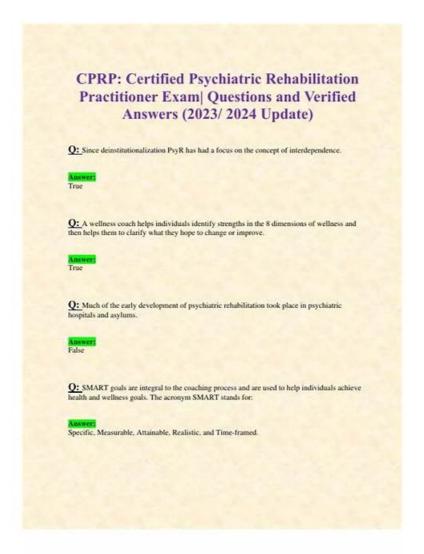
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Psychiatric Rehabilitation Association CPRP Exam Syllabus Topics:

Topic	Details
Торіс 1	 Assessment, Planning, and Outcomes: This section assesses the abilities of Rehabilitation Counselors and focuses on evaluating individual strengths, needs, and preferences. It includes setting recovery-oriented goals, developing personalized plans, tracking progress, and using outcome measures to guide and adjust interventions effectively.
Topic 2	 Strategies for Supporting Recovery: This domain measures the skills of Psychiatric Rehabilitation Specialists and focuses on implementing practical and evidence-based methods to promote recovery. It includes empowering clients, fostering motivation, teaching coping skills, and providing support that aligns with person-centered recovery principles.
Topic 3	 Supporting Health and Wellness: This final domain of the exam measures the skills of Psychiatric Rehabilitation Specialists and focuses on promoting overall well-being alongside recovery. It includes supporting physical health, stress management, lifestyle improvement, and access to wellness resources to enhance long-term recovery outcomes.
Topic 4	 Community Integration: This domain measures the skills of Psychiatric Rehabilitation Specialists and focuses on assisting individuals in engaging with their communities. It covers supporting access to housing, employment, education, and social networks that foster independence and inclusion within community settings.
Topic 5	 Professional Role Competencies: This section evaluates the abilities of Rehabilitation Counselors and emphasizes professionalism, ethics, and accountability in practice. It addresses maintaining confidentiality, applying rehabilitation principles, collaborating with multidisciplinary teams, and demonstrating cultural competence and self-awareness.
Topic 6	Interpersonal Competencies: This section of the CPRP Exam measures the skills of Psychiatric Rehabilitation Specialists and focuses on establishing effective, respectful, and empathetic communication with clients. It covers active listening, trust-building, conflict resolution, and maintaining professional boundaries to support individuals in their recovery journey.

Psychiatric Rehabilitation Association Certified Psychiatric Rehabilitation Practitioner Sample Questions (Q72-Q77):

NEW QUESTION #72

One important criterion for establishing an evidence-based practice is that findings:

- A. Are implemented within service programs.
- B. Do not contradict each other.
- C. Result in a fidelity scale.
- D. Are supported by additional investigations.

Answer: D

Explanation:

This question pertains to Domain V: Strategies for Facilitating Recovery, which includes understanding evidence-based practices (EBPs) and their criteria. The CPRP Exam Blueprint states that "evidence-based practices are established through rigorous research, with findings supported by multiple, high-quality investigations demonstrating effectiveness." The question tests knowledge of what constitutes a key criterion for an EBP, focusing on the scientific validation process.

Option B: For a practice to be considered evidence-based, its findings must be supported by additional investigations, meaning multiple, rigorous studies (e.g., randomized controlled trials) that replicate and confirm the practice's effectiveness. This is a foundational criterion for EBPs in psychiatric rehabilitation, ensuring reliability and generalizability.

Option A: A fidelity scale measures adherence to an EBP's protocols but is a tool for implementation, not a criterion for establishing

the practice's evidence base.

Option C: Non-contradictory findings are desirable but not a primary criterion; some variation in results is expected, and the focus is on overall evidence from multiple studies.

Option D: Implementation within service programs is an outcome of an established EBP, not a criterion for determining its evidence-based status.

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

"Tasks include: 3. Implementing evidence-based practices supported by rigorous research and multiple investigations demonstrating effectiveness." References:

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. Drake, R. E., et al. (2001). Implementing Evidence-Based Practices in Routine Mental Health Service Settings. Psychiatric Services (recommended CPRP study literature, details EBP criteria).

NEW QUESTION #73

An individual is diagnosed with schizophrenia and substance use disorder. What is the BEST course of action?

- A. The substance use is resolved before the symptoms of schizophrenia are addressed.
- B. The symptoms of schizophrenia are stabilized before the substance use is addressed.
- C. Both disorders are addressed at the same time.
- D. Both disorders are addressed after stabilization.

Answer: C

Explanation:

Individuals with co-occurring disorders, such as schizophrenia and substance use disorder, require integrated treatment to address both conditions effectively. The CPRP Exam Blueprint (Domain VI: Systems Competencies) emphasizes the integration of mental health and substance use services to provide comprehensive, recovery-oriented care for co-occurring disorders (Task VI.B.2: "Promote integration of mental health, physical health, and substance use services"). Option A (both disorders are addressed at the same time) aligns with this, as integrated dual diagnosis treatment (IDDT) models simultaneously address psychiatric symptoms and substance use through coordinated interventions, such as medication management, counseling, and harm reduction, tailored to the individual's needs.

Option B (resolving substance use first) is impractical, as schizophrenia symptoms may exacerbate substance use, and sequential treatment often fails for co-occurring disorders. Option C (addressing both after stabilization) delays necessary interventions, risking worsening of either condition. Option D (stabilizing schizophrenia first) overlooks the interplay between substance use and psychiatric symptoms, which can destabilize each other. The PRA Study Guide and SAMHSA's guidelines on co-occurring disorders advocate for integrated treatment as best practice, supporting Option A.

CPRP Exam Blueprint (2014), Domain VI: Systems Competencies, Task VI.B.2. PRA Study Guide (2024), Section on Integrated Treatment for Co-Occurring Disorders.

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

NEW QUESTION #74

A practitioner works part time at a restaurant, not realizing that the restaurant owner's son is a participant in the psychiatric rehabilitation program where the practitioner works. Upon learning of this connection, the practitioner would:

- A. Consult with his program supervisor about the situation.
- B. Monitor the situation until the dual relationship becomes an issue.
- C. Quit the restaurant job, citing the conflict of interest.
- D. Reassure the restaurant owner that the practitioner is bound by confidentiality.

Answer: A

Explanation:

This question aligns with Domain II: Professional Role Competencies, which focuses on maintaining professional ethics, boundaries, and addressing potential conflicts of interest. The CPRP Exam Blueprint and PRA Code of Ethics emphasize that "practitioners must proactively address dual relationships by consulting with supervisors to ensure ethical practice and protect confidentiality." The scenario involves a dual relationship that could compromise confidentiality or objectivity, requiring immediate ethical consideration. * Option D: Consulting with the program supervisor is the best course of action, as it allows the practitioner to discuss the potential conflict, explore ethical implications, and determine steps to maintain professionalism and confidentiality. This aligns with PRA's

ethical guidelines for addressing dual relationships proactively.

- * Option A: Quitting the restaurant job is an extreme measure and unnecessary without first assessing the situation through consultation, which may identify less drastic solutions.
- * Option B: Monitoring the situation passively risks ethical violations if the dual relationship impacts confidentiality or objectivity, failing to address the issue proactively.
- * Option C: Reassuring the restaurant owner about confidentiality does not address the broader ethical concerns of the dual relationship and may inadvertently involve the owner in the participant's care, breaching boundaries.

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

"Tasks include: 1. Adhering to professional ethics and boundaries, including addressing dual relationships through consultation with supervisors. 2. Protecting confidentiality in all professional 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 consultation for dual relationships and confidentiality.

NEW OUESTION #75

Which of the following techniques is most useful when assessing rehabilitation readiness of an individual?

- A. Internal reflection
- B. Interpersonal dialogue
- C. Active listening
- D. Summarizing techniques

Answer: C

Explanation:

Assessing rehabilitation readiness requires understanding an individual's motivation and barriers, which is best achieved through empathetic engagement. The CPRP Exam Blueprint (Domain IV: Assessment, Planning, and Outcomes) emphasizes active listening as a core technique to elicit the individual's desires, concerns, and readiness for change (Task IV.A.2: "Assess individual's stage of change and readiness for goal- setting"). Option B (active listening) aligns with this, as it involves fully attending to the individual, reflecting their statements, and clarifying their intentions, enabling accurate assessment of their commitment and stage of change. Option A (summarizing techniques) supports understanding but is secondary to listening. Option C (internal reflection) is practitioner-focused, not assessment-focused. Option D (interpersonal dialogue) is broad and less specific than active listening. The PRA Study Guide underscores active listening as essential for readiness assessment, supporting Option B.

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

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

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

NEW QUESTION #76

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. preference for homelessness over receiving services.
- D. past experience with restrictive settings.

Answer: D

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.

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 #77

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