





Service is: WHO WE ARE WHAT WE DO WHERE WE ARE





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FROM SMRS LEADERSHIP

Hi friends.

After 36 years of service to the communities in and around Southern California, we found ourselves in a unique situation. One of our friends in the recovery community found themselves needing a new home. The act of finding a new home is nothing new for the people we work with. In fact, our main objective is to provide a home for those who have been unhoused and caught in the spiraling effects of addiction and mental health challenges. Many of these individuals have the streets and institutions listed as their place of residence. Our role is to provide a home which allows them to feel safe, learn how to trust, and make a smooth transition to their next home.

Like we said, this would be different because one of our friends was losing their home where they provide the same level of safety and security as we do. The primary population they serve is the monolingual Spanish speaking population of Los Angeles. Our Board, along with our team, decided if we consolidated our own operations, we could assist and provide a new home for our friends. The decision was made to close our Rena B program and offer the use of the property to one of our community partners allowing for the continuation of needed service in Los Angeles County.

One of our other areas of change has led to the adoption and use of medications for addiction treatment. We have made great strides in partnering with other organizations for the residents and participants to receive support for this helpful enhancement of their treatment. Our use of community partners allows for the smooth transition of ongoing service when an individual leaves one of our sites.

We have taken the use of medications for addiction treatment to a higher level by providing withdrawal management for individuals at two sites operated by Social Model Recovery Systems. Having the ability to provide withdrawal management increases the service modalities we provide to the population here in Los Angeles where we have seen an increase in overdoses during the pandemic.

As we see signs of the community's coming out of the pandemic, Social Model Recovery Systems stays strong, looking for future opportunities in and around behavioral health, health care, prevention, housing, and education to further the mission of our organization.

Ulises Gutierrez, Board President

Bruce Boardman, Chief Executive Officer



WHO WE ARE

VISION STATEMENT

Social Model Recovery Systems envisions a world where communities can pursue social, economic, educational, and spiritual wellness free from alcohol, other drug, and mental health problems.

MISSION STATEMENT

Our service mission is threefold:

- To create environments promoting recovery, personal responsibility, and mutual self help;
- To help communities prevent and reduce alcohol, other drug, and mental health related problems through positive social change, and;
- To share research and knowledge through training, consultation, and educational initiatives.

To achieve success, our financial mission is:

- To maintain fiscal strength which ensures quality, growth, and the ability to serve all people in need and
- To provide cost-effective services that achieve the best and highest use of public and private resources.

CORE BELIEFS

- **1.** We believe that everyone contributes to providing a safe and nurturing environment; we treat each other with consistency, predictability, and respect.
- **2.** Everyone is expected to role model healthy behaviors.
- **3.** Each person is treated with dignity and respect.
- **4.** Everyone advocates for individual growth and community change.
- **5.** Everyone's life experience is valued.
- **6.** Self-disclosure, when appropriate, is beneficial.
- **7.** The primary relationship is between the participant and the program community rather than with an individual staff member.
- **8.** We seek to understand and accept our own limitations.
- **9.** Our responsibility is to provide an environment in which participants discover their personal choices; we believe that only the participants have the ability to choose to recover.
- **10.** We offer resources for the individual and communities to develop and implement change.
- **11.** We seek to create meaningful and mutually beneficial relationships with the community.
- **12.** Recovery is an individual choice and an ongoing process; it is demonstrated, measured, and strengthened by community involvement.



WHO WE ARE

PROGRAM SPOTLIGHT

Social Model Recovery Systems is proud to announce our agency's first residential programs to offer Incidental Medical Services and Withdrawal Management services to men and women within our system of care at our Omni Center and Stepping Stones programs.

Omni Center and Stepping Stones provide a secure, recovery based environment dedicated to providing substance use disorder treatment services that fit the specific needs of residents, up to and including Withdrawal Management and Incidental Medical Services.

These programs offer treatment and recovery opportunities, focused on improving accessibility, efficiency, and outcomes by addressing complications associated with withdrawal with stabilization as the primary goal. Incidental Medical Services and Withdrawal Management Services are appropriate for residents with moderate withdrawal symptoms who need 24-hour support to reduce the discomfort associated with the withdrawal process and increase the likelihood of continuing with treatment and entering the recovery process. Residents will have access to psychological and psychiatric consultation when needed.

Incidental Medical Services are optional services provided at the program by a healthcare practitioner and nursing staff under the supervision of a healthcare practitioner. Services include obtaining medical history, monitoring health status, testing associated with withdrawal from alcohol or other drugs, overseeing self-administered medication, and treatment for substance use disorders.

Our team provides physician-directed supportive care and service to residents with a combination of human compassion as well as technology solutions to ensure that "proof of life" physical checks are being completed, ensuring our residents remain safe and comfortable during the withdrawal process.

Our programs provide withdrawal management intervention that is overseen by a physician with training and experience in detoxification, withdrawal management, and psychiatry. The physician and nursing staff provide leadership, training, and consultation to the treatment team. The physician and nursing staff also maintain ongoing relationships with the medical community. Physicians supervise the medical quality review process and oversee treatment protocols.

The multidisciplinary team ensures that a whole-person assessment is conducted to meet the biophysical needs of each individual that can help build on individual strengths, needs, abilities, and preferences. Treatment planning is inclusive of the variety of services and interventions that will best support the goal of stabilizing the individual and to build and encourage self-sufficiency aimed at increasing the potential for individuals to re-establish connections within the community in a safe and supportive environment.

Residents' individualized goals and objectives are tailored to their plan for recovery. Treatment planning is based on each individual's strengths, needs, and goals and focuses on areas such as education, employment skills development, social adjustment and interpersonal relationships building, substance use issues and treatment if needed, and relapse prevention.

Staff provide ongoing support and services to individuals with the goal of promoting positive selfesteem, independent living, and success in their own recovery. Social Model Recovery Systems believes that recovery is an ongoing process of change and growth, not just an end goal.

"I am so grateful to have been a part of developing and implementing the IMS and WM programs at Stepping Stones and Omni Center. I am really proud of what we have accomplished getting these programs started, and I am excited that it means Social Model can be a part of an individual's journey from the beginning stages of entering into the recovery process during withdrawal management and being able to offer continued support through all levels of the treatment phases, as well as continued connection through the Alumni Association" Somer Harrison Mierau, Medication Management Coordinator.

Center I can tell it's different here. The vibe is just different, and I can tell that staff really care and are here for me. I have been to other places and it's just like they are trying to hurry to do a job and go home." Resident of Omni Center's Withdrawal Management Program

"I feel hopeful and positive. I like that the doctor is so easy to talk to and is going to help me get through this."

"Ever since arriving here at Omni

Resident of Omni Center's Withdrawal Management Program

A resident of Omni Center's Withdrawal Management Program who went on to complete Residential treatment, went home to be with his family and children on Christmas Eve shared: "I feel like I have a solid start on my recovery because of Omni Center. I got a sponsor while I was here, and I will keep coming to the 12 step meetings here."

"Addiction psychiatry is my passion, it is great to treat people's mental health and addiction early."

Health Practitioner



WHO WE ARE

STAFF SPOTLIGHT

Somer Harrison-Mierau, a highlight of passionate care. Somer was Licensed by the California Board of Vocational Nursing and Psychiatric Technicians in 2004. Interviewing Somer we learned the following.



"Somewhere along the way, I lost sight of myself. I gave up my job as a psych tech, and I abandoned my husband and children in favor of a life of drug addiction, crime, and eventually homelessness. Following a few years of drug addiction, poor decision making, and legal consequences, I was completely broken down. I felt alone and worthless, and I had lost any hope that I would ever regain the person I once was. In this darkness, one thing became overwhelmingly evident- ANYTHING would be better than the life I was living, and I finally sought help."

After a period of time in substance abuse treatment, she was able to begin the process of looking for work. In 2014, she began a career at Social Model Recovery Systems where her passion to help others on a journey to overcome addiction and mental health challenges was fostered. She states, "I have been given the opportunity to succeed, and it has continued to be my honor over the last eight (8) years to further the Social Model Recovery Systems Core Beliefs and mission."

Her career began at River Community, a residential program for individuals with mental health and substance use disorders. She states "I will never forget how challenging that job was! I learned how important the work I do is to the people I provided service to. There was a sweet spot on the drive away from that program; you can see the Los Angeles city skyline, which always reminds me of a time I was in jail looking out at the skyline from one of the few windows available. I feel such gratitude knowing my psych tech license is helping others and allowing me to be free from my own addiction."

Somer continues to participate in her own 12 step recovery, She was able to work through the probationary status of her license and regained her full privileges afforded an LPT. She has used the 12 Core Beliefs of Social Model Recovery Systems to help shape her professional life. Somer is quoted again saying, "There is something special about Social Model- not only what we do, but most importantly, how we do it! Our Core Beliefs have taught me so much and pushed me to become a better person and a better provider in service of others. The 12 steps of Narcotics Anonymous has helped to restore my personal and spiritual life, while the 12 Core Beliefs of SMRS have certainly shaped the recovery of my professional life. Social Model Core

beliefs taught me that I am worthy of being treated with dignity and respect, and that even painful life experiences can offer great value to individuals and communities. I have been able to be present with those we serve in both individual and group settings where we teach that mistakes and challenges are just learning experiences, and that they each have something to teach us. These encounters also taught me the exact same thing, and through them, I have been able to regain a part of myself. [Core belief 3 and Core belief 5]"

"I have been encouraged by great advocates here at Social Model which I have found in my supervisors and leadership. They have supported my personal process of change and growth and have nurtured my ability to positively affect change for self and those we serve. The encouragement I have received has allowed me to accomplish wonderful things for the agency and my personal life. I have had the opportunity to bring forth positive change for our organization in the development of program policy and practices leading to the licensure of Omni Center and Stepping Stones for IMS and WM services. Being an advocate for education, I have become an American Red Cross CPR/1st Aid/ AED trainer." [Core belief 9 and 10]

"I am the MAT Champion for the Agency. Through this process, I have been able to develop mutually beneficial relationships with community partners, on behalf of Social Model and myself, that have furthered the important mission of Social Model. I have been able to develop relationships with the 986 Pharmacy which actively supports our programs by offering specialty pharmacy supports and services agency-wide. Other community provider relations expanded access to physical health and medications for addiction treatment and support. It is the true spirit of our Core beliefs that built these relationships with community partners that benefits those we serve. I have been able to establish, foster, and maintain relationships with education partners which have provided interns and employment opportunities to new medication support staff at Social Model Recovery Systems. [Core belief 11 and 12]"

Somer was able to reestablish her relationship with her family. She worked hard to regain custody of her children.

"Early in recovery, I did not have custody of my children. I was living with my parents, and basically believed that I had ruined any chance I would have had to work and regain my Psych. Tech license. I forfeited the opportunity to be successful. As of today, I know that nothing is further from the truth. My self-acceptance and self-confidence are continually being restored. My family has not only been reunified, but we get to live in a way that far exceeds any vison I would have had for myself. I am hopeful for not only myself and my family, BUT... the 100's of individuals that we (Social Model) can serve each year. I am so blessed to have a career that inspires me to be the best that I can be. If you love your job, then you never work a day in your life. I look forward to continued service to this organization that helps make me the person I am today. My vision for the future is to build med support teams across all Social Model programs to improve our ability to truly care and support the 'whole person' we serve. I also want to create systems which better support residents and participants in overcoming barriers to accessing physical health, mental health, and medications to support ongoing recovery."

WHAT WE DO

PROGRAMS AT A GLANCE



Bimini

(Los Angeles)

Residential, serving men and women experiencing substance use disorders



Mariposa

(East Los Angeles)

Residential, serving women (and women with children) experiencing substance use disorders



Mid Valley Outpatient

(El Monte)

Outpatient, serving men and women experiencing substance use disorders



Omni Center

(El Monte)

Residential, serving men experiencing substance use disorders



Council on Alcoholism and Drug Dependence

(Pasadena)

Outpatient, serving men and women experiencing substance use and/or mental health issues



River Community

(Azusa)

Residential, serving men and women experiencing co-occurring disorders



River Community Covina

(Covina)

Outpatient, serving men and women experiencing co-occurring mental health and substance use disorders





(Covina)

Outpatient, serving men and women experiencing co-occurring mental health and substance use disorders



Stepping Stones

(Covina)

Residential, serving women (and women with children) experiencing substance use disorders



United Coalition East Prevention Project

(Los Angeles)

Challenging systemic conditions and social disparities through community collaborations



Royal Palms

(Los Angeles)

Serving men, women, LGBTQ+ community experiencing substance use disorder



ReFresh Spot

(Los Angeles)

Hygiene center for folks living on Skid Row



Community-based Housing

(East Los Angeles, El Monte, Covina, San Dimas)

Independent living for those in recovery

Our mission is to engage the most vulnerable populations to challenge systemic conditions and social disparities that threaten a healthy environment.

WHERE WE ARE

STATEMENT OF ACTIVITIES

REVENUE	Fiscal 2020	Fiscal 2021
KEVERIOL		
Government Contracts and Grants	\$20,089,112	\$20,191,788
Program Service Fees	\$1,029,691	\$771,217
Contributions	\$29,336	\$136,301
Rental Income	\$13,776	\$32,249
Interest Income	\$3,483	\$6,596
Other Income	\$19,361	\$32,598
Total Revenue	\$21,184,759	\$21,170,749

EXPENSES	Fiscal 2020	Fiscal 2021
Program Services	\$17,671,631	\$18,718,676
Support Services - Genl and Administrative	\$2,272,759	\$2,110,387
Total Expenses	\$19,944,390	\$20,829,063
Surplus	\$1,240,369	\$341,686

FINANCIAL POSITION	Fiscal 2020	Fiscal 2021
Assets	\$18,418,650	\$18,535,174
Liabilities	\$8,705,329	\$8,480,167
Net Assets	\$9,713,321	\$10,055,007

2,020 TOTAL SERVED IN OUR TREATMENT PROGRAMS

(NOT INCLUDING THE THOUSANDS IN OUR COMMUNTY PREVENTION PROGRAMS)

DEMOGRAPHICS OF PERSONS SERVED SEXUAL IDENTITY ETHNICITY GENDER IDENTITY 17.4% African Americans **36.3%** Female 4.9% Bisexual **61.0%** Male **1.0%** Native American 3.5% Gay **1.6%** Indian Asian **0.5%** Non-Binary 83.5% Heterosexual **0.5%** Hawaiian/Pacific Islander **1.5%** Trans Female 1.5% Lesbian 52.2% Hispanic **0.4%** Trans Male 0.5% Queer 7.7% Multi-Racial **0.3%** Other 6.0% Did not report **18.2%** White 1.5% Unknown/Other **AGES SERVED 9.4%** <25 **60.7%** 25-40 **16.3%** 41-50 **11.3%** 51-60 2.3% 61+











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