

# PRACTICE EXAM 22: CALIFORNIA LCSW LAW AND ETHICS SIMULATION (75 QUESTIONS)

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1. An LCSW is providing therapy to a client who works at an elementary school cafeteria. The client describes severe understaffing that has resulted in children receiving food that has been sitting at unsafe temperatures for hours. Several children have recently been sent home sick with gastrointestinal symptoms. The client has reported the issue to the school principal who has taken no action. What should the LCSW consider?

A. Maintain strict confidentiality since food safety violations are regulatory matters that do not trigger any mandatory reporting exception for therapists

B. Report the school cafeteria to the county health department since the LCSW has knowledge of a public health hazard

C. Assess whether children being systematically served food at unsafe temperatures — resulting in illness — constitutes a form of institutional neglect creating reasonable suspicion that children's health is being endangered, potentially warranting a mandated report, while also supporting the client in escalating the concern through additional appropriate channels

D. Encourage the client to contact the county health department directly and limit the LCSW's involvement to therapeutic support for the client's workplace stress

2. An LCSW is conducting a suicide risk assessment on a 16-year-old who presents with passive suicidal ideation. The adolescent states, "I sometimes wish I wouldn't wake up, but I'd never do anything." The LCSW learns the adolescent recently gave away a cherished collection of items to friends and has been writing farewell-themed messages in a journal. Which clinical principle should guide the LCSW's assessment?

A. Behavioral indicators such as giving away possessions and writing farewell messages may be more clinically significant than the client's verbal denial of active intent, as the discrepancy between stated ideation level and observable warning signs warrants heightened concern and a more intensive safety response

B. The client's verbal denial of active intent is the most reliable indicator and should be accepted at face value since adolescents are typically honest about their level of suicidal thinking

C. The behavioral indicators are likely related to normal adolescent developmental transitions and do not warrant elevated concern in the absence of an explicit stated plan

D. The farewell messages constitute a written suicide plan that automatically requires a 5150 hold regardless of the client's verbal statements

3. An LCSW has been providing therapy to a client for two years. The client's insurance changes and the new insurance plan is not accepted by the LCSW's practice. The client cannot afford to pay out of pocket. What is the LCSW's ethical obligation?

A. Terminate the client immediately since the LCSW has no obligation to provide services without compensation

B. Continue treatment indefinitely at no charge since terminating over a financial issue constitutes abandonment

C. Continue treatment at the current fee and allow the client to accumulate an unpaid balance that can be settled when the client's financial situation improves

D. Discuss the situation openly with the client, explore options including a sliding scale, reduced frequency, pro bono services for a transitional period, or referral to providers who accept the new insurance, and ensure the client is not abandoned during the transition regardless of the chosen solution

4. An LCSW is treating a client who reveals that her 13-year-old daughter's boyfriend, who is 18, has been pressuring the daughter to send nude photographs. The daughter has not yet sent photos, but the boyfriend has been sending sexually explicit images of himself to the daughter. What reporting obligations does this trigger?

A. No report is needed since the daughter has not sent any photographs and the boyfriend's conduct does not meet the threshold for child abuse

B. File a mandated child abuse report since an 18-year-old sending sexually explicit images to a 13-year-old and pressuring her for nude photographs constitutes sexual exploitation of a minor regardless of whether the minor has complied with the request

C. Advise the mother to contact the police directly since this is a criminal matter rather than a child abuse issue

D. File a report only if the daughter eventually sends photographs since the boyfriend's behavior is currently limited to solicitation rather than actual exploitation

5. An LCSW provides therapy to a client who is a nursing home administrator. The client casually mentions implementing a policy of using physical restraints on agitated dementia patients "to keep them safe" — including restraining patients in wheelchairs for up to eight hours daily. The client sees nothing wrong with this practice. What should the LCSW consider?

A. Whether the systematic, prolonged physical restraint of dementia patients — potentially for up to eight hours daily — exceeds clinically appropriate use of restraints and may constitute abuse or neglect of dependent elderly persons, warranting a mandated elder abuse report and clinical discussion about ethical standards of care

B. Accept the client's framing since the administrator is the expert on nursing home management and restraint decisions reflect institutional safety protocols

C. Recommend the client review the restraint policies with the facility's medical director before the LCSW takes any further action

D. Focus therapy on the client's administrative stress without addressing the restraint practice since institutional policies are outside the LCSW's clinical purview

6. An LCSW is providing therapy to a couple. During a session, one partner pulls out their phone and begins live-streaming the session on social media without telling the other partner or the LCSW. The LCSW notices the phone positioned to capture the session. What should the LCSW do FIRST?

A. Continue the session while noting the phone's position and address the recording at the end of the session to avoid disrupting the therapeutic process

B. End the session immediately and file a police report for violation of California's two-party consent recording law

C. Stop the session immediately, address the live-streaming directly, request it be ended, and discuss the serious confidentiality and legal implications — including the fact that the other partner's image and therapeutic communications have been broadcast without consent in violation of California's two-party consent law

D. Confiscate the phone to prevent further broadcasting and delete the stream before returning the device

7. An LCSW working at a pediatric clinic is asked to evaluate a 5-year-old whose parents are concerned about behavioral regression. During the assessment, the LCSW observes that the child has an unusual number of dental caries — severely decayed teeth that appear to have been untreated for an extended period. The child complains of tooth pain. What should the LCSW consider?

- A. Whether severe, untreated dental decay in a young child — resulting in pain and likely affecting the child's ability to eat, sleep, and function — may constitute medical neglect warranting a mandated child abuse report, while also recommending immediate dental evaluation
- B. Note the dental condition in the assessment but recognize that dental health falls outside the LCSW's clinical expertise and professional responsibility
- C. Refer the family to a pediatric dentist without considering a mandated report since dental issues are medical rather than abuse-related matters
- D. Document the observation and schedule a follow-up appointment to reassess the dental condition before considering any reporting obligation

8. An LCSW treats a client who describes her elderly mother's living situation. The mother, age 82, lives alone and the client states that the mother's home is infested with cockroaches, has no running water because the utilities were shut off, has spoiled food throughout the kitchen, and the mother has been wearing the same clothes for weeks. The mother insists she is "fine" and refuses help. What is the LCSW's obligation?

- A. Respect the elderly mother's autonomy since she has the right to live in whatever conditions she chooses
- B. File a mandated report of suspected self-neglect to Adult Protective Services, as the described living conditions — no running water, insect infestation, spoiled food, and hygiene deterioration in an 82-year-old living alone — constitute reasonable suspicion that a dependent elderly person is unable to meet basic needs for health and safety
- C. Recommend the client seek a conservatorship to take control of the mother's living situation
- D. Encourage the client to visit the mother more frequently and assist with cleaning and food preparation

9. An LCSW is treating a client who is a home health aide. The client describes an elderly patient who becomes confused at sundown and has wandered out of the home three times in the past month. Once the patient was found walking along a highway. The client states she mentioned this to the patient's family but they dismissed her concerns, saying "Mom's always been a wanderer." What is the LCSW's obligation?

- A. Accept the family's assessment since they know the patient best and wandering behavior in elderly individuals is common

B. Assess whether a cognitively impaired elderly person repeatedly wandering into dangerous situations — including walking along a highway — while the family dismisses the risk constitutes neglect of a dependent adult, potentially triggering a mandated elder abuse report

C. Recommend the client install locks on the patient's doors as a practical solution and address the workplace frustration therapeutically

D. Advise the client to file the report herself since she is the direct witness and is also a mandated reporter as a home health aide

10. An LCSW working in a college counseling center discovers that the university's new data analytics program is accessing student therapy records to identify "at-risk students" and flag them for administrative intervention. The program was implemented without consulting the counseling center. What should the LCSW do?

A. Accept the program since it serves student safety and the university has a legitimate interest in identifying at-risk students

B. Cooperate with the program but request that only de-identified data be used to protect student privacy

C. Object formally to the program, as accessing therapy records for administrative purposes without student consent violates the confidentiality of therapeutic communications and potentially FERPA, and advocate for immediate cessation while ensuring students are informed about how their records are being used

D. Delete all electronic therapy records to prevent further unauthorized access by the analytics program

11. An LCSW is treating a client whose presenting concern is marital dissatisfaction. During the tenth session, the client mentions for the first time that she has a 7-year-old child with severe autism who has been receiving applied behavior analysis (ABA) therapy at a center the client describes as "harsh." The client states the child comes home with bruises from physical prompting and cries every morning before going to the center. What should the LCSW consider?

A. Address the client's stress about the child's treatment as a component of the marital dissatisfaction without independent analysis of the treatment setting

B. Recommend the client discuss her concerns with the ABA center's clinical director before the LCSW considers any action

C. Refer the family to a different ABA provider since the mother's subjective impression of harshness suggests the center's methods may not align with the family's values

D. Whether a child returning from a treatment setting with bruises and exhibiting significant distress before attending creates reasonable suspicion that the child may be experiencing abuse or harm at the treatment facility, warranting a mandated child abuse report and a recommendation to suspend the child's attendance pending investigation

12. An LCSW is providing therapy to a client who mentions that her sister's 3-year-old child has been found outside alone on multiple occasions — once near a busy road, once at a neighbor's house, and once at a playground several blocks from home. The sister claims the child "escapes" despite her best efforts. What should the LCSW consider?

A. Accept the sister's explanation since young children can be remarkably skilled at opening doors and escaping supervision

B. Whether a pattern of a 3-year-old repeatedly being found unsupervised in dangerous locations — near traffic, at distant locations — creates reasonable suspicion of inadequate supervision constituting general neglect, warranting a mandated child abuse report regardless of the caretaker's stated efforts

C. Recommend the client help her sister install child-proof locks and address the family concern therapeutically

D. Advise the client to report the situation to CPS herself since the client is the firsthand observer

13. An LCSW treats a client who works at an assisted living facility. The client describes a pattern where the facility consistently understaffs overnight shifts, leaving one aide responsible for 40 residents including those with dementia and fall risks. The client states that call lights go unanswered for hours and residents have fallen without anyone available to assist. What is the LCSW's obligation?

A. Assess whether the systematic understaffing that results in vulnerable dependent adults being left without adequate supervision — with call lights unanswered for hours and residents experiencing unassisted falls — constitutes institutional neglect of dependent adults warranting a mandated report to Adult Protective Services or the California Department of Public Health

B. Encourage the client to report the staffing issue through OSHA since unsafe staffing ratios are a workplace safety concern

C. Address the client's job dissatisfaction therapeutically and recommend the client seek employment at a better-staffed facility

D. Contact the assisted living facility administration directly to express concern about staffing levels

14. An LCSW is providing therapy to a client whose 10-year-old child attends a martial arts studio. The client mentions that the instructor requires children to spar full-contact without protective gear, and several children — including the client's child — have sustained concussions, a broken nose, and various injuries. The instructor dismisses parental concerns saying "pain builds character." What should the LCSW consider?

- A. This is a sports participation decision that falls within parental discretion and does not warrant clinical concern
- B. Recommend the client remove the child from the program and provide a referral to a safer martial arts school
- C. Whether an instructor who requires children to spar full-contact without protective gear — resulting in repeated concussions and significant injuries while dismissing parental safety concerns — is subjecting children to physical harm that may constitute child abuse warranting a mandated report
- D. Advise the client to consult with the child's pediatrician about whether the injuries are medically concerning before the LCSW takes any action

15. An LCSW working in a geriatric care facility is treating an 88-year-old resident. During a session, the client shows the LCSW bruises on her inner thighs and states quietly, "The night aide does things to me when nobody's watching." What should the LCSW do?

- A. Gently explore what the client means by "does things" to gather more specific information before determining whether a report is warranted
- B. Consider whether the bruises could be caused by the client's blood-thinning medications before filing any report
- C. Document the statement and schedule a follow-up session to assess whether the client's account is consistent before reporting
- D. File a mandated elder abuse report immediately, as bruising on the inner thighs combined with the client's statement about a caretaker "doing things" when no one is watching constitutes reasonable suspicion of sexual abuse requiring immediate reporting and protective action

16. An LCSW is conducting a group therapy session for adolescents when one member shows the group a TikTok video of another student at their school being physically assaulted by classmates. The video clearly shows a minor being kicked and punched while others laugh and film. The victim is identifiable. What should the LCSW do?

- A. Address the group's reaction to the video therapeutically without taking external action since the assault was recorded at school and falls under school disciplinary jurisdiction
- B. Recognize that the LCSW has directly observed video evidence of a minor being physically assaulted, creating reasonable suspicion of child abuse warranting a mandated report, while also addressing the group dynamics related to viewing violence and bystander responsibility
- C. Instruct the group member to delete the video since possessing recordings of minors being assaulted may constitute a legal issue
- D. Report the video to the school administration and allow the school to handle the matter through disciplinary channels

17. An LCSW is providing therapy to a client who is the parent of an infant. The client describes using a practice called "cry it out extinction" — allowing the infant to cry for hours at night without any response. The client states the baby sometimes vomits from crying so hard but the client does not go to the baby because a parenting book says not to. The infant is 3 months old. What should the LCSW consider?

- A. Whether allowing a 3-month-old infant to cry to the point of vomiting for hours without any caregiver response may exceed evidence-based sleep training parameters and constitute a potential form of neglect — particularly given the infant's very young age and the physical distress evidenced by vomiting — warranting careful assessment of whether reasonable suspicion of neglect exists
- B. Accept the practice as a legitimate parenting choice since the client is following recommendations from a parenting resource
- C. Provide psychoeducation about age-appropriate sleep training techniques but take no further action since the parent is acting in good faith
- D. File an immediate mandated report since any form of cry-it-out sleep training with an infant constitutes child abuse

18. An LCSW is treating a client who is a foster parent caring for a 6-year-old with a history of sexual abuse. The foster parent mentions that the child has been "acting out sexually" with the family's pet. The child has been placing the pet in sexual positions and simulating sexual acts. What should the LCSW consider?

- A. Dismiss the behavior as normal childhood curiosity about bodies and animals
- B. Recommend the foster parent remove the pet from the home and address the behavior through standard behavioral interventions

C. Recognize that a sexually abused child exhibiting sexualized behavior with an animal may indicate ongoing sexual abuse, insufficiently treated prior abuse, or exposure to new sexualized content, and assess whether a mandated report is warranted to investigate the possibility that the child is being re-abused while also recommending specialized trauma treatment

D. File a report against the foster parent for failing to adequately supervise the child's interactions with the family pet

19. An LCSW is providing teletherapy to a client who appears to be in a vehicle. The LCSW hears a child's voice asking for water. The client responds, "Be quiet — I told you to stay in the car." The LCSW then realizes the session is occurring while the client is parked outside a casino, and a young child has been left in the vehicle. It is mid-July. What should the LCSW do?

A. Continue the session and address the parenting concern at the next in-person appointment

B. Ask the client how old the child is before determining whether the situation warrants intervention since older children can safely stay in vehicles

C. Address the situation therapeutically by exploring the client's childcare challenges and offering referrals for childcare resources

D. Interrupt the session immediately to address the child safety emergency — a young child left in a vehicle in July heat is in potential mortal danger — instruct the client to bring the child inside or end the session so the client can attend to the child, and assess whether the situation warrants a mandated child abuse report for child endangerment

20. An LCSW is treating a client who is a preschool teacher. The client describes a fellow teacher at the preschool who has been using a "discipline technique" of spraying children in the face with a water bottle when they misbehave. Several parents have complained but the preschool director has defended the practice as "harmless." What is the LCSW's obligation?

A. Address the client's frustration about the workplace environment and encourage the client to document the concerns through the school's formal complaint process

B. File a mandated child abuse report since spraying young children in the face as a punishment constitutes a humiliating and physically aversive discipline technique that may constitute child abuse, particularly when complaints have been raised and the institution has failed to intervene

C. Report the preschool director to the California Department of Social Services Community Care Licensing Division for defending an inappropriate disciplinary practice

D. Recommend the client seek employment at a different preschool to remove herself from the toxic workplace environment

21. An LCSW is providing family therapy when the identified patient — a 14-year-old with behavior problems — blurts out, "At least I don't hit my kids like Dad hits my little sister." The 5-year-old sister is not present. The father becomes angry and says, "That's nonsense — I discipline appropriately." The mother looks down. What should the LCSW do FIRST?

A. Attend to the immediate dynamics in the room, create safety for the 14-year-old who made the disclosure, note the father's defensiveness and the mother's avoidance as clinically significant, and file a mandated child abuse report based on the adolescent's disclosure — as this constitutes a statement from a sibling witness creating reasonable suspicion of physical abuse of the 5-year-old

B. Explore the 14-year-old's statement further to determine whether "hits" means abusive physical punishment or normal disciplinary spanking before deciding whether a report is warranted

C. Redirect the session to the 14-year-old's behavior problems since the child may be making accusations to deflect attention from their own issues

D. Schedule individual sessions with each family member to investigate the allegation privately before making any reporting determination

22. An LCSW is treating a client who mentions that her neighbor's teenage children (ages 13 and 15) have been left home alone for the past two weeks while the neighbor travels for work. The teenagers appear to be managing — attending school, preparing meals — but the client is concerned about the duration of the absence. What should the LCSW consider?

A. No concern is warranted since teenagers ages 13 and 15 are generally capable of caring for themselves for extended periods

B. File a mandated report immediately since any absence of parental supervision for two weeks constitutes child abandonment

C. Recognize that while California does not specify a minimum age for children to be left alone, two weeks without parental presence for a 13-year-old and 15-year-old raises concerns about the adequacy of supervision, the availability of emergency resources, and whether the prolonged absence constitutes a form of neglect — and assess whether a mandated report is warranted

D. Advise the client to check on the teenagers herself and report only if she observes signs of actual distress or neglect

23. An LCSW is providing therapy to a client who reveals she has been homeschooling her four children but has not been providing any actual education — no curriculum, no instruction, no academic activities. The children, ages 7 through 14, spend their days doing household chores while the mother watches television. The eldest child cannot read. What should the LCSW do?

A. Respect the mother's educational choices since homeschooling parents have broad discretion over curriculum and teaching methods in California

B. Recommend the mother look into online educational resources and offer to help develop a basic curriculum plan during therapy sessions

C. Report the family to the California Department of Education for homeschooling violations since the lack of instruction fails to meet the state's educational requirements

D. File a mandated child abuse report for educational neglect, as a 14-year-old who cannot read and children who receive no education of any kind while being used for household labor constitutes neglect that deprives children of the basic developmental necessity of education

24. An LCSW is treating a client who is a pediatric nurse. The client describes a physician at the hospital who routinely prescribes excessive doses of sedation for pediatric patients during procedures — doses the nursing staff consider dangerous. The nurses have raised concerns with the hospital administration, which has taken no action. Two children experienced respiratory depression requiring emergency intervention last month. What should the LCSW consider?

A. Encourage the client to file a report with the Medical Board against the physician and provide therapeutic support through the process

B. Assess whether the information about children experiencing dangerous respiratory depression from excessive sedation at the hands of a physician — particularly after internal reporting has failed — creates reasonable suspicion that children in the physician's care are being harmed, potentially warranting a mandated child abuse report for medical maltreatment in addition to supporting the client in pursuing institutional and regulatory channels

C. Address the client's moral distress therapeutically and recommend the client consult with a patient safety advocate at the hospital

D. Report the hospital to the Joint Commission for failing to address patient safety concerns raised by nursing staff

25. An LCSW is providing couples therapy. One partner mentions that their 4-year-old child has been complaining that "Grandpa's hugs hurt" and doesn't want to visit the paternal grandfather anymore. The

other partner dismisses this, saying "Dad just hugs too tight — he doesn't know his own strength." What should the LCSW do?

- A. Explore the child's complaint further with the parents, assess whether the child's avoidance of the grandfather and complaint of painful physical contact creates reasonable suspicion warranting a mandated report, and avoid accepting the minimizing explanation without adequate assessment
- B. Accept the explanation since tight hugs from elderly relatives are a common childhood complaint and do not suggest abuse
- C. Recommend the parents supervise all visits with the grandfather as a precautionary measure without filing a report
- D. Ask the parents to bring the child to a session so the LCSW can assess the child's reaction directly before making a determination

26. An LCSW working at a residential treatment center for adolescents discovers that staff have been conducting strip searches of residents as a routine "safety measure" upon return from off-campus activities. The searches are conducted by same-gender staff but the residents — ages 13 to 17 — have not consented and no individualized safety concern exists. What should the LCSW do?

- A. Accept the searches as a necessary security measure in a residential treatment setting where safety protocols must take precedence over individual privacy
- B. Request that the searches be documented in each resident's chart to create transparency about the practice
- C. Challenge the practice by raising concerns that routine strip searches of minors without individualized justification may constitute a violation of the residents' rights and dignity, potentially rising to the level of institutional abuse, and advocate for alternative safety screening methods while considering reporting obligations
- D. Allow the practice to continue but ensure residents are informed about the searches during the admission consent process

27. An LCSW treats a client who works at a children's summer camp. The client describes the camp director's practice of punishing children by making them run laps in extreme heat until several children have collapsed from heat exhaustion. One child was hospitalized. The camp director describes this as "building resilience." What is the LCSW's obligation?

- A. Maintain confidentiality and address the client's moral distress about the workplace environment
- B. Recommend the client report the practice to the camp's parent organization and support the client therapeutically through the process
- C. Encourage the client to resign from the camp in protest since continuing to work there constitutes complicity in the abusive practices
- D. File a mandated child abuse report since forcing children to exercise to the point of collapse and hospitalization in extreme heat constitutes physical abuse and child endangerment, and the LCSW received this information in a professional capacity

28. An LCSW is providing therapy to a client who reveals that her elderly father, who has moderate dementia, has recently "married" a woman 40 years younger who the family suspects is financially exploiting him. The father signed over power of attorney to the new wife immediately after the ceremony. The father's cognitive testing from six months ago showed significant impairment in executive functioning and judgment. What should the LCSW consider?

- A. Respect the father's marriage since adults have the right to marry regardless of cognitive status
- B. Assess whether the information — a person with documented cognitive impairment in judgment and executive functioning being rapidly married by a significantly younger person who immediately obtained power of attorney — creates reasonable suspicion of financial exploitation of a vulnerable elderly person warranting a mandated elder abuse report
- C. Advise the client to challenge the marriage in court on grounds of diminished capacity and provide a referral to an elder law attorney
- D. Recommend the family request a formal capacity evaluation before taking any action

29. An LCSW is providing therapy to a client who mentions that her 8-year-old's teacher has been posting photos of students on the teacher's personal social media accounts without parental consent. Some photos show children in embarrassing situations — crying, having tantrums, or in costumes. The teacher adds mocking captions. What should the LCSW consider?

- A. Whether an adult in a position of authority over children who photographs them in vulnerable moments and publicly shares those images with mocking captions is engaging in a pattern of humiliation that may constitute emotional abuse of the children depicted, potentially warranting a mandated child abuse report
- B. Recommend the client report the social media posts to the school administration since this is a school policy violation rather than a child protection issue

- C. Encourage the client to contact the teacher directly and request the photos be removed
- D. Advise the client to report the teacher's social media account to the platform for violating policies about posting images of minors

30. An LCSW is working with a family in which the parents practice a strict religious discipline system that includes requiring their 6-year-old to kneel on dried rice for 30 minutes as punishment for lying. The child's knees show callused areas consistent with repeated kneeling on hard surfaces. The parents believe this is scripturally supported. What should the LCSW do?

- A. Respect the family's religious discipline practices since the First Amendment protects faith-based parenting decisions
- B. Provide psychoeducation about alternative discipline strategies and allow the parents time to modify their approach
- C. File a mandated child abuse report since requiring a child to kneel on dried rice — causing visible physical effects — constitutes physical abuse regardless of the religious justification, as California law does not exempt physically harmful discipline from child protection reporting based on religious belief
- D. Discuss the discipline practice in therapy and monitor for escalation before considering a report

31. An LCSW treats a client who works at an after-school program. The client describes a coworker who has been taking individual children into a private room, locking the door, and conducting "special mentoring sessions" that the children are told to keep secret from parents and other staff. No child has disclosed abuse, but the pattern of secrecy, isolation, and locked doors concerns the client. What should the LCSW consider?

- A. Accept the coworker's explanation of "mentoring" since no child has made a disclosure and suspicion based on behavioral patterns alone is insufficient for a mandated report
- B. Recommend the client discuss concerns with the program director and address the workplace anxiety therapeutically
- C. Encourage the client to observe the coworker more closely and gather additional information before the LCSW considers any action
- D. Whether the pattern of isolating individual children behind locked doors with explicit instructions for secrecy constitutes grooming behavior that creates reasonable suspicion of child abuse warranting a mandated report — recognizing that grooming behavior itself may be reportable without a specific child disclosure

32. An LCSW is providing therapy to a client who is the mother of a 2-year-old. The client mentions that the child's father (her ex-partner) has been allowing his new girlfriend's 14-year-old son to babysit the 2-year-old overnight, including diaper changes and bathing. The client has no specific concerns about the 14-year-old's behavior, but she is uncomfortable with the arrangement. Is this a reportable situation?

A. Yes, any male babysitter changing diapers on a female toddler constitutes potential sexual abuse requiring a report

B. The discomfort alone does not create reasonable suspicion of abuse — a 14-year-old babysitting a 2-year-old, while potentially concerning depending on the circumstances, is not inherently abusive, and the LCSW should explore the client's specific concerns while assessing whether any actual indicators of risk exist rather than filing a report based on the arrangement alone

C. Yes, because a 14-year-old is too young to be responsible for an overnight babysitting arrangement involving an infant, constituting neglect by the father

D. Report the father for using an unlicensed caregiver since California law requires all childcare providers to be licensed

33. An LCSW is treating a client who describes her 11-year-old child's competitive cheerleading coach. The coach requires weigh-ins before every practice, publicly announces each child's weight to the team, and has told the client's daughter — who weighs a healthy amount for her age — that she is "too fat to be on top of the pyramid." The child has begun restricting food and expressing body hatred. What should the LCSW consider?

A. Address the child's eating concerns therapeutically and recommend the client speak with the coaching organization about the weigh-in policy

B. File a complaint with the cheerleading organization's governing body since the coach's practices violate competitive athletic standards

C. Recommend the client remove the child from the cheerleading program since the toxic coaching environment is the primary driver of the child's symptoms

D. Whether a coach's systematic practice of public weigh-ins, body shaming, and telling a healthy-weight child she is "too fat" — which has demonstrably contributed to food restriction and body hatred — constitutes emotional abuse of minors that may warrant a mandated child abuse report

34. An LCSW is providing therapy to a client whose 9-year-old son has been coming home from a friend's house with stories about the friend's father showing the boys violent and sexually explicit

movies. The friend's father provides the boys with alcohol during these viewings. The son has been having nightmares and behavioral regression since these visits began. What should the LCSW do?

- A. Recommend the client prohibit her son from visiting the friend's house and address the behavioral regression therapeutically
- B. Advise the client to speak with the friend's father about age-appropriate content and the provision of alcohol to minors
- C. File a police report since providing alcohol to minors is a criminal offense that should be handled by law enforcement rather than CPS
- D. File a mandated child abuse report since an adult showing sexually explicit content to children and providing them with alcohol constitutes child abuse, and the behavioral regression and nightmares demonstrate the impact on the LCSW's client's child

35. An LCSW is treating a client who is a single mother working two jobs. The client mentions that her 5-year-old and 7-year-old walk six blocks to school alone through a neighborhood with heavy traffic and no crossing guards. The client cannot drive them due to her work schedule and cannot afford before-school care. She acknowledges the route is dangerous but feels she has no alternatives. What should the LCSW consider?

- A. File a mandated report immediately since young children walking through dangerous traffic without adult supervision constitutes per se neglect
- B. Focus therapy on helping the client manage the guilt about her work-life balance without addressing the safety concern externally
- C. Assess the totality of circumstances — including the children's ages, the specific dangers of the route, the mother's genuine lack of resources, and whether the risk to the children constitutes general neglect under CANRA — while also actively helping the client identify alternatives such as walking school buses, neighbor arrangements, or community programs that could address the safety concern
- D. Accept the situation since many children walk to school independently and this does not constitute neglect

36. An LCSW is treating a client who works at an in-home daycare operated by the client's sister. The client describes the sister routinely leaving 10 children (ages 1-4) supervised only by a 12-year-old helper while the sister runs errands for up to two hours at a time. What is the LCSW's obligation?

- A. Encourage the client to discuss the supervision concern with her sister and address the family dynamic therapeutically
- B. File a mandated child abuse report since leaving 10 very young children in the care of a 12-year-old for extended periods at an in-home daycare constitutes inadequate supervision placing multiple children at substantial risk of harm, and the LCSW received this information in a professional capacity
- C. Report the daycare to Community Care Licensing for a staffing ratio violation but not to CPS since this is a licensing issue rather than abuse
- D. Recommend the client anonymously report the practice to avoid disrupting the family relationship

37. An LCSW is providing therapy to a client whose elderly mother lives in a board-and-care home. The client reports visiting and finding the mother sitting in a urine-soaked chair, with an untreated bedsore visible on her arm, and no staff member in sight. The client states this has been the condition during the last three visits. What should the LCSW do?

- A. File a mandated elder abuse report since the described conditions — repeated findings of an elderly resident sitting in urine, with an untreated bedsore, and no staff supervision — constitute neglect of a dependent elderly person by the care facility, and the LCSW has received this information in a professional capacity
- B. Recommend the client contact the facility's ombudsman to file a formal complaint about the conditions
- C. Encourage the client to transfer the mother to a different facility and address the client's distress about the situation therapeutically
- D. Advise the client to document the conditions with photographs before any report is filed so there is evidence to support the allegation

38. An LCSW is treating a family in which the parents describe their 4-year-old's "imaginary friend" who the child says visits at night and "touches my private parts." The parents laughed about this during the session, interpreting it as the child's active imagination. What should the LCSW do?

- A. Accept the parents' interpretation since imaginary friends are a normal developmental phenomenon in 4-year-olds
- B. Schedule an individual play therapy session to explore the imaginary friend narrative further before determining whether a report is warranted

C. Recognize that a 4-year-old's description of being touched on private parts by a nighttime visitor — even one described as an "imaginary friend" — constitutes a potential disclosure of sexual abuse using developmentally limited language, warranting a mandated child abuse report rather than dismissal as fantasy

D. Recommend the parents limit the child's exposure to television and media content that might be stimulating the sexual imagery in the child's imagination

39. An LCSW is providing therapy to a client who is a volunteer youth soccer coach. The client describes a fellow coach who has been "conditioning" youth players by withholding water during practices on hot days as motivation to "play harder." Several children have become ill. One parent pulled their child from the team after the child fainted from dehydration. What is the LCSW's obligation?

A. Encourage the client to report the coaching practice to the soccer league and address the client's concern about speaking up

B. Maintain confidentiality since the coaching practice does not trigger any mandatory reporting exception for therapists

C. Recommend the client provide water to the affected players during practices to mitigate the harm without confronting the other coach

D. File a mandated child abuse report since deliberately withholding water from children during physical exertion in heat — resulting in illness and fainting — constitutes child endangerment, and the LCSW received this information in a professional capacity

40. An LCSW is treating a client who describes her 10-year-old child's experience at a residential summer camp. The child returned from camp with significant weight loss, reporting that meals were inadequate and children who complained about hunger were punished with additional physical exercise. The child stated that counselors took away the care packages parents sent containing food. What should the LCSW consider?

A. Recommend the client contact the camp administration to file a formal complaint about the meal policy

B. Whether children at a camp being underfed, punished for reporting hunger, subjected to punitive exercise for food complaints, and deprived of supplemental food sent by parents constitutes institutional child neglect and potential physical abuse that warrants a mandated report — especially given the documented weight loss

C. Advise the client not to send the child back to the camp next summer and address the child's nutritional recovery

D. Contact the American Camp Association to determine whether the camp is accredited and whether the practices violate accreditation standards

41. An LCSW working at a community health center treats a client who mentions that her 6-year-old nephew has been missing school frequently. When the nephew does attend, he falls asleep in class and appears malnourished. The client visited her sister's home and found it nearly empty of food, with the utilities turned off. The sister has been spending money on gambling. What should the LCSW do?

A. File a mandated child abuse report since the combination of chronic school absence, falling asleep in class, apparent malnourishment, no food in the home, and disconnected utilities — driven by a parent diverting resources to gambling — creates reasonable suspicion of child neglect

B. Encourage the client to provide food and support to her sister's family and address the family dynamics therapeutically

C. Recommend the client contact the school's attendance office to flag the child's absences

D. Advise the client to report her sister to CPS directly since the client has firsthand knowledge of the home conditions

42. An LCSW is providing therapy to a client who describes her 15-year-old daughter's experience at a "troubled teen" wilderness therapy program the family sent her to six months ago. The daughter has returned home and has been describing conditions including sleep deprivation, forced marches through extreme terrain without adequate footwear, food restriction as behavioral punishment, and being denied contact with her parents for weeks at a time. What should the LCSW consider?

A. Accept the descriptions as typical of wilderness therapy programs, which are designed to be challenging and uncomfortable as part of the therapeutic model

B. Recommend the family file a complaint with the program and provide referrals for the daughter's post-program therapeutic needs

C. Whether the described conditions — sleep deprivation, forced marches without adequate gear, food restriction as punishment, and enforced isolation from parents — constitute a pattern of physical and emotional abuse of minors at the program, warranting a mandated child abuse report

D. Address the daughter's distress therapeutically and monitor for PTSD symptoms related to the program experience

43. An LCSW is treating a client who is a school nurse. The client describes a pattern at the school where the principal directs the school nurse to send sick children back to class rather than sending them home, stating "we can't lose the attendance funding." Children with fevers, vomiting, and suspected contagious illnesses are being returned to classrooms. What should the LCSW consider?

- A. Accept the principal's policy since school attendance decisions are administrative matters outside the LCSW's professional responsibility
- B. Encourage the school nurse to document her disagreement with the policy and report through the school district's chain of command
- C. Report the principal to the school district superintendent for creating an unsafe school environment
- D. Whether systematically returning sick children — including those with fevers and suspected contagious illnesses — to classrooms against medical judgment constitutes child endangerment affecting both the sick children and their healthy classmates, potentially warranting a mandated report

44. An LCSW is treating a client whose 11-year-old child participates in competitive dance. The client describes the dance studio's annual recital costume for the child's age group as revealing clothing with sexualized choreography. The client showed the LCSW photos of last year's performance and the LCSW observes children in provocative costumes performing age-inappropriate dance moves. The studio resists parental complaints. What should the LCSW consider?

- A. Accept the costumes and choreography as standard practice in competitive dance since the dance industry has its own cultural norms
- B. Whether adults systematically dressing minors in sexualized costumes and directing them to perform provocative choreography — over parental objections — constitutes a form of sexual exploitation of children that may warrant further assessment and potential reporting
- C. Recommend the client remove the child from the studio and find a more age-appropriate dance program
- D. File a report with the local arts council or dance competition governing body about the age-appropriateness of the costumes and choreography

45. An LCSW is providing school-based therapy to a 7-year-old who states, "My daddy's friend gives me medicine that makes me feel funny and then takes pictures." The child cannot provide additional details. What should the LCSW do?

- A. File a mandated child abuse report immediately, as the child's statement — describing being given an unknown substance and photographed by an adult — constitutes a disclosure creating reasonable suspicion of child drugging and sexual exploitation, and ensure the child's immediate safety
- B. Conduct a forensic interview to gather more specific details about the "medicine" and the "pictures" before determining whether a report is warranted
- C. Ask the child to draw a picture of the experience to clarify the nature of the disclosure before making a reporting determination
- D. Contact the child's parents to discuss what the child may have been referring to before filing a report

46. An LCSW is treating a client who is a teacher at a private school for children with disabilities. The client describes the school's "calming room" — a small, windowless closet where children with behavioral outbursts are placed alone, sometimes for over an hour. The door is locked from the outside. Children have been found urinating on themselves because no one responded to their pleas to use the bathroom. What should the LCSW do?

- A. Recommend the client discuss the room's use with the school's behavioral specialist to explore alternative de-escalation methods
- B. Report the practice to the school's parent board since parents may not be aware of the calming room's conditions
- C. File a mandated child abuse report since locking children with disabilities in a windowless closet for extended periods — resulting in children urinating on themselves — constitutes abusive seclusion and restraint of vulnerable children, and the LCSW has received this information in a professional capacity
- D. Advise the client to resign from the school to avoid complicity in the practice

47. An LCSW is providing therapy to a client who mentions that her 14-year-old son's travel baseball coach has been taking individual players on overnight trips, sharing hotel rooms with them, and communicating with the boys through a private messaging app that the parents cannot access. The coach has asked the boys not to tell their parents about the messaging. What is the LCSW's obligation?

- A. Recommend the client speak with other parents on the team to determine whether they share similar concerns before the LCSW takes action
- B. Encourage the client to request a meeting with the baseball organization's leadership to discuss travel and communication policies

C. Address the client's concern therapeutically and recommend she review the baseball organization's safeguarding policies

D. File a mandated child abuse report since the pattern of an adult coach sharing hotel rooms with individual minors, maintaining secret communication channels with them, and instructing boys to hide the communications from parents constitutes classic grooming behavior warranting immediate reporting

48. An LCSW is treating a client who works at a group home for adults with developmental disabilities. The client describes a practice where staff routinely administer over-the-counter sedatives to difficult residents at bedtime — not prescribed by any physician — to "help everyone get a good night's sleep." What should the LCSW consider?

A. Accept the practice since over-the-counter medications are available without a prescription and the staff are acting in the residents' best interest

B. Whether caretakers systematically administering unprescribed sedating medication to dependent adults without medical authorization constitutes chemical restraint and a form of dependent adult abuse warranting a mandated report

C. Recommend the client discuss the practice with the group home's physician to determine whether the medications should be formally prescribed

D. Address the client's workplace concerns therapeutically and encourage the client to document the practice through the group home's internal reporting system

49. An LCSW is treating a client who describes her elderly aunt's situation. The aunt, age 79, has advanced Parkinson's disease and lives with her adult son. The client visited recently and found the aunt had lost significant weight, had matted hair suggesting she hadn't been bathed in weeks, was wearing soiled clothing, and had several untreated pressure sores. The son stated he was "doing the best he can." What should the LCSW do?

A. File a mandated elder abuse report since the described conditions — significant weight loss, matted hair, soiled clothing, and untreated pressure sores in a person with advanced Parkinson's disease — constitute clear evidence of neglect of a dependent elderly person regardless of the caretaker's stated intentions

B. Recommend the client offer to help her cousin with caregiving tasks and provide referrals for respite care services

C. Encourage the client to report the situation to APS herself since the client observed the conditions firsthand

D. Advise the client to contact the aunt's physician about the weight loss and pressure sores

50. An LCSW treats a client who is an elementary school teacher. The client describes a 6-year-old student who consistently comes to school in the same dirty, ill-fitting clothing, smells of urine, and has visible head lice that the parents refuse to treat despite multiple notifications from the school nurse. The child eats voraciously at school, suggesting inadequate food at home. What should the LCSW do?

A. Encourage the teacher-client to fulfill her own mandated reporting obligation by filing a report with CPS

B. Recommend the school provide the child with clean clothing and additional food without filing a formal report since the school can address the immediate needs

C. Address the client's frustration about the situation therapeutically and support the client in managing workplace stress related to witnessing student neglect

D. File a mandated child abuse report since the pattern of persistent dirty clothing, untreated hygiene conditions including head lice despite school notification, the smell of urine, and possible inadequate nutrition collectively create reasonable suspicion of general neglect — and also inform the client of their own independent reporting obligation as a mandated reporter

51. An LCSW treats a client whose 3-year-old child attends a home daycare. The client arrived unannounced to pick up the child early and found the daycare provider asleep on the couch while six children under age 4 were unsupervised, one in a different room playing near an open staircase. What is the LCSW's obligation?

A. Recommend the client find a new daycare provider and document the safety concern in the session notes

B. Encourage the client to report the incident to Community Care Licensing since this is a daycare regulation violation

C. File a mandated child abuse report since young children left unsupervised by a sleeping caretaker — with one child playing near an open staircase — constitutes child endangerment, and the LCSW received this information in a professional capacity

D. Address the client's concerns about the daycare situation therapeutically and recommend the client discuss the incident with the daycare provider directly

52. An LCSW treats a client who works as a nanny. The client describes the family's 8-year-old being required to complete a 5-mile run every morning at 5:30 AM before school, regardless of weather, illness, or the child's expressed exhaustion. The parents describe this as "building discipline." The child has been limping and complaining of knee pain. What should the LCSW consider?

- A. Accept the family's fitness philosophy since parents have the right to establish exercise routines for their children
- B. Whether requiring a young child to complete a 5-mile run daily at 5:30 AM — regardless of illness, exhaustion, or injury symptoms including limping and knee pain — constitutes physical abuse or excessive punishment that may warrant a mandated child abuse report
- C. Recommend the client discuss the exercise program with the child's pediatrician to determine whether it is age-appropriate
- D. Address the client's concern about the child's wellbeing and support the client in raising the issue with the parents directly

53. An LCSW working at a hospital is providing therapy to a 15-year-old patient who was admitted after a suicide attempt. The patient discloses that the reason for the attempt was that a teacher has been sexually abusing her for the past year. She has never told anyone before. What is the LCSW's obligation?

- A. File a mandated child abuse report immediately based on the disclosure of sexual abuse by a person in a position of authority over the minor, ensure the patient's immediate safety within the hospital setting, coordinate with the hospital's child protection team, and provide trauma-informed clinical support while being careful not to contaminate the disclosure through detailed questioning
- B. Conduct a detailed forensic interview to gather comprehensive information about the abuse before filing a report so the report will be as thorough as possible
- C. Wait until the patient is psychiatrically stabilized before filing a report since the stress of an investigation could worsen the suicidal crisis
- D. Contact the school to inform them about the allegation before filing an official report so the teacher can be removed from the classroom

54. An LCSW treats a client who mentions that her brother-in-law has been posting social media photos showing himself giving his 3-year-old child sips of beer and shots of hard liquor "as a joke." The photos show the child appearing dazed. What should the LCSW do?

- A. Dismiss the concern since small tastes of alcohol given to children as a joke are culturally common and do not constitute abuse
- B. Recommend the client talk to her brother-in-law about the inappropriateness of giving alcohol to a young child
- C. Encourage the client to save screenshots of the social media posts in case they are needed as evidence later
- D. File a mandated child abuse report since providing hard liquor to a 3-year-old — with photographic evidence showing the child appearing dazed — constitutes child endangerment, and the social media documentation provides clear evidence of the conduct

55. An LCSW is providing therapy to a client who reveals that her 12-year-old child has been recruited into an online "challenge" community that encourages progressively dangerous self-harm acts and posts the results to social media. The child has already completed several challenges resulting in burns and cuts, which the child has hidden from the parents until now. What should the LCSW consider?

- A. Address the child's self-harm through individual therapy referral and recommend the parents restrict the child's internet access
- B. Report the online community to the FBI's Internet Crime Complaint Center since the platform is facilitating harm to minors
- C. Whether an online community systematically recruiting minors into escalating self-harm — with documented injuries — may constitute exploitation or endangerment of children, and whether the child's injuries warrant a mandated report for the protection of this child and potentially other recruited minors
- D. Focus therapy on helping the parent develop strategies for monitoring the child's online activity and managing the parent's distress about the situation

56. An LCSW is treating a client who is the mother of a newborn. The client describes an overwhelming fear of dropping the baby and has been placing the baby on the floor rather than holding the infant. As a result, the newborn spends approximately 20 hours per day lying on a blanket on the hard floor without being held or having meaningful human contact. The mother is distressed about this pattern. What should the LCSW consider?

- A. Normalize the mother's anxiety as a common postpartum concern and provide reassurance that her caution is protective
- B. Refer the mother to a psychiatrist for possible postpartum anxiety disorder and monitor the situation

C. Whether a newborn spending 20 hours daily on a floor without being held or experiencing human contact — resulting in significant deprivation of physical contact and stimulation essential for infant development — constitutes a level of neglect that may warrant reporting, while simultaneously treating the mother's postpartum anxiety aggressively and implementing immediate interventions to increase infant holding and contact

D. File an immediate mandated report since any infant spending most of the day on the floor constitutes per se neglect

57. An LCSW working in a school setting observes a 5-year-old student who flinches dramatically whenever an adult makes any sudden movement near the child, cowers when voices are raised, and has been observed hiding under furniture when the classroom becomes loud. The child has not made any verbal disclosures. No physical injuries are visible. Do these behavioral observations alone create reasonable suspicion warranting a mandated report?

A. The constellation of behavioral indicators — extreme startle response to adult movements, cowering when voices are raised, and hiding behavior in response to noise — is consistent with a child who has experienced or is experiencing physical abuse, and this pattern may create reasonable suspicion warranting a mandated report even without a verbal disclosure or visible injuries

B. Behavioral observations alone can never constitute reasonable suspicion and the LCSW must wait for a verbal disclosure or observe physical evidence before filing a report

C. The behaviors are more consistent with a sensory processing disorder than abuse, and the LCSW should recommend an occupational therapy evaluation before considering a report

D. The behaviors are concerning but the LCSW should monitor for several weeks to determine whether the pattern persists before making a reporting determination

58. An LCSW is providing therapy to a client who is a foster parent. The client mentions that the placing agency informed her that the 4-year-old foster child in her care tested positive for methamphetamine at a recent medical screening. The agency has not removed the child and states they are "investigating." It has been two weeks since the positive test. What should the LCSW consider?

A. Trust the foster care agency's investigation process since they are the entity responsible for the child's welfare

B. Recommend the foster parent request a follow-up drug screening to confirm the initial results before any further action

C. Encourage the foster parent to contact the child's attorney (CASA or minor's counsel) to ensure the child's interests are being represented during the investigation

D. Whether a foster child who tested positive for methamphetamine — indicating exposure to the drug — is being adequately protected during the agency's investigation, and whether the LCSW should file an independent mandated report to ensure the situation receives appropriate attention, as the LCSW cannot rely solely on the agency's internal process when a child has demonstrated drug exposure

59. An LCSW is providing therapy to a client who is a teacher's aide at a preschool. The client describes the lead teacher forcing a 3-year-old who refuses to eat lunch to sit at the table for two hours until the food is consumed, while other children go to recess. The child cries throughout. The teacher threatens the child with additional punishment if the food is not eaten. What is the LCSW's obligation?

A. Recommend the client discuss the feeding practice with the preschool director to advocate for a change in policy

B. File a mandated child abuse report since forcing a 3-year-old to remain isolated at a table for two hours under threat of punishment while crying constitutes emotional abuse and inappropriate discipline of a young child, and the LCSW received this information in a professional capacity

C. Provide the client with educational materials about appropriate feeding practices for young children to share with the lead teacher

D. Address the client's distress about the workplace environment therapeutically and support the client in managing the moral injury

60. An LCSW is treating a client who is the grandmother of an 8-year-old. The grandmother describes the child's mother (the grandmother's daughter) bringing a rotating series of male partners into the home, with the child being required to share sleeping quarters with these unfamiliar adults. The grandmother states the child has become anxious and clingy and has begun wetting the bed. What should the LCSW consider?

A. Address the grandmother's concerns about her daughter's parenting and explore the family dynamics therapeutically

B. Whether an 8-year-old being required to share sleeping arrangements with a series of unrelated adult men — combined with the child's new anxiety, clinginess, and bed-wetting — creates reasonable suspicion that the child may be exposed to inappropriate situations or potential abuse warranting a mandated child abuse report

C. Recommend the grandmother offer to have the child stay at her home more frequently to provide a stable environment

D. Advise the grandmother to discuss her concerns directly with her daughter before the LCSW takes any external action

61. An LCSW treats a client who describes bringing her 7-year-old to an unlicensed home tattoo artist to get a "small" tattoo on the child's wrist. The child did not want the tattoo and cried during the procedure. The tattoo was done without sterile equipment. What should the LCSW do?

- A. File a mandated child abuse report since tattooing a 7-year-old against the child's will using unsterile equipment by an unlicensed operator constitutes physical abuse and child endangerment — the procedure involved unnecessary pain inflicted on a protesting child with a risk of infection from unsterile conditions
- B. Provide psychoeducation about the health risks of tattooing and recommend the client not repeat the experience
- C. Recommend the client take the child to a physician to assess the tattoo site for signs of infection
- D. Address the client's motivations for the tattoo therapeutically and explore cultural factors that may have influenced the decision

62. An LCSW treats a client whose 10-year-old child has been participating in family "cold plunges" — being required to submerge in ice water for several minutes daily. The child screams and cries each time but the parents insist it "builds mental toughness." The child has developed symptoms consistent with cold stress including uncontrollable shaking and blue-tinged lips. What should the LCSW consider?

- A. Accept the practice as a wellness trend that parents have the right to implement with their children
- B. Recommend the parents consult with the child's pediatrician about the safety of cold exposure for children before continuing
- C. Whether forcing a protesting child into ice water immersion daily — resulting in symptoms of cold stress including uncontrollable shaking and cyanosis — constitutes physical abuse regardless of the parents' wellness intentions, warranting a mandated child abuse report
- D. Provide psychoeducation about the physiological risks of cold exposure in children and recommend the parents modify the duration

63. An LCSW treats a client who works at a residential facility for elderly dementia patients. The client describes staff members routinely going through patients' personal belongings and taking items of value — jewelry, cash, and family photographs. The facility has dismissed complaints from families as "misplaced items due to dementia." What should the LCSW do?

- A. Encourage the client to document the thefts and report through the facility's internal complaint system
- B. Address the client's moral distress about the workplace environment and recommend the client seek employment elsewhere
- C. Report the information to the facility's ombudsman program since institutional theft complaints are handled through the long-term care ombudsman process
- D. File a mandated elder abuse report since systematic theft from cognitively impaired elderly residents by their caretakers constitutes financial exploitation of dependent adults, and the LCSW received this information in a professional capacity

64. An LCSW is providing therapy to a client who is a nurse at a pediatric hospital. The client describes a coworker who has been secretly photographing patients — including partially clothed children — on a personal phone during medical procedures. The nurse has reported this to the charge nurse, who dismissed it as "probably taking pictures for personal education." What should the LCSW do?

- A. Encourage the client to escalate the report through the hospital's chain of command to a higher administrator
- B. File a mandated child abuse report since an adult surreptitiously photographing partially clothed children during medical procedures on a personal device constitutes potential sexual exploitation of minors — and the institution's failure to take action after being notified does not relieve the LCSW's independent reporting obligation
- C. Recommend the client report the photographing to the hospital's compliance officer since this likely violates HIPAA
- D. Address the client's frustration about the workplace response and provide therapeutic support for the moral injury of witnessing potential exploitation without institutional accountability

65. An LCSW treats a client who describes her 6-year-old daughter's experience at a religious summer camp. The child returned home describing a ritual where camp leaders held the children underwater during "baptism practice" until the children panicked and struggled. Several children, including the client's daughter, were terrified and swallowed water. The client's daughter has since developed a fear of water and has been having nightmares. What should the LCSW do?

- A. File a mandated child abuse report since holding children underwater until they panic and struggle constitutes physical abuse regardless of the religious context, and the LCSW has received information creating reasonable suspicion of harm to multiple children

B. Recommend the client contact the church that sponsors the camp to file a formal complaint about the baptism practice

C. Address the child's water phobia and nightmares therapeutically without external intervention since the camp experience was a religious activity

D. Encourage the client to speak with other parents whose children attended the camp to determine whether their children had similar experiences

66. An LCSW treats a client whose 9-year-old child has been attending a private tutoring center. The client describes the tutor punishing incorrect answers by having the child hold heavy textbooks with outstretched arms for extended periods — a practice known to cause shoulder strain and pain. The child has complained of arm and shoulder pain after tutoring sessions. What should the LCSW consider?

A. Accept the tutoring method as a strict but effective academic discipline technique used in some educational traditions

B. Whether an adult in a position of authority over a child using a physical punishment technique known to cause pain and potential injury — resulting in documented complaints of pain — constitutes physical abuse of a minor warranting a mandated child abuse report

C. Recommend the client discuss the discipline technique with the tutoring center's management and request alternative methods

D. Advise the client to withdraw the child from the tutoring center and find a tutor who uses positive reinforcement methods

67. An LCSW is providing therapy to a client who is a home healthcare worker for elderly patients. The client mentions that a colleague has been systematically billing for hours not worked — arriving late, leaving early, and sometimes not showing up at all — while the elderly patients who depend on the care are left without assistance. Some patients have missed medications and meals as a result. What should the LCSW consider?

A. Maintain confidentiality since billing fraud is a financial crime that does not trigger any reporting exception for therapists

B. Encourage the client to report the billing fraud to the home healthcare agency and address the workplace stress therapeutically

C. Report the billing fraud to the insurance company since the fraud is a financial crime that warrants investigation

D. Whether elderly dependent patients being deprived of scheduled care — missing medications and meals — as a result of a caretaker's fraudulent absence constitutes neglect of dependent adults warranting a mandated elder abuse report, separate from the billing fraud issue

68. An LCSW is treating a client who works at a youth group home. The client describes the facility's practice of punishing teenage residents by removing mattresses from their rooms, forcing them to sleep on bare concrete floors for up to a week. The facility calls this "earning back privileges." What should the LCSW do?

A. Encourage the client to raise the concern through the facility's grievance process and support the client in advocating for the residents

B. File a mandated child abuse report since forcing teenagers to sleep on bare concrete floors for extended periods as punishment constitutes institutional physical abuse and cruel treatment of minors in care, and the LCSW has received this information in a professional capacity

C. Report the facility to the California Department of Social Services Community Care Licensing Division for a licensing violation

D. Recommend the client contact a child advocacy organization to investigate the facility's practices

69. An LCSW treats a client who works at a dog breeding operation. The client mentions that the owner also runs an informal "babysitting service" for neighborhood children in the same building where the dogs are kept. The client describes unsanitary conditions, aggressive dogs in close proximity to children, and children as young as 2 being left in a room with dogs that have bitten people previously. What should the LCSW consider?

A. Whether young children being left in close proximity to dogs with a history of biting — in unsanitary conditions without adequate separation between the breeding operation and childcare — constitutes child endangerment warranting a mandated child abuse report

B. Report the unlicensed babysitting operation to Community Care Licensing since operating a childcare service without a license is a regulatory violation

C. Encourage the client to speak with the owner about separating the childcare area from the dog breeding operation

D. Maintain confidentiality since the information describes a regulatory violation rather than child abuse

70. An LCSW is treating a client whose 5-year-old has been attending a faith-based preschool. The client describes the school's practice of having children kneel and pray for forgiveness whenever they misbehave — sometimes for 45 minutes at a time — while being told they are "sinful" and "bad." The child has begun having nightmares about being punished by God and expressing fear of eternal damnation. What should the LCSW consider?

- A. Respect the school's religious instruction practices since faith-based schools have the right to incorporate religious discipline into their programs
- B. Recommend the client transfer the child to a secular preschool and address the child's spiritual anxiety therapeutically
- C. Whether requiring very young children to kneel for 45 minutes while being told they are sinful — causing nightmares and persistent fear — constitutes emotional abuse regardless of the religious context, as the psychological impact on the child demonstrates harm
- D. Provide the client with information about children's developmental capacity for religious concepts and suggest age-appropriate alternatives to the school's approach

71. An LCSW is providing therapy to a client who is a caregiver at a facility for adults with severe intellectual disabilities. The client describes a coworker who has been recording videos of residents during toileting and personal hygiene activities and sharing the videos in a staff group chat as "comedy." Residents cannot consent and are unaware of the recordings. What should the LCSW do?

- A. Encourage the client to report the videos to the facility administrator and delete the group chat
- B. Advise the client to save screenshots of the group chat as evidence before the videos are deleted
- C. File a mandated dependent adult abuse report since recording and distributing humiliating videos of dependent adults during intimate personal care constitutes exploitation and emotional abuse of vulnerable persons who cannot consent, and the LCSW received this information in a professional capacity
- D. Address the client's distress about the workplace culture and recommend the client report to the facility's compliance officer

72. An LCSW is treating a client who describes her 13-year-old daughter's coach at a gymnastics studio. The coach has been requiring the girls to practice in sports bras and shorts while the coach photographs and videos the girls for what the coach describes as "form analysis." The coach posts selected photos on social media without parental consent. Several parents are uncomfortable but fear their daughters will lose competitive spots if they complain. What should the LCSW do?

- A. File a mandated child abuse report since a coach photographing minimally clothed minors, posting the images on social media without parental consent, and creating an environment where parents fear retaliation for raising concerns constitutes a pattern of behavior consistent with exploitation of minors in a position of power
- B. Recommend the client speak with other concerned parents to form a collective complaint to the gymnastics organization
- C. Encourage the client to request a meeting with the coach to discuss the photography policy and parental consent requirements
- D. Address the client's anxiety about the situation and support the client in making an informed decision about the daughter's continued participation

73. An LCSW treats a client who mentions that her neighbor leaves his 4-year-old child playing alone in the front yard of a house that borders a busy highway with no fence. The client has witnessed the child wander toward the road on multiple occasions and has brought the child back to the yard. The parent, when informed, shrugged and said "kids will be kids." What should the LCSW do?

- A. File a mandated child abuse report since a 4-year-old repeatedly left unsupervised near a busy highway — with documented incidents of the child wandering toward traffic and a parent who dismisses the risk — constitutes general neglect placing the child at substantial risk of serious harm
- B. Recommend the client continue bringing the child back when observed near the road and address the client's anxiety about the neighbor's parenting
- C. Advise the client to contact the police non-emergency line to report the safety concern
- D. Encourage the client to offer to help install a fence as a practical solution

74. An LCSW working in a hospital is treating a 12-year-old patient whose parents practice traditional medicine from their home country. The parents have been applying a burning herbal remedy to the child's back to treat an illness, leaving pattern burns across the child's skin. The child is in pain. What should the LCSW do?

- A. Respect the family's cultural healing practices and avoid imposing Western medical standards on traditional remedies
- B. Document the burns as cultural practices in the medical chart without filing a report since cultural context changes the ethical analysis

C. Provide psychoeducation to the parents about the medical risks of burning practices and recommend alternative treatments

D. File a mandated child abuse report since applying a burning substance to a child's skin — causing visible burns and pain — constitutes physical abuse regardless of cultural intent, as California law does not exempt culturally motivated physical harm from child protection reporting

75. An LCSW treats a client who works at a childcare center. The client describes a coworker who has been taping shut the mouths of toddlers who cry or make noise during nap time. The tape is left on for the duration of the nap period (approximately two hours). The center director is aware and has not intervened. What is the LCSW's obligation?

A. Encourage the client to report the practice through the center's parent complaint process

B. Recommend the client contact Community Care Licensing to report the childcare center's practices

C. File a mandated child abuse report immediately, as taping shut the mouths of toddlers constitutes physical abuse and child endangerment — the practice restricts breathing, causes distress, and poses a suffocation risk to very young children — and the institutional failure to intervene compounds the abuse

D. Address the client's distress about the workplace and recommend the client seek employment at a better-managed childcare facility

## Practice Exam 22: Answer Key and Explanations

1. C — Children being systematically served food held at unsafe temperatures — with multiple children becoming ill — constitutes a potential institutional neglect pattern affecting identifiable minors. The LCSW should assess whether this creates reasonable suspicion of child endangerment warranting a mandated report, particularly since internal reporting to the principal has failed to resolve the hazard. The ongoing illness of children elevates this beyond a routine regulatory complaint.

2. A — Behavioral warning signs — giving away possessions, writing farewell messages — may be more clinically significant than verbal denials of active intent. Adolescents frequently minimize or deny suicidal intent while simultaneously engaging in preparatory behaviors. The discrepancy between passive verbal framing and active behavioral indicators warrants heightened concern and a more intensive safety response than the verbal statement alone would suggest.

3. D — When a client loses insurance coverage, the LCSW must avoid abandonment while also recognizing that indefinite pro bono work may not be sustainable. The ethical response is transparent

discussion of options — sliding scale, reduced frequency, transitional pro bono services, or referral to providers accepting the new insurance. The client must not be left without clinical support during the transition regardless of the payment solution chosen.

4. B — An 18-year-old sending sexually explicit images to a 13-year-old and pressuring her for nude photographs constitutes sexual exploitation of a minor under CANRA. The five-year age gap and the adult's solicitation of explicit images from a child create clear reasonable suspicion of sexual exploitation. A mandated report is required regardless of whether the minor has complied with the requests — the solicitation itself is exploitative.

5. A — Systematic, prolonged physical restraint of dementia patients for up to eight hours daily likely exceeds clinically appropriate use and may constitute abuse or neglect of dependent elderly persons. Federal nursing home regulations and California law restrict the use of physical restraints to situations with specific clinical justification. Routine extended restraint for institutional convenience rather than individual clinical need warrants a mandated elder abuse report.

6. C — Live-streaming a therapy session without the knowledge or consent of the other partner and the LCSW requires immediate intervention. California's two-party consent law prohibits recording confidential communications without all parties' consent. The LCSW should stop the session, address the streaming directly, and discuss the serious legal and confidentiality implications. Waiting until the end of the session allows continued unauthorized broadcast.

7. A — Severe, untreated dental decay in a young child causing pain and likely affecting the child's ability to eat, sleep, and function may constitute medical or dental neglect. While the LCSW is not a dental expert, the observation of obviously decayed teeth with reported pain is sufficient to assess whether reasonable suspicion of neglect exists. Dental neglect is a recognized form of child maltreatment under CANRA.

8. B — An 82-year-old living alone without running water, in an insect-infested home with spoiled food and deteriorating hygiene, presents a textbook self-neglect scenario. The LCSW should file a mandated report to Adult Protective Services. Self-neglect in elderly individuals — particularly when the person insists they are "fine" despite objectively dangerous conditions — is a recognized category of elder abuse reporting in California.

9. B — A cognitively impaired elderly person repeatedly wandering into life-threatening situations — including walking along a highway — while the family dismisses the risk constitutes potential neglect of a dependent adult. The family's failure to implement adequate safety measures despite being informed

creates reasonable suspicion that the patient's needs are not being met. The LCSW should assess whether a mandated elder abuse report is warranted.

10. C — A university data analytics program accessing student therapy records without consent violates therapeutic confidentiality and potentially FERPA protections. Therapy records are among the most sensitive student records and cannot be accessed for administrative purposes without explicit student authorization. The LCSW should object formally, advocate for immediate cessation, and ensure students are informed about how their confidential records have been compromised.

11. D — A child returning from a treatment facility with bruises and exhibiting significant distress before attending creates reasonable suspicion that the child may be experiencing abuse at the facility. The LCSW should file a mandated report and recommend suspending the child's attendance pending investigation. ABA therapy that results in bruises from physical prompting and extreme resistance may constitute harmful treatment warranting protective intervention.

12. B — A 3-year-old repeatedly found unsupervised in dangerous locations — near traffic, blocks from home — constitutes a pattern of inadequate supervision creating reasonable suspicion of general neglect. Regardless of the caretaker's stated efforts, the repeated outcome of a very young child in life-threatening situations demonstrates that supervision is insufficient. The LCSW should file a mandated report based on the pattern.

13. A — Systematic understaffing that results in dependent elderly residents being left without supervision — with call lights unanswered for hours and residents experiencing unassisted falls — constitutes institutional neglect. The LCSW received this information in a professional capacity, triggering a mandated reporting obligation. The facility's staffing decisions are creating conditions that endanger vulnerable dependent adults.

14. C — An instructor requiring children to spar full-contact without protective equipment — resulting in repeated concussions, broken bones, and other significant injuries while dismissing parental concerns — is subjecting children to physical harm. Concussions in children are particularly dangerous due to developing brains. The pattern of injuries and the instructor's dismissive response to safety concerns create reasonable suspicion of child abuse.

15. D — Bruising on inner thighs combined with a statement about a caretaker "doing things when nobody's watching" constitutes immediate reasonable suspicion of sexual abuse of a dependent elder. This requires an immediate mandated report — not further exploration, assessment of alternative

explanations, or follow-up at the next session. The combination of physical evidence and verbal disclosure is sufficient. Delay could expose the client to continued abuse.

16. B — The LCSW directly observed video evidence of a minor being physically assaulted. This constitutes firsthand professional observation creating reasonable suspicion of child abuse. The LCSW should file a mandated report while also addressing group dynamics around witnessing violence and bystander behavior. The school's disciplinary jurisdiction does not eliminate the LCSW's independent reporting obligation.

17. A — While graduated sleep training is within the range of normal parenting, allowing a 3-month-old to cry to the point of vomiting for hours without any response exceeds evidence-based parameters. Most sleep training protocols recommend starting no earlier than 4-6 months and include check-in intervals. A 3-month-old infant vomiting from prolonged crying without caregiver response warrants careful assessment of whether the threshold for neglect has been reached.

18. C — Sexualized behavior with an animal in a child with a known history of sexual abuse is a significant clinical red flag. This may indicate ongoing abuse, insufficiently treated prior trauma, or exposure to new sexualized content. The LCSW should assess whether the behavior suggests re-abuse — particularly in the foster care context where new perpetrator access is possible — and determine whether a mandated report is warranted.

19. D — A young child left in a vehicle in July heat while a parent is at a casino constitutes an immediate life-threatening emergency. Children can die from vehicular heatstroke in minutes during summer temperatures. The LCSW should interrupt the session immediately to address the child's safety. This situation likely warrants a mandated child abuse report for child endangerment regardless of the session's therapeutic content.

20. B — Spraying young children in the face with water as punishment is a humiliating, physically aversive discipline technique. When complaints have been raised and the institution has failed to intervene, the practice has been sanctioned at the institutional level. The LCSW received this information in a professional capacity and should file a mandated report. The preschool context — involving very young children and an institutional power dynamic — amplifies the concern.

21. A — The 14-year-old's statement that the father "hits my little sister" is a sibling witness disclosure creating reasonable suspicion of physical abuse of the 5-year-old. The LCSW should attend to immediate room dynamics — protecting the disclosing teen, noting the father's defensiveness and

mother's avoidance — and file a mandated report. Investigation determines whether the hitting constitutes abuse; the LCSW's role is to report the reasonable suspicion.

22. C — California does not specify a minimum age for children to be left alone, but two weeks without parental presence for a 13-year-old and 15-year-old raises legitimate concerns about supervision adequacy, emergency access, and whether the prolonged absence constitutes neglect. The LCSW should assess the totality of circumstances — including whether the teenagers have adult emergency contacts, adequate resources, and whether the pattern reflects parental responsibility.

23. D — Children ages 7-14 receiving no education whatsoever — with a 14-year-old who cannot read — while being used for household labor constitutes educational neglect. While homeschooling parents have latitude in curriculum, the complete absence of instruction resulting in a teenager's functional illiteracy demonstrates a failure to provide the most basic educational foundation. This rises to the level of neglect warranting a mandated report.

24. B — Children experiencing dangerous respiratory depression from physician-prescribed excessive sedation — after internal reporting has failed — creates reasonable suspicion that children are being medically harmed. The LCSW should assess whether a mandated child abuse report is warranted for medical maltreatment. The institution's failure to respond to nursing staff concerns makes the LCSW's independent reporting pathway critical.

25. A — A young child's complaint that a grandfather's physical contact "hurts," combined with avoidance of the adult, warrants careful assessment rather than acceptance of the minimizing explanation. The LCSW should explore the child's complaint with the parents and assess whether reasonable suspicion of abuse exists. Accepting dismissive explanations without adequate assessment fails the protective purpose of mandated reporting.

26. C — Routine strip searches of minors without individualized justification — applied as a blanket policy rather than in response to specific safety concerns — may violate residents' rights and constitute institutional abuse. The LCSW should challenge the practice, advocate for alternatives, and consider reporting obligations. Residential treatment does not strip minors of all dignity and privacy protections.

27. D — Forcing children to exercise in extreme heat to the point of collapse and hospitalization constitutes physical abuse and child endangerment. The "building resilience" rationale does not mitigate the physical danger. The LCSW received this information in a professional capacity and must file a mandated report. A child's hospitalization from heat-related collapse demonstrates that serious harm has already occurred.

28. B — An elderly person with documented cognitive impairment in judgment being rapidly married by a significantly younger person who immediately obtained power of attorney raises strong suspicion of financial exploitation. The pattern — cognitive impairment, rapid marriage, immediate POA transfer — is a recognized exploitation pattern. The LCSW should file a mandated elder abuse report.

29. A — An adult in a position of authority photographing children in vulnerable moments and publicly sharing images with mocking captions engages in a pattern of deliberate humiliation. This exploitation of the teacher-student power differential — using children's distress as entertainment — may constitute emotional abuse warranting a mandated report, particularly given the public nature of the humiliation.

30. C — Requiring a child to kneel on dried rice — causing visible physical effects including callusing — constitutes physical abuse regardless of the religious motivation. California law does not exempt physically harmful discipline from child protection reporting based on religious belief. The First Amendment protects religious belief but does not protect practices that cause physical harm to children.

31. D — Isolating individual children behind locked doors with explicit secrecy instructions constitutes a textbook grooming pattern. The combination of isolation, locked doors, and enforced secrecy creates reasonable suspicion of child abuse — grooming behavior itself may be reportable without requiring a specific child disclosure. The behavioral pattern alone warrants a mandated report.

32. B — A 14-year-old babysitting a 2-year-old — including diaper changes and bathing — is not inherently abusive. The client's discomfort alone does not create reasonable suspicion. The LCSW should explore whether specific indicators of risk exist rather than filing a report based solely on the arrangement. Not every uncomfortable childcare situation constitutes reportable neglect or abuse.

33. D — A coach's systematic pattern of public weigh-ins, body shaming, and telling a healthy-weight child she is "too fat" — which has demonstrably contributed to food restriction and body hatred — may constitute emotional abuse of minors. The documented psychological harm elevates this beyond a coaching style concern. The LCSW should assess whether reasonable suspicion warrants a mandated report.

34. D — An adult showing sexually explicit content to children and providing them with alcohol constitutes child abuse on multiple grounds. The behavioral regression and nightmares demonstrate impact. The LCSW received this information in a professional capacity, triggering a mandated reporting obligation. Both the sexual content exposure and the alcohol provision independently warrant reporting.

35. C — This scenario requires assessment of the totality of circumstances rather than reflexive reporting or dismissal. Very young children walking through dangerous traffic is concerning, but the mother's genuine lack of resources is relevant context. The LCSW should assess whether the specific risk constitutes neglect while actively helping identify alternatives. Problem-solving serves the children better than punitive reporting alone.

36. B — Leaving 10 children ages 1-4 supervised only by a 12-year-old for extended periods constitutes grossly inadequate supervision creating substantial risk of harm. The daycare licensing context amplifies the concern — parents entrust children expecting adult supervision. The LCSW must file a mandated report based on information received in a professional capacity.

37. A — Repeated findings of a dependent elderly resident sitting in urine, with an untreated bedsore, and no staff supervision constitute clear evidence of ongoing neglect. The pattern across multiple visits demonstrates systemic failure. The LCSW received this information in a professional capacity and must file a mandated elder abuse report without further delay.

38. C — A 4-year-old describing being touched on private parts by a nighttime visitor — regardless of the "imaginary friend" framing — uses developmentally limited language that may describe actual abuse. Young children often incorporate real experiences into fantasy narratives. This disclosure creates reasonable suspicion warranting a mandated report rather than dismissal as fantasy.

39. D — Deliberately withholding water from children during physical exertion in heat — resulting in illness and fainting — constitutes child endangerment. Dehydration during exercise in heat can be fatal. The LCSW received this information in a professional capacity and must file a mandated report. The coaching context does not exempt adults from responsibility for children's basic physiological needs.

40. B — Children being underfed, punished for hunger complaints, subjected to punitive exercise, and deprived of supplemental food — resulting in documented weight loss — constitutes institutional child neglect and potentially physical abuse. The systematic pattern suggests institutional policy rather than individual error. The LCSW should file a mandated report.

41. A — The combination of chronic school absence, sleeping in class, apparent malnourishment, empty home, disconnected utilities, and parental gambling creates a comprehensive picture of child neglect. Each indicator alone might warrant monitoring; together they create clear reasonable suspicion. The LCSW must file a mandated child abuse report.

42. C — Sleep deprivation, forced marches without adequate gear, food restriction as punishment, and enforced isolation from parents collectively constitute a pattern of physical and emotional abuse. The "therapeutic" framing does not exempt these practices from child protection analysis. The LCSW should assess whether a mandated report is warranted for abusive conditions at the program.

43. D — Systematically returning sick children — including those with fevers and contagious illnesses — to classrooms against medical judgment endangers both the sick children and their classmates. The school nurse's professional judgment is being overridden for financial reasons. The LCSW should assess whether this institutional practice constitutes child endangerment warranting a mandated report.

44. B — Adults systematically dressing minors in sexualized costumes and directing provocative choreography — over parental objections — warrants assessment as potential exploitation. The power dynamic between instructors and young performers, combined with the sexual nature of the presentations, creates a pattern that should be evaluated for possible reporting.

45. A — A 7-year-old stating that an adult gives them "medicine" and "takes pictures" constitutes a clear disclosure creating reasonable suspicion of child drugging and sexual exploitation. This requires an immediate mandated report — not further questioning or parental consultation. The child's safety is the immediate priority, and detailed investigation is CPS and law enforcement's responsibility.

46. C — Locking children with disabilities in a windowless closet for extended periods — resulting in children urinating on themselves — constitutes abusive seclusion. The director's awareness without intervention makes this institutional abuse. The LCSW must file a mandated report for abuse of vulnerable children in care.

47. D — An adult coach sharing hotel rooms with individual minors, maintaining secret communication channels, and instructing boys to hide communications from parents constitutes a textbook grooming pattern. The combination of overnight isolation, private messaging, and enforced secrecy creates clear reasonable suspicion of child sexual exploitation warranting immediate reporting.

48. B — Caretakers systematically administering unprescribed sedating medication to dependent adults constitutes chemical restraint without medical authorization — a form of dependent adult abuse. No physician has prescribed the medication. The LCSW should file a mandated dependent adult abuse report based on information received in a professional capacity.

49. A — Significant weight loss, matted hair, soiled clothing, and untreated pressure sores in a person with advanced Parkinson's disease constitute clear evidence of caretaker neglect regardless of the caretaker's stated intentions. The LCSW received this information in a professional capacity and must file a mandated elder abuse report.

50. D — Persistent dirty clothing, untreated head lice, urine odor, and signs of inadequate nutrition collectively create reasonable suspicion of general neglect. The LCSW should file a mandated report AND inform the teacher-client of their own independent mandatory reporting obligation. Both professionals must report independently.

51. C — Young children left unsupervised by a sleeping caretaker — with one child near an open staircase — constitutes immediate child endangerment. The LCSW received this information in a professional capacity and must file a mandated report. The daycare setting amplifies the concern since parents entrust children's safety to the provider.

52. B — Forcing a young child to complete a 5-mile run daily regardless of illness or injury — resulting in limping and knee pain — constitutes excessive physical demands causing harm. The parents' "discipline" framing does not protect a practice that produces documented injury symptoms. The LCSW should assess whether this warrants a mandated child abuse report.

53. A — A hospitalized adolescent disclosing sexual abuse by a teacher requires an immediate mandated report, coordination with the hospital's child protection team, and trauma-informed clinical support. The LCSW should not conduct a forensic interview (that's the investigator's role), delay for psychiatric stabilization, or notify the school before the official report.

54. D — Providing hard liquor to a 3-year-old — with photographic evidence showing the child appearing dazed — constitutes child endangerment. Alcohol poses serious physiological risks to young children. The social media documentation provides corroborating evidence. The LCSW must file a mandated child abuse report.

55. C — An online community systematically recruiting minors into escalating self-harm constitutes exploitation and endangerment. The documented injuries demonstrate that harm has already occurred. The LCSW should assess whether the child's injuries and the ongoing exploitation warrant a mandated report while addressing immediate clinical needs.

56. C — A newborn spending 20 hours daily without human contact represents significant deprivation essential for infant development. The LCSW must assess whether this level of deprivation constitutes neglect warranting reporting while simultaneously treating the mother's postpartum anxiety aggressively and implementing immediate interventions to increase infant contact. Both tracks must proceed simultaneously.

57. A — Behavioral indicators — extreme startle response, cowering, hiding — can constitute reasonable suspicion even without verbal disclosure or visible injuries. These behaviors are recognized clinical indicators consistent with physical abuse exposure. Mandated reporting does not require verbal disclosure or physical evidence — reasonable suspicion based on professional behavioral observation is sufficient.

58. D — A foster child testing positive for methamphetamine demonstrates documented drug exposure. The LCSW cannot rely solely on the agency's internal process — two weeks without resolution when a child has confirmed drug exposure is concerning. Filing an independent mandated report ensures appropriate attention through the formal child protection system.

59. B — Forcing a 3-year-old to remain at a table for two hours under threat while crying constitutes emotional abuse and inappropriate discipline. The duration, the child's age, the emotional distress, and the punitive context collectively create reasonable suspicion. The LCSW must file a mandated report based on information received in a professional capacity.

60. B — An 8-year-old required to share sleeping arrangements with a series of unrelated adult men — combined with new anxiety, clinginess, and bed-wetting — creates reasonable suspicion of exposure to inappropriate situations or potential abuse. The behavioral changes are consistent with distress. The LCSW should file a mandated report.

61. A — Tattooing a 7-year-old against the child's will using unsterile equipment constitutes physical abuse and child endangerment. The procedure inflicted unnecessary pain on a protesting child with infection risk from unsterile conditions. The child's crying demonstrates absence of assent. The LCSW must file a mandated report.

62. C — Forcing a protesting child into ice water daily — resulting in uncontrollable shaking and cyanosis — constitutes physical abuse. Cyanosis indicates physiological distress that can precede hypothermia and cardiac complications. The parents' wellness intentions do not mitigate documented physical harm. The LCSW should file a mandated child abuse report.

63. D — Systematic theft from cognitively impaired elderly residents by caretakers constitutes financial exploitation of dependent adults. The residents' dementia prevents them from protecting their belongings or reporting. The facility's dismissal as "dementia-related misplacement" demonstrates institutional complicity. The LCSW must file a mandated elder abuse report.

64. B — Surreptitiously photographing partially clothed children during medical procedures on a personal device constitutes potential sexual exploitation of minors. The institution's failure to act after notification does not relieve the LCSW's independent reporting obligation. The LCSW must file a mandated child abuse report.

65. A — Holding children underwater until they panic and struggle constitutes physical abuse regardless of religious context. The children's terror, water ingestion, and subsequent psychological harm demonstrate that harm occurred. California law does not exempt religiously motivated practices from child protection reporting when physical harm results.

66. B — An adult using a physical punishment technique that causes documented pain in a child constitutes physical abuse. The position of authority, punitive intent, and documented pain create reasonable suspicion. The LCSW should file a mandated report.

67. D — While billing fraud alone is a financial crime outside mandatory reporting, the consequence — dependent elderly patients missing medications and meals — constitutes neglect of dependent adults. The patients' welfare is the reporting trigger, separate from the financial fraud.

68. B — Forcing teenagers to sleep on bare concrete floors for extended periods as punishment constitutes institutional physical abuse and cruel treatment of minors in care. The LCSW must file a mandated child abuse report based on information received in a professional capacity.

69. A — Young children in close proximity to dogs with biting history in unsanitary conditions constitutes child endangerment. A 2-year-old cannot protect themselves from aggressive dogs. The LCSW should file a mandated report based on the foreseeable risk of serious harm.

70. C — Requiring very young children to kneel for 45 minutes while being told they are sinful — resulting in nightmares and fear of damnation — constitutes emotional abuse. The documented psychological harm demonstrates that the practice has exceeded protected religious instruction. The religious context does not exempt harmful practices from reporting.

71. C — Recording and distributing humiliating videos of dependent adults during intimate care constitutes exploitation and emotional abuse. The residents' severe disabilities prevent consent or awareness. The LCSW must file a mandated dependent adult abuse report.

72. A — A coach photographing minimally clothed minors, posting images without consent, and creating a coercive environment where parents fear retaliation constitutes a pattern consistent with exploitation of minors. The LCSW should file a mandated report.

73. A — A 4-year-old repeatedly left unsupervised near a busy highway — with documented wandering toward traffic and a parent who dismisses the danger — constitutes general neglect placing the child at substantial risk of death. The LCSW must file a mandated report.

74. D — Applying a burning substance to a child's skin — causing visible burns and pain — constitutes physical abuse regardless of cultural intent. California law does not exempt culturally motivated physical harm from child protection reporting.

75. C — Taping shut toddlers' mouths constitutes physical abuse and child endangerment — restricting breathing, posing suffocation risk, and causing distress to children too young to remove the tape. The director's awareness makes this institutional abuse. The LCSW must file an immediate mandated report.