

UNITY FAMILY SERVICES, INC.
November 1, 2024 - November 1, 2025
CONTINUOUS QUALITY ASSURANCE
YTD SUMMARY

Unity Family Services completed several quality assurance enhancements to its Peer Support programs in 2025. The reviewers meet weekly to discuss and revise the Continuous Quality Improvement plan which includes the following:

Document Reviewed and Approved by:

Michelle S. Gould, LCSW, CPSS (Executive Director)

Danielle Klingensmith, MA (Program Director)

Rochelle L. Hurd, CPS, CPSS, (Quality Assurance Coordinator)

1. Annual trainings (HIPPA Compliance, Fraud, Waste, and Abuse, Cultural Competence, Sexual Harassment Prevention, and Mandated Reporting) were updated in October 2025. These were held in October 2025 for all agency programs.
2. UFS completed annual self-audits in all programs for quality assurance and to monitor for any potential fraud, waste, or abuse concerns. Audits are completed by Quality Assurance Coordinators and then by UFS Program Directors on a quarterly basis. Audits are completed using the quality tracking tool in the electronic health records (EHR).

3. UFS continues to utilize a satisfaction survey in all programs. Data is reviewed quarterly, and annual reports are completed to monitor for quality assurance and make changes as needed to program service delivery. Consents for surveys are submitted quarterly.
4. UFS partners with Beaver, Westmoreland, and Armstrong/Indiana County Satisfaction Survey Teams and presents survey consents to the teams multiple times a year to ensure regular outreach to peer and Family-Based clients. This data is reviewed quarterly and used in program development and enhancement efforts.
5. UFS reviewed and updated all policies and procedure manuals, reviewed job descriptions, organization documents, and employee handbooks. UFS updated new employee paperwork and the employee handbook in 2025.
6. UFS utilizes a central employee navigation system called Bamboo HR to manage core HR tasks such as open enrollment, new hire selection, onboarding, as well as provides employee records and signed documentation, employee trainings, employee data, performance and time-off.
7. UFS continues to utilize high standard hiring screening procedures for all personnel including intensive background checks in addition to reference checks and clearances. Clearances obtained upon hire in Family Based and are updated every three years in the Family Based program. Peer Support staff also obtain their clearances upon hire, and these are renewed every five years. As of 2022, if one clearance is about to expire including the Mandated Reporter training, all clearances are renewed at this same time to allow for ease of tracking across the programs.

8. UFS instituted new policies and procedures in the employee handbook in 2025 for random drug tests and driving history checks are also conducted for employees of both programs.
9. UFS will not hire any individual in its Family Based or Peer Support programs without their current clearances under the updated CPSL law. If a new employee does not have current clearances, they will not be able to start until these are obtained and reviewed by the agency.
10. UFS has continued to expand our collaboration network in Armstrong, Butler, Westmoreland, Beaver, and Indiana counties. UFS staff attend county utilization meetings and advisory board meetings as needed and are prioritized. UFS FB directors meet each week on Fridays.
11. UFS will continue to consult with outside marketing and staff recruitment agencies to enhance marketing and staff recruitment as necessary.
12. UFS continues to work to improve agency practices through clinical review and management meetings with the agency program directors and administration team. Directors use these meetings to review program needs and ways to improve services by gaining feedback from program supervisors, clients, and other providers in the community.
13. UFS developed a COVID-19 policies and procedures manual and business continuity plan to ensure consistent operations and access to services for consumers during the Covid crisis. This information is distributed to staff through agency wide memos which are also available in the policies and procedures binder. UFS will continue to reference if necessary, and follow all regulations provided by the state.
14. UFS has expanded its telehealth guidelines to be in line with the current disaster regulations as well as the proposed expansion of telehealth after the COVID-19 pandemic. In 2022, UFS conducted QA calls for any

individual who was receiving telehealth services in both programs. Also in 2022, UFS began instituting a requirement for a witness to consent to treatment if this is completed via telehealth. We will continue to do this for upcoming years.

- 15.UFS hired a Human Resources Director to assume all HR duties to include policy updates and an update to cloud-based HR employee files for efficiency and accuracy purposes. UFS plans to utilize the HR Director for potential interns in partnership with local colleges and universities. The HR Director will work closely with agency Program Directors to facilitate this process. UFS is currently developing an internship program.
- 16.The UFS CFO passed away in 2024, and the agency hired a senior accountant who oversees the all fiscal policies and procedures.
- 17.UFS condensed the Executive Management Team for management and efficiency purposes as there were high levels of duplication across roles. UFS will continue to focus on oversight and efficiency in the upcoming year.
- 18.The agency Clinical Director position was removed, and the CEO and Founder of the agency assumed oversight of the clinical direction for the agency with a focus on expanding Family Based and Peer Support programs to fill existing gaps and meet additional counties' community needs.
- 19.UFS purchased additional company vehicles in 2023, 2024, and 2025 to meet growing program needs as we are a community-based service with most of the agency's work occurring in individual homes and communities. UFS standard is to provide a company vehicle for each Family Based team and shared company vehicles for Peer Support programs.

20. Unity monitors the vehicle fleet through enhanced vehicle tracking systems through WEX and Enterprise Fleet Management systems to manage company vehicles for employee safety and or management of billables and non-billables to follow regulations and compliance.
21. UFS continues to provide life insurance policies and contributions to IRAs and savings/investment plans for all employees.
22. UFS continues to implement Quality Assurance Coordinator positions at each office to assist Program Directors in ensuring that quality documentation is present within each client record to meet regulations and standards. The QACs also assist in onboarding and training new therapists in all the skills necessary to provide quality care.

IT and Security

1. Moved from on Prem AD to MS Entra

The organization transitioned from a traditional on-premises Active Directory environment to Microsoft Entra (formerly Azure AD). This shift modernized identity and access management by enabling cloud-based authentication, improved security controls, and reduced reliance on on-site infrastructure. The move also supports remote and hybrid work, simplifies user provisioning, and improves overall system reliability and scalability.

2. Upgraded to PCs to Win 11 / All in one management portal now

All organizational PCs were upgraded to Windows 11 and brought under a unified device management platform. This allows for centralized policy enforcement, security configuration, software deployment, and device monitoring through a single management portal.

3. Upgraded to Inovalon for better Eligibility checks and Revenue Cycle Management reports

The organization implemented Inovalon to enhance eligibility verification processes and strengthen revenue cycle management reporting. This upgrade improves accuracy in eligibility checks, reduces claim denials, and provides more data-driven insights into billing and reimbursement performance. The enhanced reporting capabilities support better financial oversight and operational decision-making.

4. Made *slightly* better improvement/progress to EVV

Progress was made in improving the EVV platform. While the transition required adjustments, incremental improvements were achieved in system usage, data accuracy, and staff familiarity.

5. Adopted some AI tools to help management team with meeting notes

6. AI-based tools were introduced to assist the management team with meeting notes and documentation. These tools help capture key discussion points, action items, and decisions more efficiently, reducing administrative overhead and improving consistency in recordkeeping. This adoption allows leadership to focus more on strategic work while maintaining clear and accurate meeting records.

Peer Support Programs

1. UFS continues to conduct quarterly reviews of client outcomes, client satisfaction, and discharge readiness for its peer clients in both programs. Quarterly reviews include audits of all open peer charts and a review of each peer client's most recent ISP and SBA assessment to determine if they meet

continued stay criteria. These reviews are conducted by the agency QAC and Supervisors. The final review is done by MHP.

2. UFS holds quarterly Advisory Board meetings during which Peer Support clients are invited to attend and share feedback and suggestions. These are held in-person at each agency. We also are utilizing Teams to join both agencies during these meetings.
3. UFS strives to conduct qualitative and quantitative data on its Peer Support program outcomes and client satisfaction. In the past, UFS noted a need to enhance practices in this area. Qualitatively, UFS has client's complete satisfaction surveys not only at discharge but at various times throughout the treatment process. Quantitatively, UFS completes QA reports for client calls regarding concerns and/or feedback about the program.
4. UFS implemented Quality of Life surveys for all peers in 2020 and continues doing these surveys in 2025. QAC obtains 2 scores from the EHR for each client to allow for comparison of data over time.
5. Peer Support Training manuals are given to all employees upon hire. New employees complete the new manual and test prior to working with consumers. MHP will review tests to see if any area needs to have more training to assist new recruits.
6. UFS has developed additional training to support CPS staff in better understanding and implementing billing requirements, documentation standards, and collaborative documentation. Training folders were implemented in 2025 to teach staff how to navigate through the Qualifacts CareLogic/EVV program. Training will be done by QAC and supervisors.
7. UFS continues to utilize a quality assurance procedure in 2025 to include random calling to survey peers for feedback as well as documenting internally all concerns from client peers for review by agency QAC and MHP to ensure necessary steps were taken to resolve concerns and provide the best possible support for peers.

8. UFS is committed to ongoing education and training and has supported CPSS and CPS in attending these opportunities when offered by various shareholders in providing mental health services to the county population.

Some staff chose to go over the 18 hours required to continue to grow in their careers.

9. UFS collaborated with Armstrong/Indiana CFST to collect and analyze satisfaction data for its programs. This data is reviewed with QAC and program supervisors and staff to improve the quality of services and recognize staff for their efforts.
10. UFS is continually dedicated to implementing peer feedback and resolving concerns of peer clients. Peers are invited to attend agency Advisory Board meetings as well as attend and voice concerns at local and regional CSP meetings. Any concerns shared or documented during QA calls, CFST results, or satisfaction surveys may result in a plan of action by the program. This plan of action will be documented and shared with the peers involved to ensure their satisfaction with the resolution.
11. UFS has continued to update and adjust our documentation, including the inclusion of additional information on client SBAs and ISPs including cultural preferences. ISPs will continue to have Discharge Plan / Continued Stay Criteria as well as the continued need for service to comply with regulations.
12. Discharge Summaries include adding specific information about client progress towards each Long-Term ISP goal domain and an ongoing commitment from each client to continue in the program.
13. UFS MHP and QAC will continue to conduct an annual review of the Peer Support Policies and Procedures manual and the approved program service description to ensure compliance and assessment of any changes needed. Any program changes or updates required along with action steps are then documented in the annual Quality Assurance report.

14. UFS conducts annual reviews of all peer client charts. During these reviews, the agency QAC and Supervisors review client charts, Quality of Life assessment scores, and Individual Service Plans to monitor for documentation compliance, evaluate for continued stay criteria, and assess for any needed program changes.
15. UFS MHP and QAC will continue to prepare a Quality Assurance report annually for Peer Support, which is then made available to the public. It is posted near the main entrance of Indiana location and be available to view on our website.
16. UFS continues to re-examine its fraud and quality assurances measure. QAC and Supervisors will contact an increased sample size of peers each month (relative to the number of peers in the program) to ensure all peers are contacted at minimum once per year. All these calls and efforts will be documented in our Quality Assurance program manual in each office.
17. UFS Peer Support added an online training site for staff to be able to do training for CEU's. QAC sets up times to do the training and helps to choose the training that keeps them in compliance. QAC and Supervisor review and update CEU binder as needed to be sure all staff comply with regulations.
18. UFS Peer Support added Certified Peer Specialist Outreach and Activities Coordinator in 2025. The coordinator will provide Peer support, serve as a consumer advocate, provide consumer information and peer support for consumers in emergencies, outpatient or inpatient settings. The CPS/ Outreach Coordinator will be responsible for coordinating community and agency sponsored events and activities with current consumers.
19. UFS Peer Support staff has increased consumers involvement with the CSP (Community Support Program) meetings.
20. UFS CPS/Outreach and Activities Coordinator has implemented a monthly calendar of events that take place in UFS agency as well as around Indiana County. Each calendar is given to consumers or to their CPS to give to them.

