

**Montana Mental Health Nursing Care Center  
Representative Payee Procedure - Financial Statement**

The Care Planning Team has determined that it would be clinically disruptive to the following residents to receive copies of financial statements for the month of \_\_\_\_\_, 20\_\_\_\_. Due to the anxiety it would produce, or because they are too confused to understand the statement.

Category I Anxiety Female Residents	Category II Confusion Female Residents	Category I Anxiety Male Residents	Category II Confusion Male Residents

**Care Planning Team:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Superintendent: \_\_\_\_\_ Director of Nursing: \_\_\_\_\_

Nurse Supervisor: \_\_\_\_\_ CNA Supervisor: \_\_\_\_\_

Food Service Supervisor: \_\_\_\_\_ Recreation Supervisor: \_\_\_\_\_

Social Services: \_\_\_\_\_

Psychology Specialist: \_\_\_\_\_