing.

Option A (preference for homelessness) oversimplifies complex motivations and is not a primary barrier.

Option B (impairment of reasoning) may contribute but is less specific than past experiences, which directly shape engagement attitudes. Option D (negative mental health symptoms) is a factor but secondary to experiential barriers like distrust from restrictive settings. The PRA Study Guide emphasizes addressing historical distrust to improve housing engagement, supporting Option C.

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CPRP Exam Blueprint (2014), Domain III: Community Integration, Task III.B.1.

PRA Study Guide (2024), Section on Barriers to Housing for Co-Occurring Disorders.

CPRP Exam Preparation & Primer Online 2024, Module on Community Integration.

NEW QUESTION # 39

What is the best location for learning the skills and activities of food preparation?

- A. The individual's own home
- B. A residential program with an intensive skill-training component
- C. The kitchen unit of a Clubhouse
- D. A community college which offers cooking courses near the individual's home

Answer: A

Explanation:

This question pertains to Domain III: Community Integration, which emphasizes providing services in natural, normalized environments to promote independence and skill development. The CPRP Exam Blueprint highlights "teaching skills in the individual's own environment to enhance generalization and community integration." Learning food preparation skills is most effective in a setting where the individual will apply them, ensuring relevance and practicality.

Option B: The individual's own home is the best location, as it is the natural environment where food preparation will occur. Learning in this setting ensures skills are tailored to the individual's kitchen, resources, and routines, promoting generalization and independence, which aligns with recovery-oriented principles.

Option A: A residential program may provide structured training but is less normalized and may not reflect the individual's actual living situation, limiting skill transfer.

Option C: A community college cooking course is a community-based option but may be too generalized or inaccessible (e.g., cost, transportation), and it is not tailored to the individual's home environment.

Option D: A Clubhouse kitchen unit offers a supportive environment but is not the individual's natural setting, reducing the direct applicability of learned skills.

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

"Tasks include: 1. Supporting skill development in natural environments, such as the individual's home, to promote independence. 2.

Providing services in settings that enhance community integration and skill generalization." References:

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.

Bond, G. R., & Drake, R. E. (2015). Making the Case for IPS Supported Employment. Administration and Policy in Mental Health (emphasizes normalized settings for skill development).

NEW QUESTION # 40

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