



John A. Carey  
Inspector General

OFFICE OF INSPECTOR GENERAL  
PALM BEACH COUNTY



Inspector General  
Accredited

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*“Enhancing Public Trust in Government”*

**Redacted per §119.071(5)(b) and (5)(f)1F.S.,  
and 15 U.S.C. §9058a (4)(A)**

**Investigative Report**

**2022-0022**

**False Information on County  
COVID-19 Related Assistance  
Program Applications- West  
Palm Beach**

**June 18, 2024**



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Inspector General

OFFICE OF INSPECTOR GENERAL  
PALM BEACH COUNTY  
INVESTIGATIVE REPORT

DATE ISSUED: JUNE 18, 2024



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FALSE INFORMATION ON COUNTY COVID-19 RELATED ASSISTANCE  
PROGRAM APPLICATIONS- WEST PALM BEACH

SUMMARY

WHAT WE DID

The Palm Beach County (County) Office of Inspector General (OIG) received a complaint from the County Community Services Department (Community Services) alleging that [REDACTED] (Applicant) submitted applications for County Coronavirus Aid, Relief and Economic Security (CARES) Act – Coronavirus Relief Fund Rental, Utilities, and Food Assistance Program and Emergency Rental and Utilities Assistance Program (ERA Program) assistance with a fraudulent employer letter. Community Services stated two of Applicant's applications for assistance were approved, and that she submitted a third application which was denied.

Based upon our initial review of Applicant's applications and accompanying documents, the OIG initiated an investigation of the following allegation:

**Allegation (1):** Applicant provided false information to the County in her assistance applications, which resulted in improper grant funding from County programs.

Our office reviewed Applicant's assistance applications, supporting documents, and the program guidelines. We also interviewed Applicant's employer and Applicant.

WHAT WE FOUND

**Allegation (1) is supported.** We found that Applicant submitted falsified documents to the County in support of her assistance applications.

As a result of her actions, the County approved two applications and issued a total of **\$11,202.24 in funding, which we find to be Identified Costs<sup>1</sup>.**

We found sufficient information to warrant referring our findings to law enforcement (with a copy to the State Attorney's Office) for a determination of whether the facts arise to a criminal act under section 817.03, Florida Statutes.

We also found sufficient information to warrant notification of our findings to the United States Attorney's Office for a determination of whether they constitute a violation of Title 18, Chapter 47, section 1001, United States Criminal Code.

<sup>1</sup> Identified costs are cost that have been identified as dollars that have the potential of being returned to the entity to offset taxpayer burden.

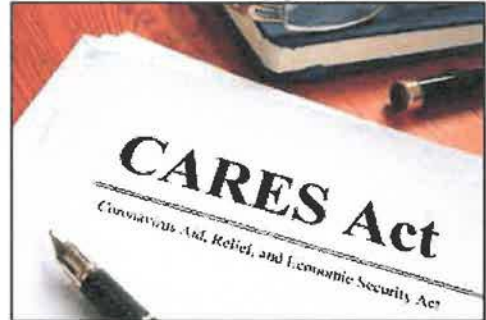
**WHAT WE RECOMMEND**

We make one recommendation; that the County seek reimbursement of \$11,202.24 in improperly obtained funds.

## BACKGROUND

### The CARES Act

On March 1, 2020, Florida Governor Ron DeSantis directed the State Health Officer to issue a public health emergency in the State of Florida due to the COVID-19 pandemic. On March 13, 2020, then-Palm Beach County Mayor Dave Kerner declared a state of emergency in the County due to COVID-19.



On March 27, 2020, the President signed the CARES Act into law. The CARES Act allocated \$2.2 trillion in economic relief to individuals, businesses, and governments affected by COVID-19. State governments were allocated a total of \$139 billion based on their populations (as measured by the U.S. Census Bureau in 2019), with no state receiving less than \$1.25 billion. Florida received a total of \$8.328 billion, with \$261,174,832 of that total provided to Palm Beach County.

On May 15, 2020, the Palm Beach County Board of County Commissioners dedicated \$40 million of the approximately \$261 million allocated to it for "Emergency Mortgage, Rental and Utility Assistance." Community Services administered the Rental Assistance Program portion of this funding.

### CARES Act Coronavirus Relief Fund Rental, Utilities, and Food Assistance Program Guidelines

The CARES Act- Coronavirus Relief Fund Rental, Utilities, and Food Assistance Program was designed to utilize CARES Act funds to provide one-time rental and utility assistance to eligible County residents who experienced loss of income, reduction in hours, or unemployment as a direct result of the COVID-19 pandemic. The Community Services website explained that in order to be eligible for the program, the applicant must reside within the corporate limits of Palm Beach County and have documentable information to evidence loss of income, reduction in hours, or unemployment because of the COVID-19 pandemic, that contributed to missed rental payments and/or utility payments. Eligibility guidelines on the website also listed the income and asset requirements to qualify for the Program. Applicants were eligible for assistance for food, past due rent, and/or utilities due from March 1, 2020 to December 31, 2020.

### Emergency Rental Assistance Program

On March 9, 2021, under the authority of the U.S. Department of Treasury Emergency Rental Assistance (ERA) Program 1 (as established by the Consolidated Appropriations Act, 2021) and 2 (as established by section 3201 of the American Rescue Plan Act of 2021), the Palm Beach County Board of County Commissioners (BCC) approved ERA-1 funding to assist Palm Beach County residents affected by COVID-19 with rental and

utility assistance. On August 17, 2021, the BCC approved ERA-2 funding for the same purpose.

Eligible Palm Beach County households are renter households in which one or more individual(s) meets all of the following criteria:

- For ERA-1, qualifies for unemployment or experienced a reduction of household income, incurred significant costs, or experienced other financial hardships **due to** COVID-19 (either directly or indirectly), or for ERA-2, qualifies for unemployment or experienced other financial hardships **during or due to** (either directly or indirectly) COVID-19;
- Demonstrates a risk of homelessness or housing instability; and
- Has a household income at or below 80% of the area median.

### Rental Assistance Applications

The County accepted applications electronically on the Community Services Online System for Community Access to Resources and Social Services (OSCARSS). OSCARSS required applicants to upload certain supporting documentation, including identification, a rental lease agreement, and a Balance Statement from the landlord. The Balance Statement was to be completed by the applicant's landlord or property manager, and was to reflect the amount of rent owed by the applicant.



The form of the application differed slightly throughout the Program, but each included eligibility questions and acknowledgements. Applicants were required to affirm these statements by electronically checking a box next to each one. Applicants had to check each box every time they submitted or re-submitted an application.

The Acknowledgement section for applications during the period relevant to this report included the following:

- I further certify that I have read<sup>5</sup> the above information and, to the best of my knowledge and belief, the information is accurate and has been properly recorded. Additionally, I understand that I am responsible for the accuracy of the information provided and that said information will be used as a basis for determining my eligibility for services. **I also understand that any falsification or misrepresentation of this information is just cause for denial of services and prosecution for fraud.** [Emphasis added]

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<sup>5</sup> In the version of this acknowledgment for applications 28842 and 49879, there was a comma after the word "read." The comma did not appear after the word "read" for application 87562. The rest of this acknowledgment has been identical for all applications.

The final page of the application required the applicant's electronic signature.

Community Services assigned applications it received to a Community Services reviewer. The reviewer checked whether the applicant submitted all required information and that there were no discrepancies within the documents. If information was missing, or if information in submitted documents was inconsistent, the reviewer would return the application to the applicant, noting what was missing or inconsistent. If the applicant met the eligibility guidelines and submitted required documentation, and the applicant's landlord had registered or was in the process of registering with the County as a vendor, the reviewer would send the application to a supervisor for review.

Then, applications were sent to Community Services fiscal personnel. Upon the approval of an application for rental assistance, the County sent notice of approval and a request for payment to the County Clerk & Comptroller's Office for payment processing.

The County Clerk and Comptroller's Office paid funds directly to the applicant's landlord. In order to be paid, the landlord had to register as a vendor with the County. If not already registered, the County sent the landlord a link to a portal to complete the vendor registration process.

#### **Property Records for 4500 Portofino Way, ██████, West Palm Beach, Florida**

Applications 28842, 49879, and 87562 list Applicant's residential rental address as 4500 Portofino Way, ██████, West Palm Beach, FL 33409. According to the Palm Beach County Property Appraiser's Office, 4400 Portofino Way is the physical address of an apartment complex that includes 4500 Portofino Way, ██████. The Palm Beach County Property Appraiser's online database shows that WPB Multifamily Owner I LLC owned the apartment complex at 4400 Portofino Way, West Palm Beach, FL from March 2015 until December 2021. Since December 2021, the owner has been Portofino Place Owner I LLC.

### **ALLEGATIONS AND FINDINGS**

#### **Allegation (1):**

***Applicant provided false information to the County in her assistance applications, which resulted in improper grant funding from County programs.***

#### **Governing Directives:**

Palm Beach County CARES Act – Coronavirus Relief Fund Rental, Utilities, and Food Assistance Program application and program guidelines; Palm Beach County Emergency Rental Assistance Program application and program guidelines.

#### **Finding:**

The information obtained **supports** the allegation.

### Applicant's Rental, Utility, and Food Assistance Application 28842

County Records show Applicant electronically signed and submitted assistance application 28842 to the County on October 7, 2020, seeking rental, electric, and food assistance. The County returned the application to Applicant on October 13, 2020 for additional information to include a Balance Statement from her landlord. Applicant resubmitted the application that same date.

Applicant listed her address as 4500 Portofino Way, [REDACTED], West Palm Beach, Florida 33409, and her landlord as Portofino Apartments. She requested past due rental assistance of \$5,100.00. Applicant stated in the application that her monthly rent amount was \$1,750.00 and that the past due amount started and ended in August 2020. The landlord Balance Statement submitted with this application was dated October 13, 2020, and reflected a balance due of \$8,467.35 for June 2020 through October, 2020. The landlord Balance Statement listed \$1,335.35 as past due for June and \$1,783.00 per month past due for the months July through October 2020.

Additional Questions - Rental Assistance	
What is the Rent Due Date? *	06/01/2020
What is your Landlord's Name? *	Portofino Apartments
What is your Landlord's Address? *	[REDACTED]
What is your Landlord's Email Address? *	[REDACTED]
What is your Landlord's Phone Number? *	[REDACTED]
What is your Monthly Rent Amount? *	\$1,750.00
Are you currently receiving section 8 or any federal housing subsidies? *	No
Did you receive a Rental Late or Eviction Notice? *	Yes
Have you received an eviction notice (issued after 3/15/2020) caused by the COVID-19 pandemic? *	No
What is the Rental Past Due Start Date? *	08/03/2020
What is the Rental Past Due End Date? *	08/06/2020
What is the Rental Past Due Amount Requested? *	\$5,100.00

Applicant also requested assistance for a past due electric bill of \$796.00, and food assistance.

Applicant attested that her crisis was COVID-19 related. In the Declaration of Crisis section of the application, she stated ***"I'm a private contractor and I've lost hours and clients due to the pandemic."*** [Emphasis added]

Declaration of Crisis (Please Explain the reason for your Crisis Situation below): \*

I'm a private contractor and I've lost hours and clients due to the pandemic

### Employer Email submitted with Application 28842

Applicant submitted an email purporting to be from her employer, Turning Point, as proof of COVID-19 Crisis, a lease, and paystubs with her application. The email purportedly from her employer was undated, with a subject of "IMPORTANT UPDATE," and stated

the Turning Point office would be closed indefinitely beginning March 16, and that everyone would be working remotely. There were instructions for clinicians to take certain steps to secure employment while working remotely. It was signed "Best Regards, Michelle" and provided Michelle's cell phone number as [REDACTED]. The email did not include a last name or job title for the alleged sender "Michelle."

### Pay Documents Submitted with Application 28842

[REDACTED]

Subject: **\*\*IMPORTANT UPDATE\*\***

Good afternoon:

Turning Point is committed to maintaining a safe and healthy workplace for our team members and our clients. It is for this reason that I have decided to close the Turning Point office indefinitely beginning Monday, March 16th. **DON'T PANIC.....** this does not mean that you cannot provide clinical services to your clients. It does mean that we will ALL be working remotely until further notice. Below is the plan for transition and process for the continuation of services.

1. The front office staff will not be physically at the office as of Monday, March 16th. However, they will be working remotely Monday-Friday from 9am-5pm. This includes answering phone calls, assigning new intakes, being available to clinicians and clients for questions, verifying insurance eligibility, processing co-pays/payments, and all other typical duties completed by our front office team.
2. Since some clinicians have clients scheduled in the office early next week, you will have the option of providing therapy in the office on Monday and Tuesday, March 16 and 17, ONLY OR scheduling a Doxy or phone session. No clients or clinicians can come into the office as of Wednesday, March 18th.
3. Between today and tomorrow Barbie will call all clients scheduled for sessions on March 16th and 17th to inform them of our office closure and to let them know that they can continue sessions via Doxy or phone. She will also verify their contact phone # listed in Valant. Barbie will clarify that the decision on HOW their session will be held will be made by their clinician and that their clinician will contact them directly to coordinate their next and following sessions.
4. Barbie will call all other clients as well to let them know of the transition and to inform them of their options for continued services, including how to register with Doxy. Again, it is the clinicians responsibility to follow up with all their clients to set up their next session (s).
5. The clinician is responsible for calling each of their clients to determine which option for therapy sessions works best for both. Barbie will only call clients to complete the initial notification of the office closure.
6. For new intakes: Barbie will instruct clients on how to download the Intake Packet from our Turning Point website and return to Barbie. Until we are back in the office, or until further instruction, we will not hold clinicians accountable for Intake Packets. Barbie is aware of the intake documents that MUST be collected until we are in full functional modality once again. She will email clinicians with new intake assignments.

We all need to work together to make this process work as smooth as possible and therefore, we depend on clinicians to do the following:

1. Contact ALL your clients to determine the manner in which sessions will be held. Please use Doxy as the preferred option; if a client is unable to use this type of technology you can offer to hold phone sessions. However, make sure to use the phone# listed in Valant as their contact number. This is done to confirm their identity and protect their privacy.
2. I know that this will hurt several employees financially, but we will do our best to help independent contractors with case load.
3. "Check in" all your clients immediately after the session. This is the only way Nicole knows to charge a copay/fee. If this is not done by the clinician, it may impact their invoice reimbursement.
4. Update the service code to CBC, No Show or CBP immediately. This will prevent Nicole from charging a copay/fee erroneously.
5. Continue entering your appointments in the Valant scheduler as usual. It is critical that your Valant appointments are up to date at all times.
6. As usual, complete clinical documentation within 48 hours of session.
7. Supervisors continue providing weekly clinical supervision.
8. Continue sending invoices as usual.

I understand that this is a tremendous inconvenience for all involved. However, I also believe that we're very fortunate to have the opportunity to continue our work remotely. Please feel free to email me if I missed anything in this email and/or if you have any suggestions to make this process more efficient. I hope that you all take good care of yourselves and I very much appreciate your goodwill and teamwork.

I will be available to everyone via email or by phone, my cell# is [REDACTED]

Best regards,  
Michelle



The paystubs purporting to be from Turning Point that Applicant submitted with her application reflected pay dates in February, March, April, and May of 2020.

**TURNING POINT MENTAL HEALTH CENTER**  
 6730 W. SUNRISE BLVD., SUITE 101  
 PLANTATION, FL 33313

EMPLOYEE NAME:	SS ID#:	INVOICE #	DATES:	PAY DATE:
		12	1/1/2020-1/31/2020	2/15/2020

EARNINGS:	RATE:	TOTAL HOURS:	CURRENT:	YEAR TO DATE:
\$3,948.00	\$28.00	141	\$3,948.00	\$3,948.00

YTD GROSS:	YTD NET PAY:
\$3,948.00	\$3,948.00

Contractor) \$3,948.00

**TURNING POINT MENTAL HEALTH CENTER**  
 6730 W. SUNRISE BLVD., SUITE 101  
 PLANTATION, FL 33313

EMPLOYEE NAME:	SS ID#:	INVOICE #	DATES:	PAY DATE:
		13	2/1/2020-2/28/2020	3/15/2020

EARNINGS:	RATE:	TOTAL HOURS:	CURRENT:	YEAR TO DATE:
\$4,050.00	\$28.00	145	\$4,050.00	\$8,008.00

YTD GROSS:	YTD NET PAY:
\$8,008.00	\$8,008.00

Contractor) \$4,050.00

**TURNING POINT MENTAL HEALTH CENTER**  
 6730 W. SUNRISE BLVD., SUITE 101  
 PLANTATION, FL 33313

EMPLOYEE NAME:	SS ID#:	INVOICE #	DATES:	PAY DATE:
		14	3/1/2020-3/31/2020	4/15/2020

EARNINGS:	RATE:	TOTAL HOURS:	CURRENT:	YEAR TO DATE:
\$2,436.00	\$28.00	87	\$2,436.00	\$10,444.00

YTD GROSS:	YTD NET PAY:
\$10,444.00	\$10,444.00

Contractor) \$2,436.00

**TURNING POINT MENTAL HEALTH CENTER**  
 6730 W. SUNRISE BLVD., SUITE 101  
 PLANTATION, FL 33313

EMPLOYEE NAME:	SS ID#:	INVOICE #	DATES:	PAY DATE:
		15	4/1/2020-4/30/2020	5/15/2020

EARNINGS:	RATE:	TOTAL HOURS:	CURRENT:	YEAR TO DATE:
\$1,680.00	\$28.00	60	\$1,680.00	\$12,124.00

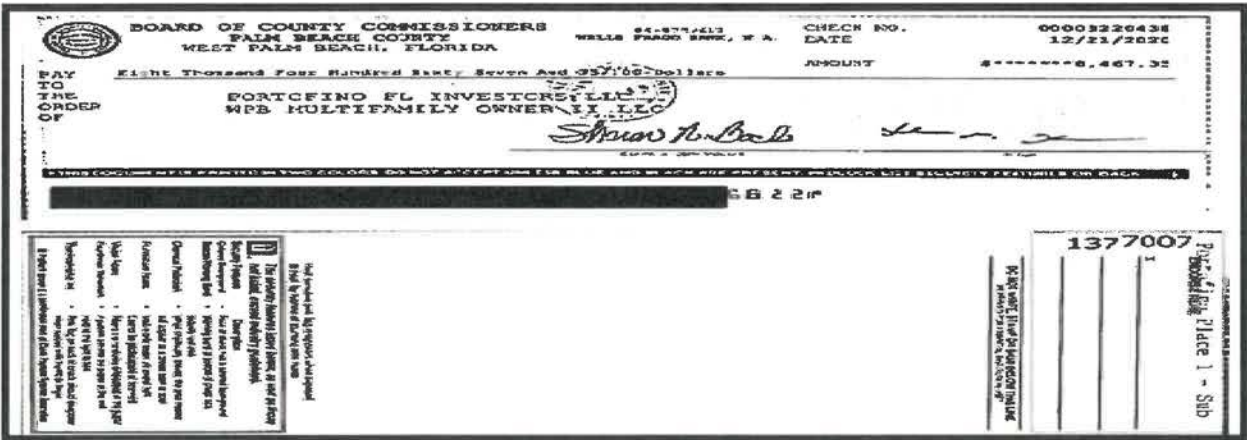
YTD GROSS:	YTD NET PAY:
\$12,124.00	\$12,124.00

Contractor) \$1,680.00

**County Payments for Application 28842**

On October 20, 2020, the County processed the application. County records show that on October 26, 2020, the County issued payment of \$311.24 to Florida Power and Light (FPL) on behalf of Applicant, made a food card payment to Applicant in the amount of

\$400.00<sup>6</sup> on October 23, 2020, and on December 21, 2020 issued check number 00003220438 in the amount of \$8,467.35 to Portofino FL Investors LLC, WPB Multifamily Owner II LLC for Applicant's rental assistance,<sup>7</sup> for a total of \$9,678.59 in assistance.



**Applicant's Rental Assistance Application 49879**

County records show Applicant electronically signed and submitted rental assistance application 49879 to the County on November 16, 2020. The County returned the application to Applicant on November 17, 2020 for additional information, including a Balance Statement from her landlord and her rental lease agreement. Applicant resubmitted the application on November 19, 2020. Applicant listed her address as 4500 Portofino Way, [REDACTED], West Palm Beach, Florida 33409 and her landlord as "Portofino Apartment." She listed her monthly rent payment as \$1,783.00, and requested rental assistance of \$2,048.00 for November 2020.

Additional Questions - Rental Assistance	
What is the Rent Due Date?	11/01/2020
What is your Landlord's Name?	Portofino Apartment
What is your Landlord's Address?	4600 Portofino Way West Palm Beach Fl 33409
What is your Landlord's Email Address?	Al.ne.baleeiro@portland.com
What is your Landlord's Phone Number?	561-296-7272
What is your Monthly Rent Amount?	\$1,783.00
Are you currently receiving section 8 or any federal housing subsidies?	No
Did you receive a Rental Late or Eviction Notice?	Yes
Have you received an eviction notice (issued after 3/15/2020) caused by the COVID-19 pandemic?	Yes
What is the Rental Past Due Start Date?	11/01/2020
What is the Rental Past Due End Date?	11/03/2020
What is the Rental Past Due Amount Requested?	\$2,048.00

<sup>6</sup> Applicant initially received \$400.00 in food assistance for application 28842. She later received an additional \$500.00, totaling \$900.00 in food assistance. According to Community Services, individuals that were eligible for food cards received an automated additional \$500.00 reload in December of 2020.

<sup>7</sup> The County initially made this payment on October 26, 2020, as part of a larger check, number 00000003208892, to Portofino. However, that check was ultimately voided and the payment for Applicant was reissued separately.

The Landlord Balance Statement submitted in support of the application showed a total due of \$1,908.00, including \$125.00 in late charges.

Applicant attested that her crisis was COVID-19 related. In the Declaration of Crisis section of the application, she wrote ***“Lost hours due to office being closed. Office reportedly will open doors official with the month of November.”*** [Emphasis added]

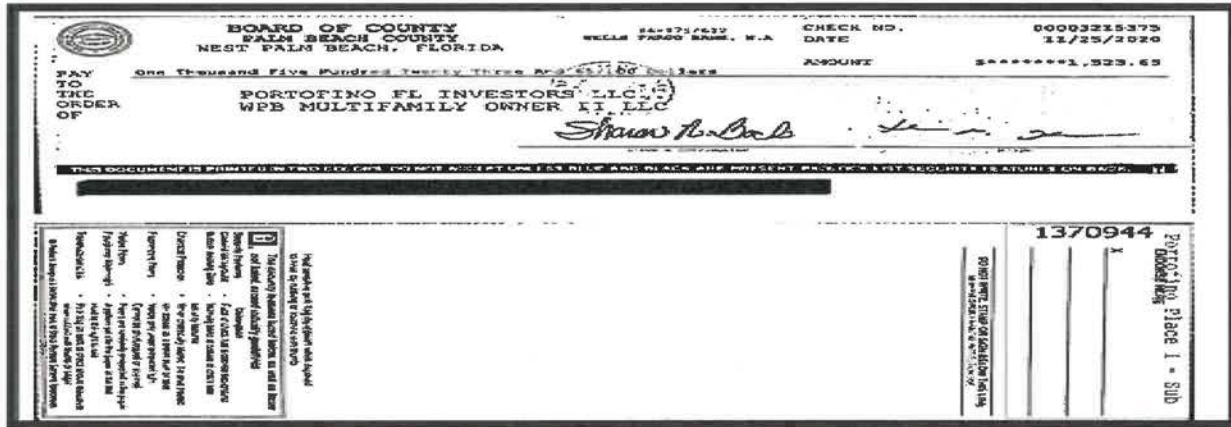
**Documents attached to Application 49879**

Attached to this application in the OSCARSS system were the same paystubs and emailed employee letter that Applicant submitted with application 28842. OSCARSS reflected that the documents were “Already in File,” as opposed to having been submitted with this application.

**County Payment to Portofino**

The County processed the application on November 22, 2020. On November 25, 2020, the County issued check number 00003215375 in the amount of \$1,523.65<sup>8</sup> to Portofino FL Investors LLC, WPB Multifamily Owner II LLC for Applicant’s rental assistance.

<sup>8</sup> According to Community Services, for CARES Act funding, there was a \$10,000 assistance cap, and since Applicant had already received \$8,467.35, the assistance paid for this application was adjusted to remain under the cap.



**Rental Assistance Application 87562**

County Records show Applicant electronically signed and submitted rental assistance application 87562 to the County on September 14, 2021. She listed her address as 4500 Portofino Way, [REDACTED], West Palm Beach, Florida 33409, and her landlord as Cortland Portofino. Applicant listed her monthly rental amount as \$1,851.00, and requested assistance for the months of October through December of 2021.

Applicant attested that her crisis was COVID-19 related. In the Declaration of Crisis section of the application, she wrote **“Job reduce hours again due to pandemic.”** [Emphasis added]

On September 16, 2021, the County returned the application to Applicant, stating, “Please provide paystubs for the last 2 month (sic)... and two paystubs from January to compare the reduction of hours. If your hours were reduced provide a letter from your employer stating that you are working less hours due to COVID...” Applicant resubmitted the application on September 21, 2021.

The County again returned the application to Applicant on February 14, 2022 and February 18, 2022 for additional information. Applicant resubmitted the application after it was returned on February 14, but did not resubmit it after it was returned on February 18. On March 5, 2022, the County marked the application as non-responsive and no payment was issued.

**Employer Documents submitted with Application 87562**

Applicant submitted the same undated email purporting to be from Turning Point that was attached to her two previous applications. She also submitted an undated letter purporting to be from Turning Point addressed to “All Staff.” The letter stated that the Turning Point office would be closed indefinitely, and that all work would continue remotely until further notice. The letter stated at its bottom that it was from Taya Taube, Director of Operations.



She also submitted one page of a 2020 IRS Form 1040 Income Tax Return with this application, reporting her total income as \$27,537.00.

**Form 1040** Department of the Treasury - Internal Revenue Service (99) **2020** OMB No. 1545-0047 Use only on forms that require it. Do not write or attach to this return.

**Filing Status**  Single  Married filing jointly  Married filing separately (MFS)  Head of household (HOH)  Qualifying widow(er) (QW)

Check only one box. If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent.

7	Wages, salaries, tips, etc. Attach Form(s) W-2	1	Taxable interest	20	0
8a	Tax-exempt interest	2a	Ordinary dividends	2b	27,537
8b	Qualified dividends	3a	Taxable amount	4b	27,537
9a	IRA distributions	4a	Taxable amount	5b	0
9b	Pensions and annuities	5a	Taxable amount	6b	0
10a	Social security benefits	6a	Taxable amount	7	0
10b	Capital gain or (loss). Attach Schedule D if required. If not required, check here	7	Other income from Schedule 1, line 9	8	27,537
11	Other income from Schedule 1, line 9	8	Adjusted gross income	9	27,537
12	Adjustments to income:	9a	From Schedule 1, line 22	10a	1,049
13	Charitable contributions if you take the standard deduction. See instructions	10b	Charitable contributions if you take the standard deduction. See instructions	10b	0
14	Other adjustments to income	10c	Adjusted gross income	11	26,488
15	Standard deduction or itemized deductions (from Schedule A)	11	Adjusted gross income	12	25,439
16	Qualified business income deduction. Attach Form 8895 or Form 8895-A	12	Standard deduction or itemized deductions (from Schedule A)	13	1,049
17	Other adjustments to income	13	Qualified business income deduction. Attach Form 8895 or Form 8895-A	14	24,388
18	Taxable income. Subtract line 14 from line 11. If zero or less, enter 0	14	Adjusted gross income	15	24,388

Applicant submitted seven monthly paystubs with this application, purporting to be from Turning Point, which on their face do not appear to be authentic. The paystub for the period of January 1- 31, 2021 reflected a pay date of February 15, 2020; the paystub for the period of February 1- 28, 2021 reflected a pay date of March 15, 2020; the paystub

for the period of July 1- 31, 2021 reflected a pay date of August 15, 2020; and the paystub for the period of August 1- 31, 2021 reflected a pay date of September 15, 2020.

**TURNING POINT MENTAL HEALTH CENTER**  
 6735 W SUNRISE BLVD, SUITE 101  
 PLANTATION, FL 33313

<b>EMPLOYEE NAME:</b>	<b>SS ID#:</b>	<b>INVOICE #</b>	<b>DATES:</b>	<b>PAY DATE:</b>
		19	1/1/2021-1/31/2021	2/15/2020

<b>EARNINGS:</b>	<b>RATE:</b>	<b>TOTAL HOURS:</b>	<b>CURRENT:</b>	<b>YEAR TO DATE:</b>
\$4,898.00	\$28.00	174	\$4,898.00	\$4,898.00

<b>YTD GROSS:</b>	<b>YTD NET PAY:</b>
\$4,898.00	\$4,898.00

Contractor) \$4,898.00

**TURNING POINT MENTAL HEALTH CENTER**  
 6735 W SUNRISE BLVD, SUITE 101  
 PLANTATION, FL 33313

<b>EMPLOYEE NAME:</b>	<b>SS ID#:</b>	<b>INVOICE #</b>	<b>DATES:</b>	<b>PAY DATE:</b>
		20	2/1/2021-2/28/2021	3/15/2020

<b>EARNINGS:</b>	<b>RATE:</b>	<b>TOTAL HOURS:</b>	<b>CURRENT:</b>	<b>YEAR TO DATE:</b>
\$5,424.00	\$28.00	194	\$5,424.00	\$10,322.00

<b>YTD GROSS:</b>	<b>YTD NET PAY:</b>
\$10,322.00	\$10,322.00

PAYABLE TO LARHEA K PINDER, M.S (Independent Contractor) \$5,424.00

**TURNING POINT MENTAL HEALTH CENTER**  
 6735 W SUNRISE BLVD, SUITE 101  
 PLANTATION, FL 33313

<b>EMPLOYEE NAME:</b>	<b>SS ID#:</b>	<b>INVOICE #</b>	<b>DATES:</b>	<b>PAY DATE:</b>
		25	7/1/2021-7/31/2021	8/15/2020

<b>EARNINGS:</b>	<b>RATE:</b>	<b>TOTAL HOURS:</b>	<b>CURRENT:</b>	<b>YEAR TO DATE:</b>
\$2,800.00	\$28.00	100	\$2,800.00	\$33,900.00

<b>YTD GROSS:</b>	<b>YTD NET PAY:</b>
\$33,900.00	\$33,900.00

Contractor) \$2,800.00

**TURNING POINT MENTAL HEALTH CENTER**  
 6735 W SUNRISE BLVD, SUITE 101  
 PLANTATION, FL 33313

<b>EMPLOYEE NAME:</b>	<b>SS ID#:</b>	<b>INVOICE #</b>	<b>DATES:</b>	<b>PAY DATE:</b>
		26	8/1/2021-8/31/2021	9/15/2020

<b>EARNINGS:</b>	<b>RATE:</b>	<b>TOTAL HOURS:</b>	<b>CURRENT:</b>	<b>YEAR TO DATE:</b>
\$2,744.00	\$28.00	98	\$2,744.00	\$36,644.00

<b>YTD GROSS:</b>	<b>YTD NET PAY:</b>
\$36,644.00	\$36,644.00

Contractor) \$2,744.00

In addition, the paystub for the period of October 1- 31, 2021 reflected a pay date of November 15, 21021.

TURNING POINT MENTAL HEALTH CENTER				
EMPLOYEE NAME:	SS ID#:	INVOICE #	DATES:	PAY DATE:
		28	10/1/2021-10/31/2021	11/15/21021
EARNINGS:	RATE:	TOTAL HOURS:	CURRENT:	YEAR TO DATE:
\$2,716.00	\$28.00	97	\$2,716.00	\$28,608.00
			YTD GROSS:	YTD NET PAY:
			\$28,608.00	\$28,608.00

Contractor) \$2,716.00

### OIG Interview of Turning Point Mental Health Center CEO Michelle Montero

The OIG interviewed Turning Point Mental Health Center CEO Michelle Montero. Ms. Montero stated Applicant was a contract employee of Turning Point and that Turning Point paid contractors once a month for services performed during the prior month. The OIG showed Ms. Montero paystubs, purportedly from Turning Point, submitted by Applicant with her applications. Ms. Montero told the OIG that those paystubs were not issued by Turning Point. She provided the OIG with invoices for the actual payments Turning Point made to Applicant in 2020.<sup>9</sup>

The OIG showed Ms. Montero the "IMPORTANT UPDATE" email purportedly sent from "Michelle" on behalf of Turning Point and the "ALL STAFF" memo purportedly signed by Taya Taube, which Applicant submitted with her applications.

Ms. Montero told the OIG that she sent an email to staff on March 14, 2020 with a subject of "IMPORTANT UPDATE" regarding COVID that was similar in form and substance to the email that Applicant submitted with her applications. Ms. Montero provided the OIG with a copy of the email she actually sent and noted the employer email submitted with Applicant's application did not reflect Ms. Montero's correct phone number as reflected in her actual email, and that the information had been altered.

The OIG provided Ms. Montero with the memo purportedly from Ms. Taube, which Applicant submitted with her application. Ms. Montero told the OIG that she researched the memo and determined that Ms. Taube did not write or send the "ALL STAFF" memo, and in fact, the document did not come from Turning Point at all.

<sup>9</sup> An OIG comparison of the true paystubs with the ones included in the applications showed that the paystubs submitted with the applications were for different amounts and on different dates.

**From:** Michelle Montero-Caicedo <monterom@turningpointbroward.com>  
**Sent:** Saturday, March 14, 2020 5:46 PM  
**To:** Alan Reitman <reitmana@turningpointbroward.com>; Stephen Bradbery <bradberys@turningpointbroward.com>; Noah Goldberg <goldbergn@turningpointbroward.com>; Nancy Pratt <prattn@turningpointbroward.com>; Kivikitaha Desouvre <desouvrek@turningpointbroward.com>; Brooke Franzman <franzmanb@turningpointbroward.com>; Cecilia Baez <baezc@turningpointbroward.com>; Angel Wilson <wilsona@turningpointbroward.com>; [REDACTED]  
<Haasey@turningpointbroward.com>; Taya Taube <taubet@turningpointbroward.com>; Yvonne Haase <mantillaa@turningpointbroward.com>; Priscilla Souto <soutop@turningpointbroward.com>; Andrea Mantilla <mantillaa@turningpointbroward.com>  
**Cc:** Barbara Ramos <ramosb@turningpointbroward.com>; Nicole Bras Feliciano

1

<felicianon@turningpointbroward.com>; Taya Taube <taubet@turningpointbroward.com>  
**Subject: \*\*IMPORTANT UPDATE\*\***

Good afternoon:

Turning Point is committed to maintaining a safe and healthy workplace for our team members and our clients. It is for this reason that I have decided to close the Turning Point office indefinitely beginning Monday, March 16th. DON'T PANIC.....this does not mean that you cannot provide clinical services to your clients. It does mean that we will ALL be working remotely until further notice. Below is the plan for transition and process for the continuation of services.

1. The front office staff will not be physically at the office as of Monday, March 16th. However, they will be working remotely Monday-Friday from 9am-5pm. This includes answering phone calls, assigning new intakes, being available to clinicians and clients for questions, verifying insurance eligibility, processing co-pays/payments, and all other typical duties completed by our front office team.
2. Since some clinicians have clients scheduled in the office early next week, you will have the option of providing therapy in the office on Monday and Tuesday, March 16 and 17, ONLY OR scheduling a Doxy or phone session. No clients or clinicians can come into the office as of Wednesday, March 18th.
3. Between today and tomorrow Barbie will call all clients scheduled for sessions on March 16th and 17th to inform them of our office closure and to let them know that they can continue sessions via Doxy or phone. She will also verify their contact phone # listed in Valant. Barbie will clarify that the decision on HOW their session will be held will be made by their clinician and that their clinician will contact them directly to coordinate their next, and following sessions.
4. Barbie will call all other clients as well to let them know of the transition and to inform them of their options for continued services, including how to register with Doxy. Again, it is the clinicians responsibility to follow up with all their clients to set up their next session (s).
5. The clinician is responsible for calling each of their clients to determine which option for therapy sessions works best for both. Barbie will only call clients to complete the initial notification of the office closure.



6. For new Intakes: Barbie will instruct clients on how to download the Intake Packet from our Turning Point website and return to Barbie. Until we are back in the office, or until further instruction, we will not hold clinicians accountable for Intake Packets. Barbie is aware of the intake documents that MUST be collected until we are in full functional modality once again. She will email clinicians with new intake assignments.

We all need to work together to make this process work as smooth as possible and therefore, we depend on clinicians to do the following:

1. Contact ALL your clients to determine the manner in which sessions will be held. Please use Doxy as the preferred option; if a client is unable to use this type of technology you can offer to hold phone sessions. However, make sure to use the phone# listed in Valant as their contact number. This is done to confirm their identity and protect their privacy.
2. "Check in" all your clients immediately after the session. This is the only way Nicole knows to charge a copay/fee. If this is not done by the clinician, it may impact their invoice reimbursement.
3. Update the service code to CBC, No Show or CBP immediately. This will prevent Nicole from charging a copay/fee erroneously.
4. Continue entering your appointments in the Valant scheduler as usual. It is critical that your Valant appointments are up to date at all times.

2

5. As usual, complete clinical documentation within 48 hours of session.
6. Supervisors continue providing weekly clinical supervision.
7. Continue sending invoices as usual

I understand that this is a tremendous inconvenience for all involved. However, I also believe that we're very fortunate to have the opportunity to continue our work remotely. Please feel free to email me if I missed anything in this email and/or if you have any suggestions to make this process more efficient. I hope that you all take good care of yourselves and I very much appreciate your goodwill and teamwork.

I will be available to everyone via email or by phone, my cell# is 954-744-6332.

Best regards,

Michelle

Michelle Montero-Caicedo, LMHC, Q.S.  
Chief Executive Officer  
6738 W. Sunrise Boulevard., Suite 101  
Plantation, FL 33313  
Office: (954) 874-8010  
Fax: (954) 652-1541

## OIG Interview of Applicant

Applicant told the OIG she is a therapist who works for Turning Point as a subcontractor. She stated she applied for rental assistance with the County two times, not three.

Applicant stated she submitted tax documentation and an email from her employer with her applications to the County. The OIG showed Applicant the email submitted with applications 28842 and 49879. Applicant said her boss, Michelle, sent the email. Applicant stated that the physical document that Applicant submitted with her applications was not the actual email from her employer. Instead, she said she copied and pasted it onto a different document, which she then submitted to the County. As such, she said, she “could have put some incorrect information on there.”

Applicant stated the phone number listed in the email as Michelle’s contact number was not Michelle’s number. She said she did not know whose phone number was on the email, that it was her “fault” that it was there, and she does not know why she put it there. The OIG told Applicant that a record search of the phone number showed it to be registered to her. Applicant responded “I don’t have that number.” Applicant said that other than the phone number, the rest of the email was accurate.

Applicant stated she did not receive paystubs from Turning Point. Rather, she said she was paid monthly through invoices, so she created the paystubs that she submitted with her applications herself and submitted them to the County.

The OIG showed Applicant a copy of the letter purportedly sent to “All Staff” by Taya Taube and submitted to the County with application 87562. Applicant stated Taya Taube is her supervisor, but she did not recognize the letter, and did not know how it got into her application submission.

### **OIG Document Comparison and Analysis**

The OIG compared the March 14, 2020 email provided by Ms. Montero to the undated email submitted with Applicant’s first two applications, which Applicant said was an accurate copy of the former.

We noted several discrepancies:

- The email that Applicant submitted was addressed to her only, whereas the actual email sent by Ms. Montero had multiple recipients
- Applicant’s version contains added bullet point number 2, which states, “I know that this will hurt several employees financially, but we will do our best to help independent contractors with case loads.” As a result of inserting this extra bullet point, the numbering of the remaining bullet points differs between the two versions.
- The cell phone number listed for Ms. Montero was 954-744-6332 in the original email, but was listed as [REDACTED] in Applicant’s version. An OIG search of open source records shows that [REDACTED] belonged to Applicant.
- The email Applicant submitted did not contain the full employer signature block below Ms. Montero’s name. The email Ms. Montero actually sent shows that her full signature block was included with the email.

Ms. Montero provided the OIG invoices for payments Turning Point made to Applicant in 2020. None of the pay dates or payment amounts on the invoices match with the payments reported on the paystubs Applicant submitted with her applications.

**TURNING POINT MENTAL HEALTH CENTER**  
 6738 W SUNRISE BLVD, SUITE 101  
 PLANTATION, FL 33313

EMPLOYEE NAME:	SS ID#:	INVOICE #	DATES:	PAY DATE:
		14	3/1/2020-3/31/2020	4/15/2020


  

EARNINGS:	RATE:	TOTAL HOURS:	CURRENT:	YEAR TO DATE:
\$2,436.00	\$28.00	87	\$2,436.00	\$10,444.00

<b>YTD GROSS:</b>	<b>YTD NET PAY:</b>
\$10,444.00	\$10,444.00



**TURNING POINT  
 MENTAL HEALTH CENTER**  
**Expense Voucher**

**Turning Point Mental Health Center**  
 6738 West Sunrise Boulevard, Suite 101  
 Plantation, FL 33313 US  
 (954) 874-8010  
 monterom@turningpointbroward.com  
 www.turningpointmhc.com

**Payment To**  
 [REDACTED]  
 West Palm Beach, FL 33402

**Date:** 04/14/2020  
**Reference No:**

Account/Item	Description	Amount
Clinical Expenses:Therapy &/or Supervision	[REDACTED]	3052.00
<b>TOTAL TOTAL DUE</b>		<b>\$3,052.00</b>

Memo: \_\_\_\_\_

Signature: \_\_\_\_\_

The invoices reflect Applicant was paid \$39,628.00 in 2020. On the IRS Form 1040 submitted with Applicant's third application, her total income in 2020 is reported as \$27,537.00.

**Conclusion**

Applicant submitted three assistance applications to the County. On each occasion, she attested that the information she provided was accurate. Based upon our review of the documents and the statements by Applicant and her employer, we found that the paystubs and employment letters Applicant submitted to the County in support of her applications were fabricated.

As a result of these actions, the County issued \$9,991.00 in rental assistance to Applicant's landlord, \$311.24 in utility assistance to FPL, and \$900.00 in food assistance to Applicant based on her first two applications.

Applicant also attempted to improperly collect County funds based on her submission of the third application.

The allegation that Applicant provided false information in her assistance applications is **supported**.

### IDENTIFIED, QUESTIONED, AND AVOIDABLE COSTS

**Identified Costs:** \$11,202.24

### ACKNOWLEDGEMENT

The Inspector General's Investigations Division would like to thank the Palm Beach County Community Services Department staff for their cooperation throughout this investigation.

### RECOMMENDED CORRECTIVE ACTIONS

The OIG recommends the County seek reimbursement of \$11,202.24 of inappropriately issued funds.

### RESPONSE FROM MANAGEMENT

Pursuant to Article XII, Section 2-427 of the Palm Beach County Code, Community Services was provided the opportunity to submit a written explanation or rebuttal to the findings as stated in this Investigative Report within ten (10) calendar days. Their written responses is as follows:

The County concurs with the IG recommendation included in Investigative Report 2022-0022. The Community Services Department will seek reimbursement for \$11,202.24 issued to the subject(s) named in this investigation.

### RESPONSE FROM SUBJECT

Pursuant to Article XII, Section 2-427 of the Palm Beach County Code, Applicant was provided the opportunity to submit a written explanation or rebuttal to the finding as stated in the Investigative Report within ten (10) calendar days. Applicant did not submit a response.

*This Investigation has been conducted in accordance with the ASSOCIATION OF INSPECTORS GENERAL Principles & Quality Standards for Investigations.*