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CPRP Certified Psychiatric Rehabilitation Practitioner Examination 2024 with well answered questions

- 12 Core Principles and Values (1) - ✓✓✓Principle 1: Psychiatric rehabilitation practitioners convey hope and respect, and believe that all individuals have the capacity for learning and growth.

- 12 Core Principles and Values (2) - ✓✓✓Principle 2: Psychiatric rehabilitation practitioners recognize that culture is central to recovery, and strive to ensure that all services are culturally relevant to individuals receiving services.

- 12 Core Principles and Values (3) - ✓✓✓Principle 3: Psychiatric rehabilitation practitioners engage in the processes of informed and shared decision-making and facilitate partnerships with other persons identified by the individual receiving services.

- 12 Core Principles and Values (4) - ✓✓✓Principle 4: Psychiatric rehabilitation practices build on the strengths and capabilities of individuals.

- 12 Core Principles and Values (5) - ✓✓✓Principle 5: Psychiatric rehabilitation practices are person-centered; they are designed to address the unique needs of individuals, consistent with their values, hopes and aspirations.

- 12 Core Principles and Values (6) - ✓✓✓Principle 6: Psychiatric rehabilitation practices support full integration of people in recovery into their communities where they can exercise their rights of citizenship, as well as to accept the

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Psychiatric Rehabilitation Association CPRP Exam Syllabus Topics:

Topic	Details
Topic 1	• Systems Competencies: This section evaluates the competencies of Rehabilitation Counselors and focuses on understanding how service systems operate within the broader mental health and social service environments. It covers collaboration with agencies, policy awareness, advocacy, and navigating service delivery systems to ensure coordinated care.
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	• 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.

Psychiatric Rehabilitation Association Certified Psychiatric Rehabilitation Practitioner Sample Questions (Q46-Q51):

NEW QUESTION # 46
When teaching a skill, role playing should usually be done after

- A. describing how to do the skill.
- B. modeling the skill.
- C. trying the skill for the first time.
- D. practicing the skill.

Answer: B

Explanation:
Teaching skills in psychiatric rehabilitation follows a structured, evidence-based process to ensure effective learning. The CPRP Exam Blueprint (Domain V: Strategies for Facilitating Recovery) outlines skill teaching as a multi-step process that includes modeling, role-playing, and practice (Task V.B.4: "Teach skills using evidence-based methods"). The standard sequence is to first describe the skill, then model it (demonstrate how it is performed), followed by role-playing (where the individual practices in a simulated setting), and finally real-world practice. Option A (modeling the skill) aligns with this, as role-playing typically follows modeling to allow the individual to observe the skill in action before attempting it themselves in a controlled, supportive environment. Option B (practicing the skill) refers to real-world application, which comes after role-playing. Option C (trying the skill for the first time) is vague but implies initial practice, which role-playing itself facilitates.
Option D (describing how to do the skill) precedes modeling, as description alone is insufficient before demonstration. The PRA Study Guide, referencing skill-teaching models like the Boston University Psychiatric Rehabilitation approach, confirms that role-playing follows modeling, supporting Option A.
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CPRP Exam Blueprint (2014), Domain V: Strategies for Facilitating Recovery, Task V.B.4.
PRA Study Guide (2024), Section on Skill Teaching Methods.
CPRP Exam Preparation & Primer Online 2024, Module on Strategies for Facilitating Recovery.

NEW QUESTION # 47
What is the primary objective of an initial meeting with an individual seeking rehabilitation services?

- A. Creating the rehabilitation plan
- B. Establishing a trusting relationship
- C. Reducing symptoms
- D. Determining the diagnosis

Answer: B

Explanation:

The initial meeting with an individual seeking rehabilitation services sets the foundation for a recovery- oriented, person-centered relationship. The CPRP Exam Blueprint (Domain I: Interpersonal Competencies) emphasizes building trust and rapport as the primary objective to engage individuals effectively (Task I.B.3:

"Adapt communication strategies to build trust and engagement"). Option D (establishing a trusting relationship) aligns with this, as trust is essential for fostering collaboration, understanding the individual's needs, and ensuring future engagement in rehabilitation planning.

Option A (creating the rehabilitation plan) is premature, as planning requires trust and assessment (Domain IV). Option B (reducing symptoms) is a clinical goal, not the focus of an initial meeting in psychiatric rehabilitation. Option C (determining the diagnosis) is outside the scope of rehabilitation practitioners, who focus on functional goals, not diagnostic assessment. The PRA Study Guide underscores trust-building as the cornerstone of initial interactions, supporting Option D.
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CPRP Exam Blueprint (2014), Domain I: Interpersonal Competencies, Task I.B.3.
PRA Study Guide (2024), Section on Building Trust and Engagement.
CPRP Exam Preparation & Primer Online 2024, Module on Interpersonal Competencies.

NEW QUESTION # 48

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

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

Answer: C

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 # 49

Community integration facilitates opportunities for activities that are

- A. staff led.
- B. self-directed.
- C. group directed.
- D. peer led.

Answer: B

Explanation:
Community integration aims to empower individuals with psychiatric disabilities to participate fully in community life through activities that reflect their choices and autonomy. The CPRP Exam Blueprint (Domain III: Community Integration) emphasizes supporting self-directed activities that align with individualmeant by the individual's preferences (Task III.A.3: "Support individuals in pursuing self-directed community activities"). Option D (self-directed) aligns with this, as community integration facilitates opportunities for activities chosen by the individual-such as employment, volunteering, or hobbies-that promote independence and meaningful community roles.
Option A (peer led) is relevant for peer support but narrower, as not all community activities are peer-led.
Option B (staff led) contradicts the recovery-oriented focus on autonomy, as staff-led activities are more program-based. Option C (group directed) is less precise, as group activities may not always reflect individual choice. The PRA Study Guide highlights self-directed activities as the hallmark of community integration, supporting Option D.
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CPRP Exam Blueprint (2014), Domain III: Community Integration, Task III.A.3.
PRA Study Guide (2024), Section on Self-Directed Community Participation.
CPRP Exam Preparation & Primer Online 2024, Module on Community Integration.

NEW QUESTION # 50
A practitioner is working with an individual who is not applying the necessary skills to succeed in his work environment. The practitioner's FIRST approach would be to

- A. revisit the readiness assessment.
- B. ensure that the goal is self-determined.
- C. meet with the individual and the employer.
- D. provide incentives for progress made.

Answer: A

Explanation:
When an individual struggles to apply skills in a work environment, the practitioner must first assess whether the individual is adequately prepared for the goal. The CPRP Exam Blueprint (Domain V: Strategies for Facilitating Recovery) emphasizes revisiting readiness to ensure alignment between the individual's motivation, skills, and goals (Task V.B.1: "Support individuals in developing readiness for rehabilitation goals"). Option A (revisit the readiness assessment) aligns with this, as it allows the practitioner to determine if the individual's lack of skill application stems from insufficient readiness (e.g., low confidence or motivation), which can inform tailored interventions.
Option B (meet with the employer) is premature without understanding the individual's readiness. Option C (ensure the goal is self-determined) is important but not the first step, as readiness affects goal pursuit. Option D (provide incentives) addresses behavior but not the underlying issue of skill application. The PRA Study Guide highlights readiness reassessment as a critical first step when progress stalls, supporting Option A.
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CPRP Exam Blueprint (2014), Domain V: Strategies for Facilitating Recovery, Task V.B.1.
PRA Study Guide (2024), Section on Rehabilitation Readiness and Skill Development.
CPRP Exam Preparation & Primer Online 2024, Module on Strategies for Facilitating Recovery.

NEW QUESTION # 51
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