

TEXAS LICENSED CHILD- PLACING AGENCY ADMINISTRATOR (LCPAA) SET 1 PRACTICE EXAM (SAMPLE)

STUDY GUIDE



**SAMPLE STUDY GUIDE
WITH LIMITED QUESTIONS**

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THE FULL VERSION STUDY GUIDE**

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

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- 1. Who should be invited to participate in planning the child's non-emergency discharge or transfer, if appropriate?**
 - A. The child, the child's parent(s), and any other person pertinent to the child's care
 - B. Only the parent
 - C. Only the child
 - D. Only the professional service provider
- 2. Within 30 days of admission, which of the following must have been completed?**
 - A. Alcohol and substance abuse screening
 - B. Behavioral health assessment covering PTSD, Depression, and Anxiety
 - C. Family counseling
 - D. Individual counseling
- 3. What do child-care services encompass?**
 - A. Services that meet a child's basic needs for shelter, nutrition, clothing, nurture, socialization and interpersonal skills, care for personal health and hygiene, supervision, education, and service planning.
 - B. Only medical treatment
 - C. Only transportation
 - D. Entertainment services
- 4. Which condition provides an exemption from TB screening requirements?**
 - A. Having lived, worked, or volunteered at a regulated residential child-care operation within the previous 12 months
 - B. Never having traveled outside the state
 - C. Being younger than 5 years old
 - D. Preferring not to be screened
- 5. Which topic is included as a competency area if the child is a parent?**
 - A. Parenting skills
 - B. Physics
 - C. Marketing
 - D. Nutrition for adults

- 6. What is the annual training requirement for homes with two foster parents?**
- A. 30 hours
 - B. 50 hours
 - C. 60 hours
 - D. 80 hours
- 7. Which of the following is NOT one of the four critical CCR efforts to protect children in care?**
- A. Inspection
 - B. Technical assistance
 - C. Background checks
 - D. Investigations
- 8. What is the must-have process for intake and assessment of a child referred to the agency?**
- A. Initial safety screening, timely assignment to a caseworker, development of an intake assessment, and a decision to place or refer to DFPS.
 - B. Only a monthly review with no safety checks.
 - C. Immediate placement without assessment.
 - D. Filing a general referral without intake.
- 9. May you admit a young adult into your transitional living program?**
- A. Yes
 - B. No
 - C. Only if they are 21 or older
 - D. Only if they are 15 or younger
- 10. Who is responsible for providing individual counseling to each child receiving trafficking victim services?**
- A. General staff
 - B. A specialized professional service provider
 - C. The child's family
 - D. No counseling is required

Answers

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

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Explanations

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1. Who should be invited to participate in planning the child's non-emergency discharge or transfer, if appropriate?

- A. The child, the child's parent(s), and any other person pertinent to the child's care**
- B. Only the parent
- C. Only the child
- D. Only the professional service provider

Discharge planning for a child should be a collaborative process that includes the child, the child's parent or guardian, and anyone else who is involved in the child's care. This approach ensures the plan reflects the child's preferences and concerns, leverages the family's knowledge of daily routines and needs, and coordinates with other professionals or supports (such as therapists, social workers, teachers, or community services) to arrange a safe, seamless transfer or discharge. Limiting participation to just one group risks missing important perspectives and information about medical, behavioral, and logistical needs. Therefore, inviting the child, the parent(s), and any other person pertinent to the child's care is the best practice.

2. Within 30 days of admission, which of the following must have been completed?

- A. Alcohol and substance abuse screening
- B. Behavioral health assessment covering PTSD, Depression, and Anxiety**
- C. Family counseling
- D. Individual counseling

Within 30 days of admission, completing a behavioral health assessment that covers PTSD, Depression, and Anxiety is essential because it directly identifies the child's trauma-related mental health needs and guides the initial plan of care. This assessment looks for how trauma has affected mood, thoughts, and functioning, flags conditions that require treatment or referral, and establishes a baseline to monitor progress and adjust services as needed. Knowing whether PTSD, depressive symptoms, or anxiety are present early helps ensure the right supports are put in place promptly, such as counseling, trauma-informed approaches, or other mental health services. Alcohol and substance abuse screening, while important, is not the specific item mandated within this 30-day window in this context; family counseling and individual counseling are services that may be provided as part of the care plan but do not represent the required initial assessment described here.

3. What do child-care services encompass?

- A. Services that meet a child's basic needs for shelter, nutrition, clothing, nurture, socialization and interpersonal skills, care for personal health and hygiene, supervision, education, and service planning.**
- B. Only medical treatment
- C. Only transportation
- D. Entertainment services

Child-care services are designed to support a child's overall well-being by addressing the full range of needs that affect development and safety. This includes meeting basic needs such as shelter, nutrition, clothing, and personal care; providing a nurturing environment that fosters socialization and interpersonal skills; ensuring supervision for safety; delivering educational activities to promote learning; and coordinating or planning services to address ongoing needs and goals. This holistic approach explains why the correct choice is best—it goes beyond narrow tasks like medical treatment, transportation, or entertainment, and captures the comprehensive support that child-care services aim to provide.

4. Which condition provides an exemption from TB screening requirements?

- A. Having lived, worked, or volunteered at a regulated residential child-care operation within the previous 12 months**
- B. Never having traveled outside the state
- C. Being younger than 5 years old
- D. Preferring not to be screened

The concept being tested is who is exempt from TB screening requirements. If you have lived, worked, or volunteered at a regulated residential child-care operation within the previous 12 months, you can be exempt because you've already undergone TB screening or provided documentation there, and that record can satisfy the current screening need without repeating the test. This prevents duplicative testing when you've recently been through the process in a similar setting. The other options don't provide an exemption because they don't relate to having recent TB screening or existing documentation. Traveling outside the state, being under age, or simply not wanting to be screened do not waive the requirement.

5. Which topic is included as a competency area if the child is a parent?

- A. Parenting skills**
- B. Physics
- C. Marketing
- D. Nutrition for adults

The main idea here is that the competency areas are tied to the role the child is in. If the child becomes a parent, the relevant domain is parenting skills because it directly covers how to care for a child, attend to development, ensure safety, and navigate resources to support the parent-child relationship. The other topics don't align with the responsibilities of parenting within child placement practice—physics and marketing are unrelated to caring for a child, and while health knowledge is important, the explicit area focused on when the child is a parent is parenting skills.

6. What is the annual training requirement for homes with two foster parents?

- A. 30 hours
- B. 50 hours**
- C. 60 hours
- D. 80 hours

Foster parent training hours are required annually to keep homes up to date with best practices and regulatory standards. For homes with two foster parents, the annual training requirement is fifty hours. These hours count for the home as a unit, and the two caregivers can complete trainings together or separately, as long as the total is met. The content covers essential topics such as safety, trauma-informed care, child development, discipline approaches, and mandatory reporting, ensuring both adults stay current in caregiving responsibilities. Choosing a lower total would fall short of licensing requirements; a higher total would exceed the standard expectation for this home arrangement, which is why fifty hours is the correct choice.

7. Which of the following is NOT one of the four critical CCR efforts to protect children in care?

- A. Inspection
- B. Technical assistance
- C. Background checks**
- D. Investigations

Protecting children in care relies on active oversight activities that involve direct interaction with providers and ongoing monitoring. Inspections verify that facilities meet licensing standards in their everyday operations. Investigations follow up on complaints or serious concerns to determine what happened and what corrective actions are needed. Technical assistance helps providers understand and meet requirements, often preventing issues before they arise. The fourth element typically centers on ongoing monitoring and enforcement to ensure sustained compliance. Background checks, while essential for safeguarding by screening individual staff, occur earlier in the hiring process and are not part of the CCR oversight activities themselves. Therefore, background checks are not one of the four critical CCR efforts.

8. What is the must-have process for intake and assessment of a child referred to the agency?

- A. Initial safety screening, timely assignment to a caseworker, development of an intake assessment, and a decision to place or refer to DFPS.**
- B. Only a monthly review with no safety checks.
- C. Immediate placement without assessment.
- D. Filing a general referral without intake.

The essential process for intake and assessment centers on protecting the child from harm while quickly organizing the response and gathering the information needed to plan appropriately. It starts with an initial safety screening to identify any immediate danger and determine the level of urgency. This ensures that children at risk receive prompt attention and protective actions if needed. Next, assigning the case to a caseworker without delay is crucial. A timely handoff creates accountability, keeps the response cohesive, and guarantees someone is responsible for coordinating next steps, gathering facts, and monitoring progress. Developing a thorough intake assessment is the backbone of planning. This step collects key information about the child, family, environment, risks, needs, and supports. A structured intake helps ensure consistent, comprehensive data is available to inform decisions and service planning. Finally, making a clear disposition—either proceeding with a placement plan or referring to the appropriate agency (such as DFPS)—puts the gathered information into action. This decision solidifies the next steps and ensures proper authority, oversight, and resources are engaged. Plans that skip safety checks, delay assignment, omit a formal intake assessment, or forego a clear disposition fail to address immediate risk and to establish a solid, proactive plan for the child's safety and well-being.

9. May you admit a young adult into your transitional living program?

- A. Yes**
- B. No
- C. Only if they are 21 or older
- D. Only if they are 15 or younger

Transitional living programs are designed to help young people transition to independent adulthood, often serving individuals aging out of foster care. Because of that purpose, admitting a young adult who meets the program's eligibility and needs is appropriate. The goal is to provide housing, life skills coaching, and ongoing support during the transition to independence, not to exclude based on being a young adult. The other options don't fit because they unnecessarily limit admission by age or categorically exclude young adults, which would go against the program's mission to support this transition period.

10. Who is responsible for providing individual counseling to each child receiving trafficking victim services?

- A. General staff
- B. A specialized professional service provider**
- C. The child's family
- D. No counseling is required

The need to provide individual counseling to trafficking victims rests on ensuring the child receives clinical, trauma-informed mental health care from someone with specialized training. A specialized professional service provider—such as a licensed mental health professional or similarly credentialed clinician with expertise in trauma and child trafficking—can accurately assess, diagnose, and treat the unique effects of trauma, provide evidence-based therapies, and develop an individualized treatment plan. They also handle important clinical responsibilities like maintaining confidentiality, obtaining informed consent, monitoring progress, and coordinating with other services, which general staff are not equipped to do in a therapeutic capacity. While supportive staff and family involvement can play important roles in a child's overall care, the actual counseling should be delivered by a qualified professional to meet the child's mental health needs safely and effectively. The option that suggests no counseling is required does not align with best practices and regulatory expectations for supporting trafficking victims.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://txlcpaaset1.examzify.com>

We wish you the very best on your exam journey. You've got this!

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