

# Licensed Clinical Social Worker (LCSW) Practice Exam (Sample)

## Study Guide



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**SAMPLE**

## **Questions**

- 1. What should an emergency room social worker do next when the patient is confused and unable to provide reliable information?**
  - A. Conduct a full psychological evaluation**
  - B. Seek permission from the patient to contact relatives**
  - C. Provide immediate psychological support**
  - D. Document the patient's current state**
- 2. When a client is resistant to taking medication suggested by their social worker, what is the next appropriate step for the colleague?**
  - A. Persuade the client to take the medication**
  - B. Explore with the client her resistance to taking medication**
  - C. Ignore the issue for now**
  - D. Refer the client to a psychiatrist**
- 3. What is the first thing a social worker should do when a client is resistant to discussing feelings?**
  - A. Encourage the client to talk about their daily life**
  - B. Acknowledge the client's discomfort in a supportive manner**
  - C. Redirect the conversation to therapy goals**
  - D. Offer the client tools to manage their discomfort**
- 4. What is the FIRST step a social worker should take for a four-year-old child experiencing nightmares and terror fantasies?**
  - A. Speak to the child's teacher**
  - B. Do a comprehensive biopsychosocial assessment**
  - C. Dismiss the child's fears**
  - D. Consult with the parents about discipline**
- 5. When treating clients, how should a social worker approach the development of therapeutic goals?**
  - A. Focus exclusively on client preferences**
  - B. Consider previous treatment experiences**
  - C. Only include goals that are widely accepted in therapy**
  - D. Develop goals independently of client input**

- 6. What is the best course of action for a social worker when evaluating an elderly widower who opposes assisted living?**
- A. Insist on an immediate placement in assisted living**
  - B. Offer an in-home evaluation, with assurance to keep in touch with the daughters if he consents**
  - C. Encourage the daughters to override the father's wishes**
  - D. Immediately contact elder services for assistance**
- 7. What action should a social worker take when a client has shown no improvement in symptoms after six months of therapy?**
- A. Seek consultation from an experienced colleague about the client**
  - B. Increase the frequency of sessions**
  - C. Change therapeutic modalities abruptly**
  - D. Refer the client to another therapist immediately**
- 8. What is the underlying reason for a client with a loss to struggle with medication adherence, according to social work understanding?**
- A. Psychological withdrawal**
  - B. Rejection of treatment**
  - C. Dealing with bereavement**
  - D. Fear of stigma**
- 9. What type of behavior may indicate a need for intervention in adolescents?**
- A. Overachieving in school**
  - B. Frequent absences from school**
  - C. Excessive engagement in hobbies**
  - D. Strong involvement in family activities**

**10. If an adolescent's mother requests individual therapy after her child has begun treatment, what should the social worker do?**

- A. Encourage the mother to join the sessions with her child**
- B. Provide the mother with the names of several social workers**
- C. Schedule a joint session with both the mother and adolescent**
- D. Refer the mother to a parenting support group**

## **Answers**

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- 1. B**
- 2. B**
- 3. B**
- 4. B**
- 5. B**
- 6. B**
- 7. A**
- 8. C**
- 9. B**
- 10. B**

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## **Explanations**

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**1. What should an emergency room social worker do next when the patient is confused and unable to provide reliable information?**

**A. Conduct a full psychological evaluation**

**B. Seek permission from the patient to contact relatives**

**C. Provide immediate psychological support**

**D. Document the patient's current state**

When encountering a patient who is confused and unable to provide reliable information, seeking permission from the patient to contact relatives is a crucial step for the emergency room social worker. This approach acknowledges the potential need for immediate support and additional information that can be obtained from family members or close contacts who might know the patient's medical history, current medications, or any recent changes in behavior. Engaging family members not only helps in gathering essential information, but it also fosters a supportive environment that can alleviate the patient's anxiety and confusion. Moreover, involving relatives can assist in forming a more comprehensive understanding of the patient's situation, allowing for better-informed decisions regarding their care. This action aligns with the ethical principles of maintaining family involvement in healthcare, as it enhances the care provided to the patient by ensuring that the healthcare team has all pertinent information and support. While providing psychological support or documenting the patient's current state are also important duties of a social worker, these actions follow after establishing a clearer understanding of the patient's context, which can be significantly aided by contacting a family member. Conducting a full psychological evaluation may be inappropriate at this initial stage, as the patient's confusion might hinder the evaluation's effectiveness.

**2. When a client is resistant to taking medication suggested by their social worker, what is the next appropriate step for the colleague?**

**A. Persuade the client to take the medication**

**B. Explore with the client her resistance to taking medication**

**C. Ignore the issue for now**

**D. Refer the client to a psychiatrist**

The most appropriate next step when a client is resistant to taking medication is to explore their resistance with them. This approach allows the social worker to understand the underlying reasons for the client's reluctance, which may include concerns about side effects, previous negative experiences, fears, or a lack of understanding of the medication's benefits. By engaging the client in a dialogue about their feelings and beliefs regarding medication, the social worker can provide education, address misconceptions, and foster a sense of collaboration and trust. Encouraging the client to express their thoughts can also promote empowerment and autonomy, important principles in social work practice. This exploration can help the social worker to better tailor their approach to the client's needs and make informed decisions moving forward that respect the client's values and preferences. In contrast, simply persuading the client or ignoring the issue may exacerbate resistance and create a power struggle, ultimately damaging the therapeutic relationship. Referring the client to a psychiatrist could be appropriate later, but initial exploration of their feelings about medication is essential for understanding and addressing any barriers they face in adherence.

**3. What is the first thing a social worker should do when a client is resistant to discussing feelings?**

- A. Encourage the client to talk about their daily life**
- B. Acknowledge the client's discomfort in a supportive manner**
- C. Redirect the conversation to therapy goals**
- D. Offer the client tools to manage their discomfort**

Acknowledge the client's discomfort in a supportive manner is the most appropriate initial response when a client is resistant to discussing feelings. This approach establishes a safe and trusting environment, which is crucial in therapeutic settings. By recognizing and validating the client's feelings of discomfort, the social worker demonstrates empathy and understanding. This can help to reduce any anxiety the client may be experiencing and encourage them to open up at their own pace. In situations where clients are reluctant to delve into their emotions, it's essential to create a supportive atmosphere where they feel heard and valued. Acknowledgment can alleviate feelings of pressure, allowing clients to gradually engage more deeply in the therapeutic process when they are ready. It sets a foundation for building rapport and fosters collaboration in exploring feelings when the client feels more secure. Other strategies, such as discussing daily life, redirecting to therapy goals, or offering tools to manage discomfort, can be beneficial later in the conversation but are not optimal starting points when resistance is evident. These approaches may inadvertently sidestep the immediate emotional barrier the client is experiencing, whereas acknowledging their discomfort directly addresses their current state.

**4. What is the FIRST step a social worker should take for a four-year-old child experiencing nightmares and terror fantasies?**

- A. Speak to the child's teacher**
- B. Do a comprehensive biopsychosocial assessment**
- C. Dismiss the child's fears**
- D. Consult with the parents about discipline**

Conducting a comprehensive biopsychosocial assessment is crucial as the first step in addressing the child's nightmares and terror fantasies. This type of assessment allows the social worker to gather in-depth information about multiple aspects of the child's life, including biological factors (such as any medical issues or developmental concerns), psychological elements (such as emotional and mental health), and social influences (such as family dynamics, school environment, and peer relationships). For a young child experiencing distressing dreams, understanding the underlying causes of these symptoms is essential to providing effective support and intervention. The assessment can help uncover any possible traumatic experiences, pressures at home or school, and emotional struggles that may be contributing to the child's fears. Once the social worker has a well-rounded understanding of the child's situation through the assessment, they can strategize on supportive measures, including potential referrals, therapy options, and parental involvement, which can be crucial in addressing the child's needs. This initial comprehensive assessment ensures that interventions are tailored to the child's specific circumstances, providing a solid foundation for future steps in the therapeutic process.

**5. When treating clients, how should a social worker approach the development of therapeutic goals?**

**A. Focus exclusively on client preferences**

**B. Consider previous treatment experiences**

**C. Only include goals that are widely accepted in therapy**

**D. Develop goals independently of client input**

The appropriate approach for a social worker when developing therapeutic goals is to consider previous treatment experiences. This method acknowledges the significance of the client's past interactions with therapy, including what has or hasn't worked for them before. Understanding a client's previous treatment history helps the social worker tailor goals that are more suited to their unique circumstances, thereby increasing their efficacy. Incorporating this information can lead to a more personalized treatment plan, fostering collaboration and ensuring that clients feel heard and understood. Taking into account what has been beneficial or challenging in the past encourages the creation of practical and achievable goals, promoting a stronger therapeutic alliance and better client outcomes. Utilizing past experiences as a foundation for goal-setting helps in acknowledging patterns in behavior or responses to treatments, which can be instrumental in shaping future interventions. This approach ultimately enhances the overall quality of care provided to the client.

**6. What is the best course of action for a social worker when evaluating an elderly widower who opposes assisted living?**

**A. Insist on an immediate placement in assisted living**

**B. Offer an in-home evaluation, with assurance to keep in touch with the daughters if he consents**

**C. Encourage the daughters to override the father's wishes**

**D. Immediately contact elder services for assistance**

The best course of action in this situation is to offer an in-home evaluation while ensuring that there is a commitment to maintain communication with the daughters if the elderly widower consents to this assessment. This approach respects the elderly man's autonomy and his right to make decisions about his own living situation. It acknowledges his opposition to assisted living while also taking proactive steps to address his needs. By suggesting an in-home evaluation, the social worker is allowing for a comprehensive assessment of the man's living conditions and capabilities, as well as identifying any support systems that may be needed to help him remain safely in his home. This option promotes a collaborative relationship between the social worker and the elderly individual, fostering trust and openness about his concerns and preferences. Moreover, keeping the daughters informed—should the widower agree—ensures that family dynamics are considered and that there is support available if changes to his living situation are necessary in the future. Engaging both the client and his family respects family involvement in care planning, which is crucial in social work practice. This approach ultimately aligns with social work values, including client self-determination and empowerment, which are essential in effectively helping clients navigate their options and challenges.

**7. What action should a social worker take when a client has shown no improvement in symptoms after six months of therapy?**

- A. Seek consultation from an experienced colleague about the client**
- B. Increase the frequency of sessions**
- C. Change therapeutic modalities abruptly**
- D. Refer the client to another therapist immediately**

Seeking consultation from an experienced colleague about the client is a prudent action for a social worker when a client has shown no improvement in symptoms after six months of therapy. This approach allows the social worker to gain insights and perspectives from another professional who may have encountered similar cases, which could provide new strategies or interventions. Consultation can enhance the therapeutic process by ensuring that the social worker is using effective techniques and frameworks appropriate for the client's needs. In this situation, increasing the frequency of sessions may not address the underlying issues contributing to the client's lack of progress. Similarly, changing therapeutic modalities abruptly can be disruptive and might hinder the therapeutic alliance that has been developed. Referring the client to another therapist immediately should be considered carefully and usually as a last resort, as it might not provide a chance for the current therapist to address any potential barriers to the client's progress before deciding on transferring care. All in all, consultation offers a constructive next step that aligns with professional development and client welfare.

**8. What is the underlying reason for a client with a loss to struggle with medication adherence, according to social work understanding?**

- A. Psychological withdrawal**
- B. Rejection of treatment**
- C. Dealing with bereavement**
- D. Fear of stigma**

The correct choice is rooted in the understanding of how grief and loss can profoundly affect an individual's overall functioning and mental health. When a client is dealing with bereavement, they may experience a range of emotions, such as sadness, anger, guilt, and confusion, which can significantly impact their motivation and ability to manage their daily life. This emotional turmoil often leads to difficulties in concentrating or making decisions, which can extend to their medication regimen. Clients in bereavement may also feel overwhelmed by the process of grieving, causing them to prioritize their emotional pain over their physical health. This can result in neglecting their medication adherence, as they may not have the emotional bandwidth to engage with or remember to take their medications regularly. Understanding bereavement as a challenging and consuming process, social workers can identify why adherence to medication might falter during this time and address those specific needs, providing appropriate support and interventions to help the client navigate their grief while managing their treatment plan.

**9. What type of behavior may indicate a need for intervention in adolescents?**

- A. Overachieving in school**
- B. Frequent absences from school**
- C. Excessive engagement in hobbies**
- D. Strong involvement in family activities**

Frequent absences from school can indicate a significant concern and necessitate intervention in adolescents. School attendance is a critical component of socialization and academic success, and consistent absences may suggest underlying issues such as emotional distress, academic difficulties, social problems, or even family-related challenges. When an adolescent frequently misses school, it may reflect problems such as anxiety, depression, or disengagement, all of which require attention and support from caregivers or mental health professionals. In contrast, overachieving in school, excessive engagement in hobbies, and strong involvement in family activities are typically seen as positive behaviors that contribute to a well-rounded and fulfilling adolescent experience. While any behavior can be context-dependent, the specific pattern of frequent school absences strongly points to potential challenges that could benefit from early intervention to address any underlying issues.

**10. If an adolescent's mother requests individual therapy after her child has begun treatment, what should the social worker do?**

- A. Encourage the mother to join the sessions with her child**
- B. Provide the mother with the names of several social workers**
- C. Schedule a joint session with both the mother and adolescent**
- D. Refer the mother to a parenting support group**

Providing the mother with the names of several social workers is appropriate in this scenario as it acknowledges the mother's request for individual therapy while respecting professional boundaries. The adolescent is the client in this situation, and the social worker's primary responsibility is to maintain the integrity of that therapeutic relationship. By referring the mother to other qualified professionals, the social worker ensures that both the mother and adolescent can receive the specific support they need without the potential complications of dual relationships or conflicts of interest. This approach allows the mother to pursue her own therapeutic journey while prioritizing the needs and confidentiality of the adolescent's treatment.