

Smith,Crystal

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Grade: 20.8%



Attempt Number: 1/3

Questions Attempted: 24/24

1. **The spouse of a client with severe and persistent mental illness (SPMI) is concerned because the client is not working. After meeting with the nurse to discuss this concern, the spouse says, "I guess people like that just don't want to work." The nurse should evaluate this statement as an indication that:**
- a. The spouse needs further teaching.
 - b. The spouse is unable to use abstract reasoning.
 - c. The spouse is displaying unconscious anger.
 - d. The spouse accurately understands the client's motivation.

Grade: 0

User Responses: d.The spouse accurately understands the client's motivation.

Feedback: a.Rationale: Psychiatric disability limits access to employment due to its impact on healthy functioning and the stigma attached to mental disorders. The spouse's statement does not reflect an understanding of this issue and indicates that the spouse needs further teaching. When the severely mentally ill are surveyed about their preferences, they usually indicate a strong desire to work. Work not only provides income, it also helps create a sense of self-worth and social belonging. The spouse is not displaying unconscious anger or an inability to use abstract reasoning. The spouse does not accurately understand the client's motivation.

Cognitive Level: Analysis

Nursing Process: Evaluation

Client Need: Psychosocial Integrity

2. **A client asks for more information about a psychosocial rehabilitation center in the community that was initially managed by a group of people with past histories of mental illness, but is now associated with the community mental health center. Which of the following models is the client referring to?**
- a. Mobile outreach model
 - b. Crisis stabilization model
 - c. Vocational model
 - d. Clubhouse model

Grade: 1

User Responses: d.Clubhouse model

Feedback: a.Rationale: The clubhouse model is a psychosocial rehabilitation center patterned after clubs managed by former psychiatric hospital clients to provide mutual support and assistance. The vocational model provides work training and offers protected alternatives to the competitive workplace. Mobile outreach teams go out into the community by car or on foot to deliver services; they take the care to the client. The crisis stabilization model is an emergency setting.

Cognitive Level: Analysis

Nursing Process: Planning

Client Need: Psychosocial Integrity

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3. **A family of a client with severe and persistent mental illness (SPMI) asks for more information about a newly formed psychiatric rehabilitation program in the community called "The Clubhouse." The nurse is aware that the model for this program was initiated by former psychiatric clients. Which of the following statements best explains the purpose of this model?**
- a. Clubhouse programs provide medication management and depot therapy for clients with severe and persistent mental illness.
 - b. Clubhouse programs deliver services in whatever setting makes the client comfortable (e.g., a fast-food restaurant or in an alley).
 - c. Clubhouse programs provide a supportive, realistic environment to help mentally ill clients function in the community.
 - d. Clubhouse programs provide free food and entertainment for clients with mental illness.

Grade: 0

User Responses: d. Clubhouse programs provide free food and entertainment for clients with mental illness.

Feedback: a. Rationale: Psychosocial "clubhouse" centers emphasize a collaborative relationship between staff and members, and provide experiences in a supportive but realistic milieu for the development of abilities for functioning in the real world. Clubhouse programs are not situated in alternative settings, nor do they provide medication management or offer free food and entertainment to clients.

Cognitive Level: Application

Nursing Process: Planning

Client Need: Psychosocial Integrity

4. **A psychiatric nurse and a social worker share a van, visiting locations where homeless, mentally ill individuals frequently congregate, offering them food, clean clothing, shelter, and medication needs assessment. Which of the following descriptors best characterizes this setting?**
- a. Community mental health center (CMHC)
 - b. Managed care organization (MCO)
 - c. Mobile outreach unit (MOU)
 - d. Public outpatient service (POS)

Grade: 0

User Responses: d. Public outpatient service (POS)

Feedback: a. Rationale: Mobile outreach units go out into the community by car or on foot to deliver services in whatever setting makes the client comfortable. Typically, the client or family member seeks services of an MCO. In addition, employers utilize MCOs for their employees and do not provide care to nonemployees. Community mental health centers typically offer emergency services, medication management clinics, psychoeducation groups, vocational rehabilitation, as well as other outpatient services based in the center.

Cognitive Level: Application

Nursing Process: Assessment

Client Need: Safe, Effective Care Environment

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5. **A nurse determines that a client with severe and persistent mental illness (SPMI) is no longer in need of inpatient psychiatric care. However, the client is reluctant to return to the community because of past failures and lack of social support. What is the best action for the nurse to take?**
- a. Discuss day treatment or partial hospitalization programs with the client.
 - b. Remind the client of the progress that has been made and continue to plan for discharge.
 - c. Talk to the client's family about their responsibility to prevent exacerbation of psychotic symptoms.
 - d. Recommend the client remain in the inpatient setting until the client feels ready for discharge.

Grade: 0

User Responses: d.Recommend the client remain in the inpatient setting until the client feels ready for discharge.

Feedback: a.Rationale: Day treatment and partial hospitalization programs provide continuity of care between the hospital and the outpatient sector in a less restrictive setting. These programs can also provide an alternative to hospital care for individuals who need complex treatment monitoring. SPMI clients are helped to make a smoother transition into the community with programmatic and social support services. Recommending the client remain until ready for discharge, reminding the client of progress made and continuing discharge plans, or talking to the client's family about their responsibility to prevent relapse are incorrect because these actions do not encourage the client's autonomy, independence, or responsibility for self-care.

Cognitive Level: Analysis

Nursing Process: Assessment

Client Need: Psychosocial Integrity

6. **Which of the following public health issues was created by the community mental health movement in the 1960s?**
- a. Substance abuse
 - b. Homeless mentally ill
 - c. HIV/AIDS infection
 - d. Criminal offenses

Grade: 0

User Responses: d.Criminal offenses

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Feedback:

a. Rationale: Homelessness of the mentally ill population was a direct result of deinstitutionalization that occurred after the community mental health movement. When federal funds became available in the 1960s for the construction of community mental health centers and the provision of acute and ambulatory care in the community, it was assumed that equal access to all levels of mental health disorders prevention and treatment would exist. However, community-based treatments and programs were insufficient for the large number of homeless individuals who were unwilling or unable to access the provided services. Substance abuse, criminal offenses, and HIV/AIDS infection are incorrect because these issues were not created by the deinstitutionalization movement in the 1960s.
Cognitive Level: Application
Nursing Process: Implementation
Client Need: Safe, Effective Care Environment

7. **A client with a severe and persistent mental illness (SPMI) was recently discharged from an inpatient psychiatric unit. Yesterday, the client failed to show for an appointment with the nurse in the community mental health center. Today the client arrives at the center in a confused and delusional state asking to see the nurse. What action should the nurse take?**
- a. Cancel the client's managed care plan.
 - b. Meet with the client as soon as it is possible to do so.
 - c. Initiate involuntary commitment procedures.
 - d. Reschedule an appointment for the client in three weeks.

Grade: 0

User Responses: d. Reschedule an appointment for the client in three weeks.

Feedback: a. Rationale: The nurse should meet with the client as soon as possible to determine the need for crisis stabilization. Clients with SPMI are at risk for acute exacerbations of an illness. This may be particularly true during times of stress or transition. In any case, this population requires access to acute assessment and treatment services as part of a package of community support including 24-hour emergency and crisis units and outreach programs. Rescheduling the appointment for weeks away may lead to other complications and the opportunity to assess the situation completely is lost if the client does not return in that time. There are no grounds for involuntary commitment (harm to self or others, inability to care for self). Canceling the client's managed care plan without making other arrangements for the client's health care is unethical and unnecessary.
Cognitive Level: Application
Nursing Process: Implementation
Client Need: Psychosocial Integrity

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8. Which of the following statements is inaccurate regarding the challenges associated with caring for high-risk severely and persistently mentally ill (SPMI) clients?
- a. Health care provider-client relationships based on trust are more difficult to establish with SPMI clients.
 - b. Clients with single psychiatric diagnoses are less likely to benefit from treatment plans than clients with multiple diagnoses.
 - c. Re-hospitalization of SPMI clients is equated with failure of the community treatment system.
 - d. Clients with legal problems may be perceived as less worthy of investment by health care providers.

Grade: 0

User Responses: d. Clients with legal problems may be perceived as less worthy of investment by health care providers.

Feedback: a. Rationale: Clients with a single psychiatric diagnosis are *more* likely to benefit from treatment than clients with multiple diagnoses. The system as a whole may respond best to clients who "fit" into specific treatment programs, like those with only a substance abuse problem. Clients with SPMI sometimes do poorly in substance abuse programs that demand sobriety as a precondition to treatment. In mental health care systems, the dually diagnosed client encounters little specific expertise related to drug or alcohol use. All other statements are accurate reflections of the challenges associated with caring for high-risk SPMI clients.

Cognitive Level: Analysis

Nursing Process: Planning

Client Need: Psychosocial Integrity

9. Which of the following client-based factors is the best predictor for readmission of clients with severe and persistent mental illness (SPMI)?
- a. Poor prognosis
 - b. Psychiatric disability
 - c. Substance abuse
 - d. Co-morbid Axis II diagnoses

Grade: 0

User Responses: d. Co-morbid Axis II diagnoses


Feedback: a. Rationale: Substance abuse is the best predictor of readmission and contributes to high recidivism rates. Psychiatric disability, poor prognosis, and co-morbid Axis II diagnoses are other challenges associated with caring for high-risk SPMI clients, but are not reliable predictors of readmission.

Cognitive Level: Application

Nursing Process: Assessment

Client Need: Psychosocial Integrity

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10. **At a managed care organization (MCO), the nurse coordinates a “flexing” of terms for the inpatient client to include the exchange of five inpatient benefit days to five weeks of home visits (Mondays, Wednesdays, and Fridays). Which of the following terms describes the nurse’s role in this case?**
- a. Client advocate
 - b. Utilization review manager
 - c. Medical care manager
 - d. Psychiatric home health nurse

Grade: 0

User Responses: d.Psychiatric home health nurse

Feedback: a.Rationale: The psychiatric–mental health nurse sometimes plays the role of client advocate in “flexing” an inpatient benefit to allow for outpatient services when hospitalization is no longer needed. The psychiatric home health nurse would provide direct care to clients in the home. As clients are discharged from hospitals more quickly, the nurse who is providing home care may be providing services that traditionally would have been delivered in a hospital setting. A utilization review manager would evaluate the results of innovative treatment strategies and make recommendations to the managed care organization for modification of benefits. In this case, the medical care has been determined.

Cognitive Level: Application

Nursing Process: Planning

Client Need: Safe, Effective Care Environment

11. **A nurse is currently employed in a community mental health center as a psychiatric–mental health triage nurse. The nurse is considering employment as a case manager at a managed care organization (MCO). Which of the following roles will *not* change if the nurse takes the job at the MCO?**
- a. Education of clients regarding their health plans.
 - b. Application of different criteria for hospital admission.
 - c. Problems in maintaining adequate boundaries.
 - d. Assumption of the “gatekeeper” role.

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Grade: 1

User Responses: d. Assumption of the "gatekeeper" role.

Feedback: a. Rationale: The common denominator for both triage nursing and case management is acting as "gatekeeper" to determine allocation of resources to ensure quality and cost-effective treatment in the least restrictive setting. Some MCOs have designed their own criteria that require ratings of functioning, physical impairments, family support, and other elements as part of a preadmission assessment. Working as a clinician in the managed-care arena presses the boundaries and exposes one to demands, crises, time pressures, and other stressful events that alter objectivity and may cause burnout. In a managed-care setting, the role of consumer educator is crucial to helping clients understand how to use their managed-care plans in a satisfactory manner for all concerned. Client entitlement expectations often differ from the specific provisions of the health plan contract and the nurse will be challenged to resolve these conflicts.

Cognitive Level: Application

Nursing Process: Implementation

Client Need: Safe, Effective Care Environment

12. **Due to the focus on shorter, more intense hospital stays, which of the following tools has become increasingly important in managed mental health care organizations (MCOs)?**
- a. Nursing care plans
 - b. Abnormal Involuntary Movement Scale
 - c. Critical pathways
 - d. CAGE Questionnaire

Grade: 0

User Responses: d. CAGE Questionnaire

Feedback: a. Rationale: Critical pathways are road maps of expected outcomes and have become increasingly important to help MCOs achieve their goal of keeping health care costs down through the judicious use of available resources. The Abnormal Involuntary Movement Scale and the CAGE Questionnaire are important assessment tools but do not play a significant role in keeping managed care costs down. Nursing care plans are valuable tools for helping nurses deliver care but are not focused on achieving MCO outcomes of shorter hospital stays.

Cognitive Level: Application

Nursing Process: Implementation

Client Need: Safe, Effective Care Environment

13. **Which of the following challenges are unique to psychiatric home care nurses and not usually present in other home care nursing situations?**
- a. Reliance on individuals other than the client for history.
 - b. Client's ambivalence about in-home assessment.
 - c. Decreased control of the treatment environment.
 - d. Delegation of care to nonprofessional caregivers.



Grade: 0

User Responses: d. Delegation of care to nonprofessional caregivers.

Feedback: a. Rationale: The client's ambivalence about (and possible mistrust of) home care providers is encountered more often in psychiatric home care than with other home care nursing situations. Family members and nonprofessional caregivers often provide history for debilitated or demented clients and provide care in many home care situations. Decreased control of the treatment environment is a feature of any home care situation.

Cognitive Level: Analysis

Nursing Process: Implementation

Client Need: Psychosocial Integrity

14. The psychiatric home care nurse received a referral to provide in-home care for a 67-year-old client with chronic paranoid schizophrenia who was recently discharged from the hospital. Which of the following factors is most important to help the nurse determine whether home care services are eligible for Medicare reimbursement?

- a. The client's hygiene
- b. The client's eligibility for disability income
- c. The client's homebound status
- d. The client's safety

Grade: 0

User Responses: d. The client's safety

Feedback: a. Rationale: Requirements for Medicare reimbursement are homebound status and the presence of a diagnosed psychiatric disorder. Homebound status for psychiatric home care would include clients who are immobilized by depression or anxiety attacks, clients who are disoriented or confused, clients with hallucinations or delusions that compromise their safety, or clients whose physical health prevents them from going to other locations where mental health services are offered. A client's hygiene, safety, and eligibility for disability income are not determinants of Medicare reimbursement.

Cognitive Level: Analysis

Nursing Process: Planning

Client Need: Psychosocial Integrity

15. A client with chronic paranoid schizophrenia lives in an old mobile home without running water and electricity. What is the most critical concern for the psychiatric home care nurse to address during the initial assessment visit?

- a. The client's hygiene
- b. The client's homebound status
- c. The client's eligibility for disability income
- d. The client's safety

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Grade: 1

User Responses: d.The client's safety

Feedback: a.Rationale: The psychiatric home care nurse may be the only professional who visits this client in the home. The most critical concern to address during the initial home visit is a threat to the client's safety in this environment. Information regarding the client's hygiene, homebound status, and disability eligibility is also necessary, but not as critical as the need to ensure a safe environment for the client.
Cognitive Level: Analysis
Nursing Process: Assessment
Client Need: Psychosocial Integrity

16. **During a treatment team planning meeting, the nurse case manager for a mentally ill client is asked by a social worker to take responsibility for providing the client's direct care. How should the nurse respond to this request?**
- a. Explain that case managers do not perform hands-on care due to their high case load numbers.
 - b. Ask the treatment team to decide if this request is appropriate.
 - c. Explain that objectivity is essential in the case manager role and this assignment is not in the client's best interest.
 - d. Agree to perform direct care.

Grade: 0

User Responses: d.Agree to perform direct care.

Feedback: a.Rationale: It is not in the best interest of the client for the nurse case manager to provide direct care because the case manager is an internal consultant who needs to remain objective to look at the whole picture. When pulled into delivering care, the case manager loses perspective and may find important issues clouded. Trust, mutual support, and clear communication among team members is necessary before case management services can be implemented. The nurse is responsible for clarifying the role of the case manager and differentiating it from medical care management.
Cognitive Level: Application
Nursing Process: Planning
Client Need: Safe, Effective Care Environment

17. **During an interdisciplinary treatment team meeting, the nurse case manager states, "This client has been refusing to let staff into his apartment, so I do not know if he has been taking his medications. We may need to tell him that his housing is contingent upon cooperating with all aspects of the treatment plan." Which of the following ethical principles is violated in this situation?**
- a. Beneficence
 - b. Justice
 - c. Autonomy
 - d. Privacy

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Questions Attempted: 24/24

Grade: 0

User Responses: d.Privacy

Feedback: a.Rationale: To make housing contingent upon treatment plan adherence may be considered coercive and violates the client's autonomy. Justice would be violated only if this client's housing was given to a more cooperative individual. Suggesting this tactic is an example of beneficence or "doing good" for the client and is not a violation of ethics. Privacy is not violated because all team members are involved in the care of this client and have "need to know" of this information.

Cognitive Level: Analysis

Nursing Process: Implementation

Client Need: Psychosocial Integrity

18. **The nurse case manager is evaluating an outpatient client's response to treatment interventions. The client has not shown improvement in psychiatric symptoms even though a new oral psychotropic medication was added to the treatment regimen one month ago. What should the nurse do in this situation?**

- a. Re-evaluate client response in one month.
- b. Recommend a higher dose of the new medication.
- c. Recommend the client be switched to depot therapy.
- d. Determine if the client is taking the oral medication as prescribed.

Grade: 1

User Responses: d.Determine if the client is taking the oral medication as prescribed.

Feedback: a.Rationale: The nurse should determine if the client is adhering to the current medication regimen before making any recommendations for a higher dose or switching to an alternate method of medication administration. Inconsistent data are always a red flag for intervention by the case manager. Perhaps the process is moving too slowly or the client is not an active participant in the care plan. Waiting to re-evaluate the client's response in one month could lead to further exacerbation of symptoms and re-hospitalization.

Cognitive Level: Analysis

Nursing Process: Evaluation

Client Need: Psychosocial Integrity

19. **A nurse has just been assigned the role of case manager to a mentally ill client. The client asks, "What are you going to do for me?" Which of the following is the best response by the nurse?**

- a. "My main role is to fill out required paperwork to get your bills paid."
- b. "I will coordinate services to help you with your current problem."
- c. "I will provide home care services to keep you out of the hospital."
- d. "My main job is to speak to your physician on your behalf."



Grade: 0

User Responses: d. "My main job is to speak to your physician on your behalf."

Feedback: a. Rationale: Nurses who perform the case manager role are vested with the authority and accountability necessary to negotiate with complex systems and a wide variety of providers, including home care services, on behalf of the client. This facilitation aspect of case management assures that clients receive care that is appropriate, individualized, cost-effective, and has optimal outcomes. In other words, case managers help clients and their families make informed decisions based on client needs, abilities, resources, and personal preferences. The role of case manager is much broader than speaking to the physician or filling out paperwork. Case managers should not be providing direct care.
Cognitive Level: Analysis
Nursing Process: Implementation
Client Need: Safe, Effective Care Environment

20. Which characteristic distinguishes case management in a managed care organization from case management in an inpatient setting?

- a. Ethical conflicts between clients and organizational needs.
- b. Continuous monitoring of progress toward desired outcomes.
- c. Potential blurring of professional boundaries.
- d. Responsibility to recommend termination of ineffective therapies.

Grade: 0

User Responses: d. Responsibility to recommend termination of ineffective therapies.

Feedback: a. Rationale: Case managers in a managed care setting often find they are fulfilling many roles for their clients that have not been satisfied by other clinical resources, including social support. This blurring of boundaries is less likely within the inpatient setting, as such relationships are, by nature, time-limited. Case managers follow clients throughout inpatient and outpatient settings, continually monitoring progress toward desired outcomes. Ethical conflicts between client and organizational needs arise in any organizational setting where resources are limited. Responsibility to recommend termination of ineffective therapies is a nursing responsibility in any setting.
Cognitive Level: Analysis
Nursing Process: Application
Client Need: Safe, Effective Care Environment

21. A nurse case manager serving as "gatekeeper" would assess a client to determine if the client:

- a. Needs treatment based on the severity of the client's illness.
- b. Needs official legal representation.
- c. Has a medical or psychiatric illness.
- d. Is ready for discharge from the health care system.

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User Responses: d.Is ready for discharge from the health care system.

Feedback: a.Rationale: The nurse serves as "gatekeeper" of the system by triaging who will use the system and at what level of care. Triage involves determining the severity of the illness and the need for immediate care in order to direct care and ensure the efficient use of medical and nursing care as well as facilities. Case managers are not responsible for diagnosing medical or psychiatric illnesses or determining the need for legal representation. The "gatekeeper" determines at what level the client enters the health care system, not at what point the client is discharged from the health care system.

Cognitive Level: Application

Nursing Process: Assessment

Client Need: Safe, Effective Care Environment

22. Which of the following statements indicates that a client understands the purpose of community meetings in an inpatient therapeutic environment?

- a. "These meetings will help my family understand why they call this a 'therapeutic environment.'"
- b. "In this meeting I can discuss the side effects of my medications that are giving me problems."
- c. "The focus of these meetings is how to live in the community after I am discharged from this unit."
- d. "These meetings are where I can discuss any problems or conflicts with other clients on this unit."

Grade: 1

User Responses: d."These meetings are where I can discuss any problems or conflicts with other clients on this unit."

Feedback: a.Rationale: Community meetings provide an opportunity for clients to solve problems of conflicting interests, experience cooperation with others, share responsibility, and experience leadership in the group. Clients are encouraged to discuss aspects of the unit environment such as cleanliness, privacy, radio and television use, or other interpersonal problems that may interfere with the quality of life for the group. All other answers are incorrect because they do not reflect an accurate understanding of the purpose of community meetings.

Cognitive Level: Analysis

Nursing Process: Evaluation

Client Need: Psychosocial Integrity

23. Which of the following statements best reflects the nurse's understanding of therapeutic environment principles?

- a. "Clients learn how to improve communication with family members so that a therapeutic environment can exist."
- b. "A strict daily schedule is necessary to maintain an organized, quiet therapeutic environment."
- c. "The therapeutic environment ensures safety while clients develop or improve interpersonal skills."
- d. "Nurses assume responsibility for clients' behavior when clients are unable to control their actions."

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User Responses: d. "Nurses assume responsibility for clients' behavior when clients are unable to control their actions."

Feedback: a. Rationale: The provision of a safe environment while developing or improving interpersonal skills is an accurate statement of the unique characteristic of therapeutic environments. A strict daily schedule with the goal of maintaining an organized, quiet environment is not reflective of therapeutic environment principles. A structured routine which helps clients keep on track and organize their thinking is more characteristic of a therapeutic environment. In milieu therapy models, organizational hierarchy is flattened and clients assume personal responsibility for their own behaviors. Nurses provide care for clients who are unable to meet basic needs on their own but do not assume responsibility for client behaviors. The goal of a therapeutic environment is to partner with clients and their families to reach a mutually agreeable plan for a safe, secure, and supportive living arrangement.
Cognitive Level: Application
Nursing Process: Implementation
Client Need: Psychosocial Integrity


24. A client with a bipolar disorder was just admitted to a hospital's psychiatric unit after being intoxicated in a public place. The client admits to "having a few drinks" and "causing a little trouble at the bar." The nurse observes that other clients on the unit are reacting negatively to the client's loud and overbearing manner during a group activity. Which of the following external factors is the nurse being most sensitive to?
- a. Group safety
 - b. Group well-being
 - c. Group autonomy
 - d. Group privacy

Grade: 0

User Responses: d. Group privacy

Feedback: a. Rationale: A client's behavior may be disruptive or detrimental to the overall well-being of other clients. Nurses may need to monitor or manage certain clients to maximize the common good. Symptom acuity may limit a client's ability to be actively involved with the treatment of others. In this situation the group well-being is considered primary, which may necessitate the restriction of the disruptive client's individual autonomy. Group safety and group privacy are not in jeopardy at this time.
Cognitive Level: Application
Nursing Process: Evaluation
Client Need: Psychosocial Integrity

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Activity Name: Chapter 12 Pre Test

1. a. The spouse needs further teaching.
2. d. Clubhouse model
3. c. Clubhouse programs provide a supportive, realistic environment to help mentally ill clients function in the community.
4. c. Mobile outreach unit (MOU)
5. a. Discuss day treatment or partial hospitalization programs with the client.
6. b. Homeless mentally ill
7. b. Meet with the client as soon as it is possible to do so.
8. b. Clients with single psychiatric diagnoses are less likely to benefit from treatment plans than clients with multiple diagnoses.
9. c. Substance abuse
10. a. Client advocate
11. d. Assumption of the "gatekeeper" role.
12. c. Critical pathways
13. b. Client's ambivalence about in-home assessment.
14. c. The client's homebound status
15. d. The client's safety
16. c. Explain that objectivity is essential in the case manager role and this assignment is not in the client's best interest.
17. c. Autonomy
18. d. Determine if the client is taking the oral medication as prescribed.
19. b. "I will coordinate services to help you with your current problem."
20. c. Potential blurring of professional boundaries.
21. a. Needs treatment based on the severity of the client's illness.
22. d. "These meetings are where I can discuss any problems or conflicts with other clients on this unit."
23. c. "The therapeutic environment ensures safety while clients develop or improve interpersonal skills."
24. b. Group well-being