SUMMIT
STUDY GUIDES

NCE

Diagnostic Assessment

Week 3 Checkpoint

Answer Key & Weakness Map

Scored by the six NCE content domains • Original practice questions

Find your weak spots, then study the chapters that matter most

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How to Use This Material

Take this assessment in one sitting with a 45-minute timer, choosing the single BEST answer for each question. Then score it with the separate answer key and fill in the Weakness Map at the end of the key: count your correct answers in each NCE domain, and study the domains marked Focus first or Review before the others. The interactive version on the Diagnostic page of the NCE bonus site scores your Weakness Map automatically.

NCE Week 3 Checkpoint: Answer Key

The best answer for each question, with explanations. Your paper Weakness Map is on the last page.

1. A Release the raw data only to a professional the counselor recognizes as qualified

ACA Code of Ethics E.4 states that identifiable assessment data are released only with the client's consent and only to persons recognized by the counselor as qualified to interpret the data. Releasing directly to the attorney is tempting because consent is in place, but consent alone does not satisfy the qualified-recipient requirement; a refusal under all circumstances is too absolute.

2. A SMART Recovery

SMART Recovery is a secular mutual-help program that draws on cognitive-behavioral and REBT principles and does not use a higher power concept. Narcotics Anonymous follows the same 12-step spiritual framework as AA, and Celebrate Recovery is an explicitly Christian 12-step-based program. Al-Anon serves family members and friends of people with drinking problems rather than the person in recovery.

3. B It's painful to watch him give your son what you wanted from him, and part of you may still be hoping for it.

Additive empathy accurately goes slightly beyond what the client said, identifying implied feelings or meanings in a tentative way. Restating the facts about the games is interchangeable, or basic, empathy; it is accurate but adds nothing. Generalizing about grandparents is subtractive because it shifts attention away from Marcus's experience.

4. A Explore her reaction in supervision or consultation to separate her history from Tom's behavior

Countertransference rooted in the counselor's own history is addressed first through self-examination and supervision or consultation, consistent with the ACA Code of Ethics duty to monitor one's effectiveness (C.2.d). Immediacy may become useful later, but using it before Mia sorts out her own reaction risks acting out the countertransference rather than responding to Tom. Referral is premature because the reaction is manageable and Tom is progressing.

5. D Subjective scoring yields weaker reliability and validity evidence

Projective techniques have historically been criticized for subjective, inconsistent scoring and limited norms, producing modest interrater reliability and validity evidence; standardized systems such as Exner's Comprehensive System and R-PAS for the Rorschach were developed to address this. Transparency is actually a weakness of face-valid self-report inventories, since projective stimuli disguise their purpose.

6. B Assessment, planning, linking, monitoring, and advocacy

Case management is commonly defined by assessing needs, planning services, linking clients to resources, monitoring service delivery, and advocating for the client. The intake-to-discharge sequence describes a general course of treatment, and the testing sequence describes psychological assessment, not the coordinating role of case management.

7. C Quota sampling

Quota sampling fills preset numbers for subgroups using nonrandom, convenient selection, as when interviewing passersby until gender targets are met. It resembles stratified random sampling, but stratified sampling requires random selection from each subgroup, which is absent here.

8. B Disenfranchised grief

Doka coined disenfranchised grief to describe grief that is not openly acknowledged, socially sanctioned, or publicly mourned, which often happens after perinatal loss. Ambiguous loss, Boss's concept, refers to uncertainty about whether a person is truly gone, which does not apply because Mei's loss is clear.

9. C Seek the guardian's permission and inform Carla at her level

ACA Code of Ethics B.5.c directs counselors working with clients who cannot give voluntary informed consent to seek permission from an appropriate third party and to inform clients in a way that matches their level of understanding. Getting the guardian's permission while leaving Carla out ignores her right to be informed and involved.

10. A Avoidant personality disorder

Avoidant personality disorder is characterized by social inhibition, feelings of inadequacy, and hypersensitivity to negative evaluation, with a desire for relationships that is blocked by fear of rejection (DSM-5-TR). Schizoid personality disorder is tempting because both involve isolation, but schizoid individuals neither desire nor enjoy close relationships. Dependent personality disorder centers on an excessive need to be taken care of.

11. D All three social-communication deficits and two of four restricted, repetitive behaviors

DSM-5-TR requires persistent deficits in all three areas of social communication and interaction (social-emotional reciprocity, nonverbal communication, and developing and maintaining relationships), plus at least two of four restricted, repetitive patterns of behavior, interests, or activities. DSM-5-TR clarified that all three Criterion A deficits are required. Requiring only one repetitive-behavior symptom is a common error and understates the threshold.

12. B Patients may sign a single consent covering all future uses and disclosures for treatment, payment, and health care operations

The 2024 Part 2 final rule allows a single patient consent for all future uses and disclosures for treatment, payment, and health care operations, after which HIPAA-regulated recipients may redisclose as HIPAA permits. The rule kept and strengthened protections against using records in legal proceedings against the patient without consent or a court order.

13. B Arrange the voluntary admission, which can satisfy the duty to protect

Many duty-to-protect statutes list hospitalization, voluntary or involuntary, as a way to discharge the duty. When the client agrees to admission, the least restrictive effective option is preferred, so involuntary commitment is unnecessary. Sending Tobias home, with or without a warning, leaves a client with a plan and means unsupervised.

14. D interrupting the attempted solution that keeps the problem going

The MRI model holds that problems are maintained by people's attempted solutions, often "more of the same," so the counselor targets and interrupts that cycle. Exploring origins in the family of origin is Bowenian and historical, which MRI brief therapy deliberately avoids.

15. A A well-founded fear of persecution on a protected ground

Under the 1951 Refugee Convention and U.S. law, a refugee is a person outside their country who cannot or will not return because of a well-founded fear of persecution based on race, religion, nationality, political opinion, or membership in a particular social group. Voluntary economic migration and family sponsorship describe other immigration pathways. Unauthorized entry describes immigration status, not refugee status; in the U.S., refugee status is granted before arrival, while asylum is sought from within the country or at the border.

16. A The therapeutic alliance is one of the most robust predictors of outcome across treatment approaches

Meta-analyses (e.g., Wampold; Norcross & Lambert) consistently find the therapeutic alliance to be one of the strongest and most robust predictors of outcome across approaches, whereas differences among bona fide treatments are usually small. Rigid adherence that ignores alliance ruptures can harm outcomes, and years of experience predict outcome only weakly.

17. A GAD can be diagnosed because children need only one associated symptom

DSM-5-TR GAD requires excessive, hard-to-control worry on more days than not for at least 6 months, with three of six associated symptoms for adults but only one for children. Ava's sleep disturbance meets that threshold. The 12-month duration requirement belongs to some other disorders, not GAD.

18. B open and closed questions, encouraging, paraphrasing, reflecting feelings, and summarizing

The BLS is the core set of listening skills used to draw out the client's story: questions, encouragers, paraphrasing, reflection of feeling, and summarizing. Empathy, genuineness, and unconditional positive regard are Rogers's core conditions, not the BLS, and interpretation and self-disclosure are influencing skills.

19. B Making trauma questions optional and asking them within an established relationship

SAMHSA's trauma-informed approach emphasizes resisting retraumatization and promoting safety, choice, and collaboration, so trauma screening should be voluntary, paced, and conducted within a relationship. Requiring an unprompted detailed account, whether in writing or aloud at a front desk, undermines safety and control.

20. C Obtain relevant education and supervised experience before or while taking such cases

ACA Code of Ethics C.2.b states that counselors practice in specialty areas new to them only after appropriate education, training, and supervised experience, taking steps to protect clients while developing skills. Self-study alone does not meet that standard, and general skills do not substitute for population-specific competence. Refusing all transgender clients is not required and may conflict with the Code's nondiscrimination standard (C.5).

21. B Reorientation, turning insight into new behavior

Adlerian counseling moves from relationship to assessment, then to insight (interpretation), then to reorientation, where insight is turned into action through encouragement and tasks. Working through a transference neurosis belongs to psychoanalysis, not to the Adlerian sequence.

22. D Curiosity, persistence, flexibility, optimism, and risk taking

Planned happenstance theory names curiosity, persistence, flexibility, optimism, and risk taking as the skills that let people turn unplanned events into opportunities. Concern, control, curiosity, and confidence are Savickas's dimensions of career adaptability, which makes that set tempting because curiosity appears in both. Planfulness, congruence, and specification belong to developmental and trait-factor frameworks rather than to planned happenstance.

23. A Counselors are prohibited from personal virtual relationships with current clients

ACA Code of Ethics A.5.e prohibits counselors from engaging in personal virtual relationships with current clients, such as through social media. Privacy settings, documentation, or a discussion of risks do not create an exception. Counselors should instead address the request with the client and refer to their social media policy, since H.6.b calls for explaining the benefits, limitations, and boundaries of social media as part of informed consent.

24. C Conduct a suicide risk assessment and develop a safety plan with Leah

Disclosure of suicidal ideation with access to means requires immediate risk assessment and safety planning, whatever the counselor's theoretical orientation (ACA Code of Ethics B.2.a covers disclosure when there is serious and foreseeable harm). Solution-focused coping and scaling questions can support that assessment, but they do not replace it. The miracle question would sidestep an urgent safety concern.

25. B Confirmation of attendance only, as specified in Felix's release

Disclosures must stay within the scope of the client's written consent and be limited to essential information (ACA Code of Ethics B.2.e and B.6.g). Who referred him or who pays for the EAP does not widen the release. Saying nothing at all is too absolute, because Felix did authorize confirmation of attendance.

26. D History

History refers to external events occurring during the study, such as layoffs, that could affect the outcome independently of the intervention. Maturation refers to changes within participants due to the passage of time, such as growth or fatigue, rather than to an outside event.

27. D identify and challenge this belief that only one career could satisfy him

Krumboltz's social learning theory holds that unhelpful career beliefs, such as the idea that only one right career exists, can block decision making; the counselor identifies and challenges such beliefs (the Career Beliefs Inventory was built for this). Searching for the single best-matching occupation would reinforce the very belief that is keeping him stuck. Exploring early parent-child relationships reflects Roe's theory, not Krumboltz's.

28. D Disillusionment phase

In the SAMHSA (Zunin and Myers) model, the disillusionment phase follows the honeymoon phase; optimism gives way to anger, resentment, and exhaustion as outside help withdraws and bureaucratic delays mount. It can last months to years, which makes it a key time for counselor outreach. The honeymoon phase is marked by community bonding and optimism, the opposite of what the stem describes.

29. A Seek supervision or consultation to address her reactions and assess her ability to continue

The ACA Code of Ethics (C.2.g) requires counselors to watch for signs of impairment and seek help for problems that may affect their work. Supervision helps manage the countertransference and decide whether a referral is needed. Abrupt termination without explanation risks client abandonment, and extensive self-disclosure puts the counselor's needs ahead of the client's.

30. D Have her stop imagining the scene and restore deep relaxation before re-presenting it

Systematic desensitization rests on reciprocal inhibition: anxiety-provoking images are paired only with a relaxed state, so when anxiety rises the scene is stopped, relaxation is restored, and the item is presented again (adding an intermediate item if needed). Staying with the scene until anxiety drops reflects flooding or prolonged exposure logic, not Wolpe's graduated counterconditioning.

31. C detouring

Minuchin identified three rigid triads: triangulation (each parent pulls the child to side with them), stable coalition (one parent and the child unite against the other parent), and detouring (the parents avoid their own conflict by uniting around a child's problem). Because the parents unite here rather than compete for the child, detouring fits and triangulation does not.

32. C "What will you notice about yourself when college starts going better?"

Solution-focused counselors use language that presupposes change ("when" rather than "if"), conveying confidence that improvement will happen. The "if things ever get better" wording is tempting because it is future-oriented, but it implies doubt. Asking why things are difficult or how long the struggle has lasted keeps the focus on the problem.

33. A Collaboratively developing a written safety plan with follow-up contact

The Safety Planning Intervention (Stanley & Brown), especially with structured follow-up calls, has been associated with reduced suicidal behavior and greater treatment engagement after ED discharge. No-suicide contracts lack evidence and may give false reassurance, and a referral list without follow-up leaves many clients unconnected to care.

34. C Obtain parental consent and keep the group small with shorter sessions

Group work with minors calls for involving parents or guardians: ASCA standards call for informing them of a student's small-group participation, and Corey and many school districts recommend or require written parental permission. Groups for younger children work best with fewer members and shorter sessions suited to attention span, so long sessions and wide age ranges are poorly matched to fifth graders' needs.

35. C Exaggeration

In the exaggeration exercise, the client deliberately intensifies a movement or gesture to heighten awareness of the feelings it expresses. Reversal asks the client to act opposite to a usual pattern, such as an inhibited person playing an exhibitionist, which is not what the counselor requested.

36. D Report the suspected abuse to child protective services as required by law

Counselors are mandated reporters in all U.S. states, and reasonable suspicion of child abuse must be reported promptly to child protective services; ACA Code of Ethics B.2.a recognizes this exception to confidentiality. Counselors should not conduct forensic interviews or seek confirmation before reporting, and informing the stepfather's partner first could compromise Zoe's safety.

37. B It falls, so observed scores track true scores more closely

SEM = SD × √(1 − r), so higher reliability shrinks the SEM. When reliability reaches 1.0, SEM equals zero and observed scores equal true scores. SEM depends on both the SD and the reliability coefficient, not on the SD alone.

38. C The client perceiving, at least minimally, the counselor's empathy

Rogers' sixth condition requires that the client perceive, at least to a minimal degree, the counselor's empathic understanding and unconditional positive regard. Dana may feel empathic, but empathy that is not communicated and received does not meet the condition. Congruence concerns the counselor's inner-outer consistency, which Rae's complaint does not address.

39. C Document what is clinically necessary, leaving out nonessential personal details

In a shared record, counselors document what is needed for care, such as relationship stress affecting mood, without including sensitive details that other providers do not need, consistent with the minimal disclosure principle in ACA Code B.2.e. Skipping documentation entirely protects privacy but violates the obligation to keep records of services provided.

40. D Savickas's career construction interview

The career construction interview (Savickas) uses questions about role models, favorite magazines or shows, a favorite story, a favorite saying, and early recollections to uncover the client's life themes. The SDS is a structured RIASEC inventory, the Career Beliefs Inventory measures beliefs that may block career progress, and the Career Development Inventory measures career readiness; none of these uses narrative questions.

Your Weakness Map

Circle each question you missed, then count your correct answers per domain. Under 60% = **Focus first**; 60–79% = **Review**; 80% or more = **Maintain**.

NCE domain	Questions	Correct	Study if below 80%
Professional Practice & Ethics	9, 12, 13, 23, 25	____ of 5	Chapter 3: Counseling Orientation and Ethics Chapter 10.3.3: Documentation, Referral, Coordination, and Termination
Intake, Assessment & Diagnosis	1, 5, 10, 11, 37	____ of 5	Chapter 10.1: Diagnosis with the DSM-5-TR Chapter 9: Assessment and Testing Chapter 10.2.1: Suicide Risk Assessment and Safety Planning
Areas of Clinical Focus	2, 8, 14, 15, 17, 22, 27, 28, 29, 31, 40	____ of 11	Chapter 10.2: Crisis, Risk, and Substance Use Chapter 5: Human Growth and Development Chapter 4: Social and Cultural Diversity Chapter 6: Career Development
Treatment Planning	6, 16, 33, 39	____ of 4	Chapter 10.3: Treatment Planning and Continuity of Care Chapter 9.2.3: Assessment in Treatment Planning
Counseling Skills & Interventions	3, 7, 18, 19, 21, 24, 26, 30, 32, 34, 35, 36	____ of 12	Chapter 7: Counseling and Helping Relationships Chapter 8: Group Counseling and Work Chapter 11: Research and Program Evaluation
Core Counseling Attributes	4, 20, 38	____ of 3	Chapter 7.2.1: Empathy, Active Listening, Reflective Practices Chapter 4.2.2: Managing Personal Bias and Microaggressions Chapter 3.3.3: Counselor Self-Care and Professional Development

With 3 to 12 questions per domain, treat these percentages as a guide to where to focus, not a prediction of your exam score. Keep following your 28-Day META-Cognitive Study Blueprint, and spend the first 15–20 minutes of three of your 58-minute sessions each week on your weakest domains.