

Behavioral Health Redesign Forum



INDEPENDENT CARE HEALTH PLAN

Welcome

- **Thank you**
 - To you, our attendees
 - To our speakers
 - To the Zoo staff
 - To AV Milwaukee
 - To the *iCare* volunteers
- **Opening Comments**

Your Master of Ceremonies

- Introduction
- About Comment Cards

Behavioral Health Redesign Forum Comment Card

 INDEPENDENT CARE HEALTH PLAN

Do you have a question or observation for one of today's speakers?
Do you have a suggestion for a future SPAC forum?
Please fill out the information below and check which speaker(s) it is for.
Answers will be compiled and posted on www.iCareHealthPlan.org/Forum

Name: _____

Organization: _____

Email: _____

Please share your question or observation on today's SPAC and/or recommendation for a future forum:

Speaker(s):
Not every speaker may be available to answer questions, but we'll do our best to get you an answer.

<input type="checkbox"/> Holly O. Audley	<input type="checkbox"/> Shelah Adams	<input type="checkbox"/> Barbara Beckert
<input type="checkbox"/> Mike Lappen	<input type="checkbox"/> Joy R. Tapper	<input type="checkbox"/> Troney Small

Provider Service Excellence Award

- This award recognizes *iCare* contracted providers who have offered our members superior service that exemplifies *iCare*'s mission.
- Providers can be nominated by *iCare* employees or others; nominations are reviewed by a Provider Rewards Program committee.
- Winning providers receive:
 - » An award
 - » Positive publicity
 - » A \$500 bonus

Congratulations to....



Dr. Mark La Fave Shorehaven Behavioral Health



Holly O. Audley

Assistant Administrator of the Division of Care and Treatment Services
Wisconsin Department of Health Services

State-County Obligation and Collaboration

- Obligation (Wis. Stat. ch. 51)
 - Assure all people in need have access to care
 - Provide services in least restrictive setting
- Collaboration (Wis. Stat. ch. 51)
 - State: Distribute funding, provide oversight and policy guidance, operate the mental health institutes
 - County: Establish and administer programs

Data: Public Mental Health System

People Served

2016 – 65,499

2017 – 71,178

2018 – 73,085

Crisis Service Episodes

2016 – 29,263

2017 – 35,211

2018 – 37,446

WMHI Civil Admissions

2016 – 3,423

2017 – 3,364

2018 – 3,282

Source: DHS Data Dashboard
dhs.wisconsin.gov/stats/mental-health.htm

We are integrating equity through these pillars, as well as our work more broadly, to improve the health and well-being of all Wisconsinites

- **Pillar One:** Improving the integration of behavioral health into the health care system across Wisconsin
- **Pillar Two:** Improving our long-term care system and how we provide services for our most vulnerable populations

- Supporting the expansion of Comprehensive Community Services
- Providing grants to support regional collaboration in crisis services focused on youth
- Providing training opportunities to build workforce capacity
- Engaging county agencies in a learning collaborative to generate ideas on how to improve local services, and awarding grants for quality improvement projects

- Reviewing gaps in the behavioral health care system and strategies to address areas of opportunity for improved access and services
- Engaging a group of stakeholders to gauge the current state of Wisconsin's crisis intervention system – “Crisis Services Workgroup”
- Funding non-federal share for Medicaid crisis intervention
- Supporting youth crisis stabilization facilities

Mike Lappen

Administrator

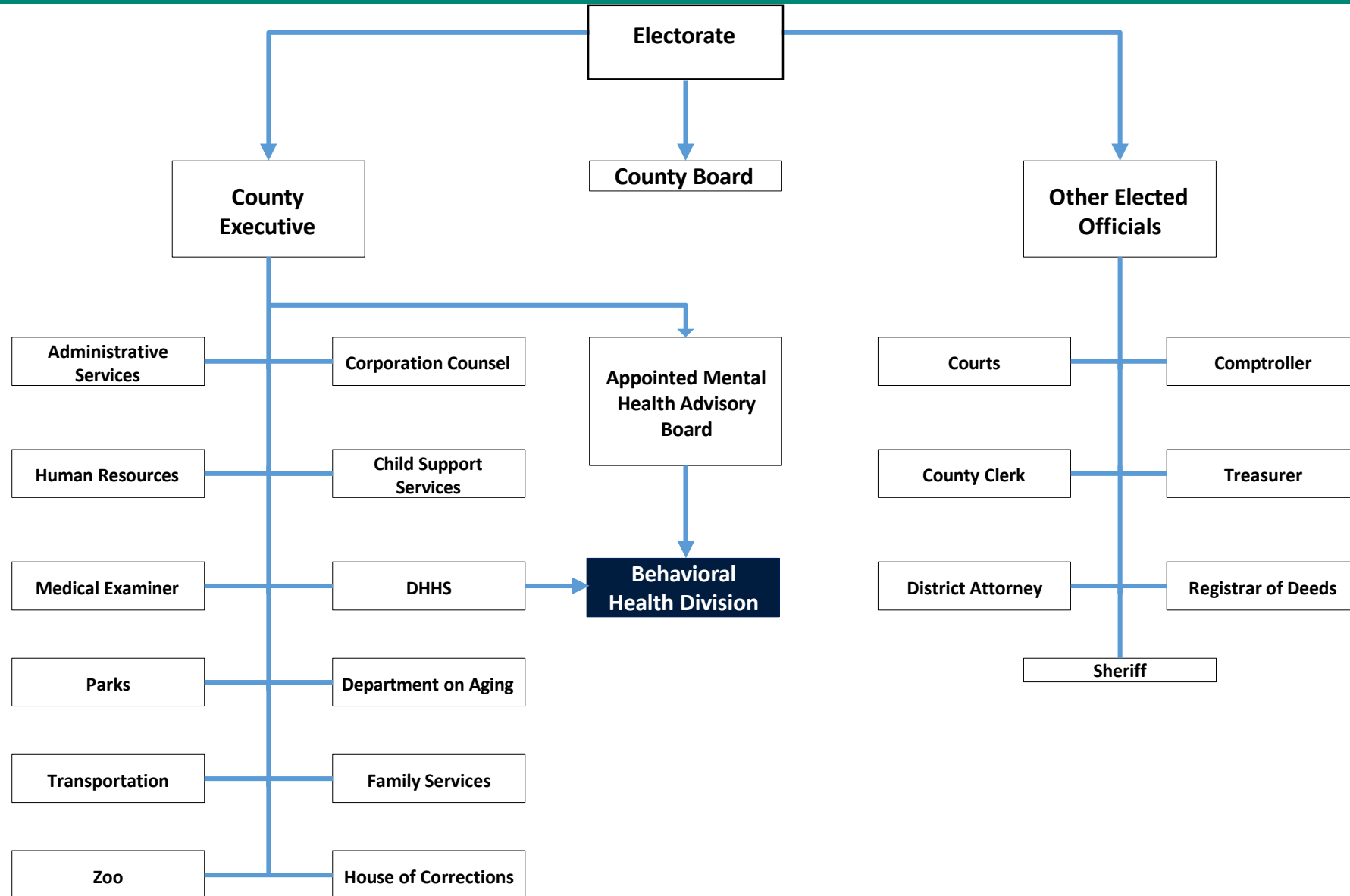
Milwaukee County Behavioral Health Division

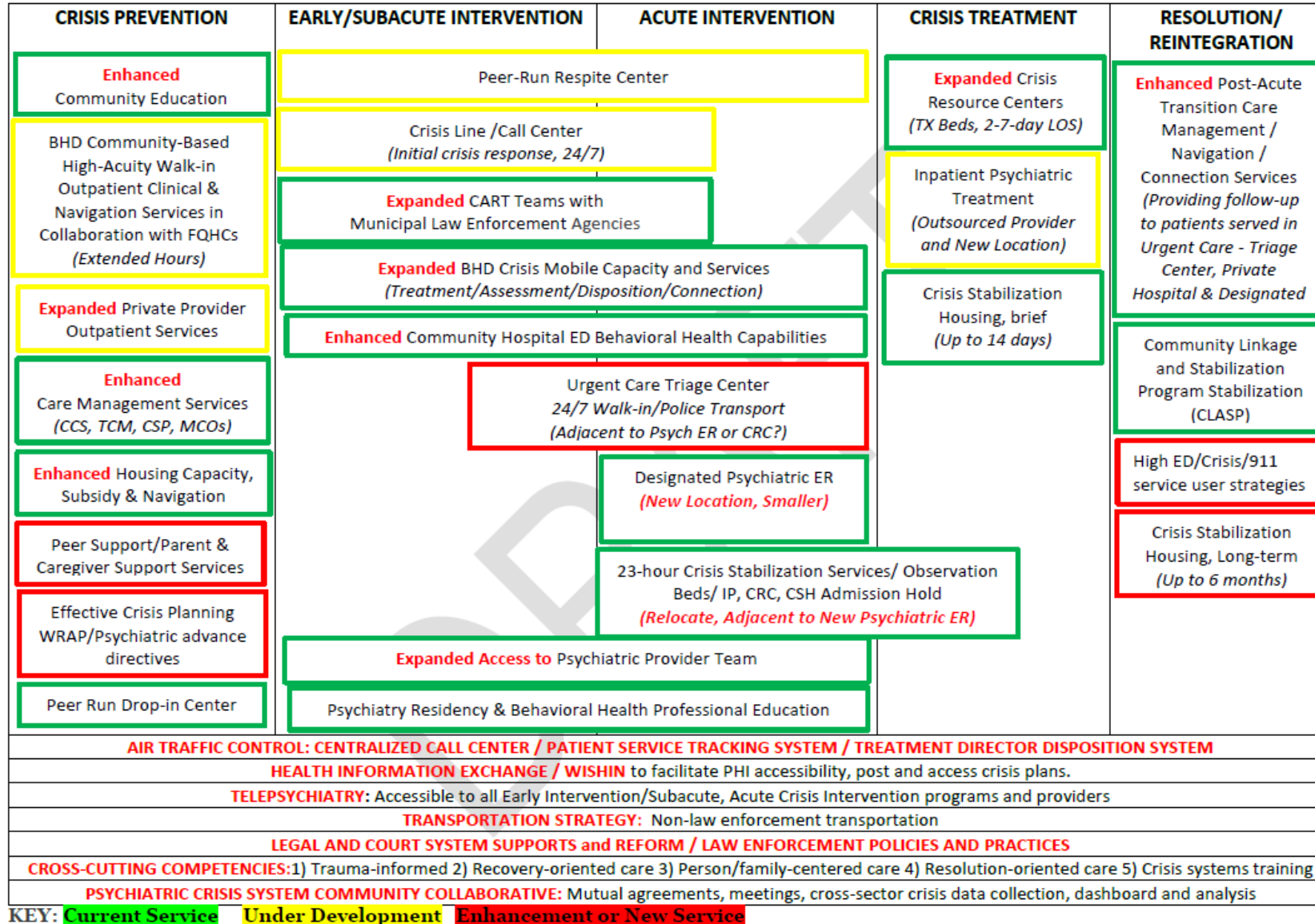


HSRI Recommendations 2010

1. Downsize and redistribute inpatient capacity.
2. Involve private health systems in a more active role.
3. Reorganize Crisis Services and expand alternatives.
4. Reduce Emergency Detentions.
5. Reorganize and expand community based services.
6. Promote a recovery oriented system through person-centered approaches and peer supports.
7. Enhance and emphasize housing supports.
8. Ensure cultural competency.
9. Ensure Trauma Informed Care.
10. Enhance quality assessment and improvement programs.

Milwaukee County Organizational Chart

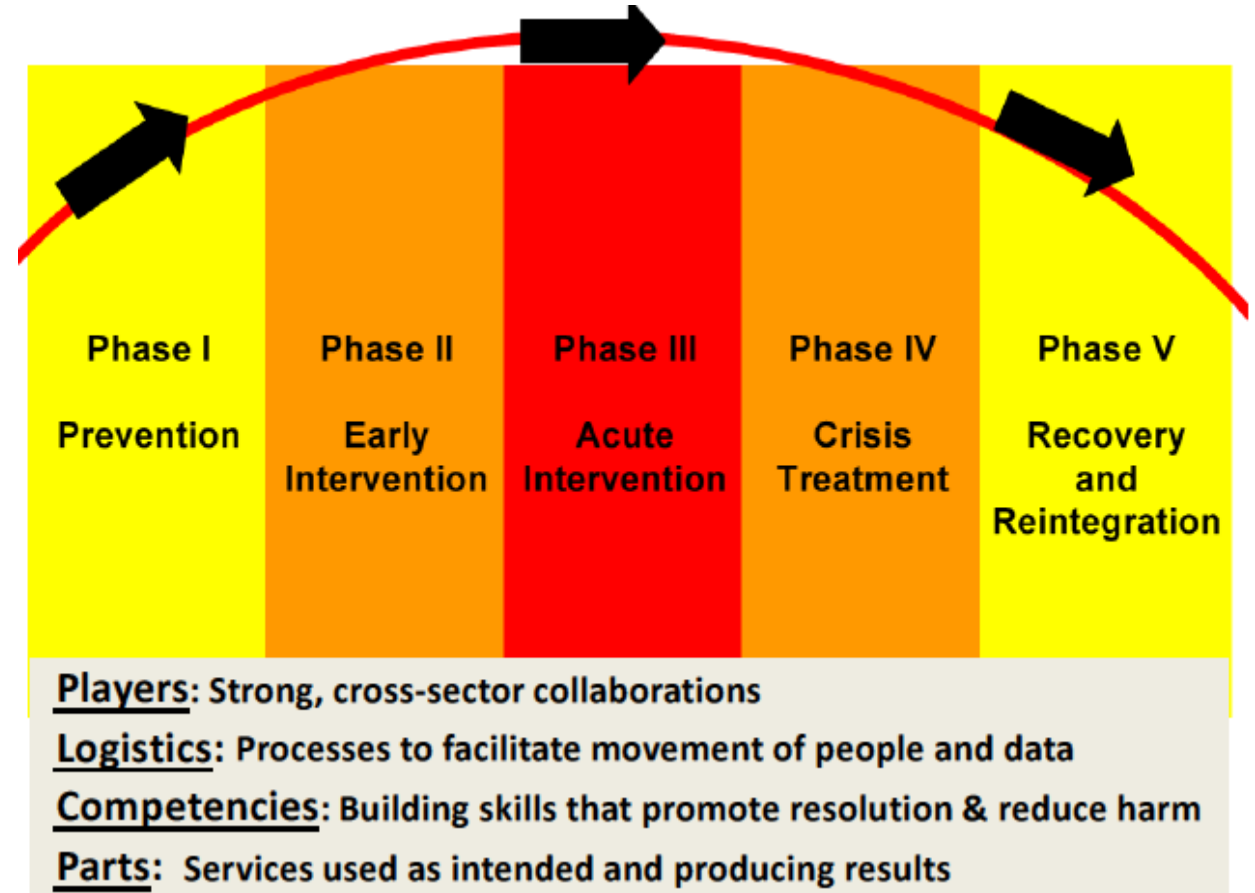




Phase 1 – High Level Recommendations

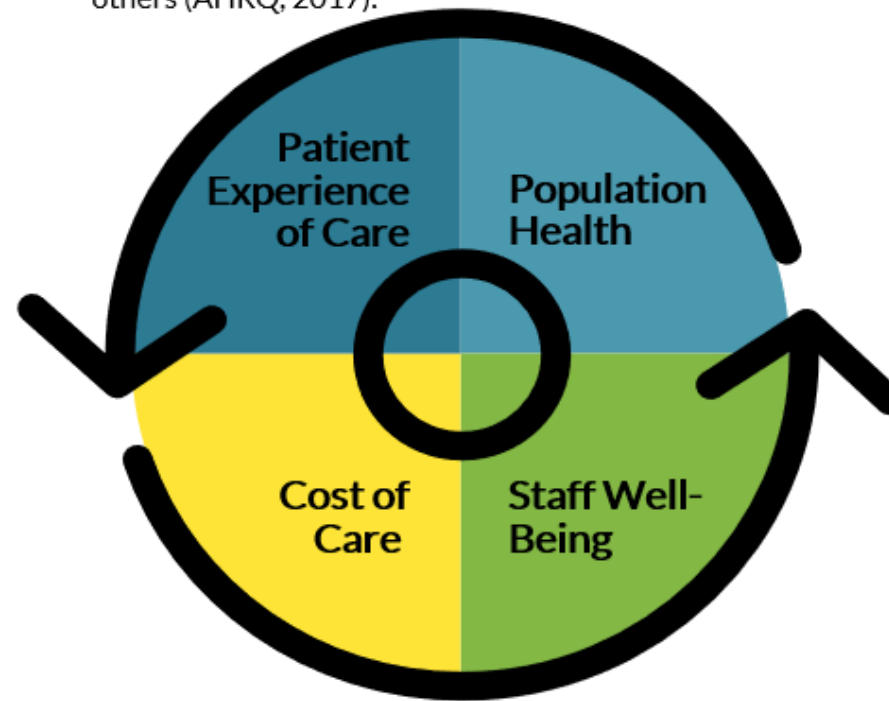
Psychiatric Crisis Redesign Plan – Recommendations:

- Continuum of Crisis Services – Enhancements, New Services and Cross-Cutting Supports
- Centralized, Joint Venture Psych ED w/ Observation



The patient experience of care encompasses the range of interactions that patients have with the healthcare system and includes several aspects of healthcare delivery, including satisfaction, timely appointments, and easy access to information, among others (AHRQ, 2017).

"Population health is defined as the health outcomes of a group of individuals, including the distribution of such outcomes within the group. " (Kindig and Stoddart, 2003)



The total cost of care a patient receives across all settings and services, often presented as cost per member of the population per month (Stiefel & Nolan, 2012).

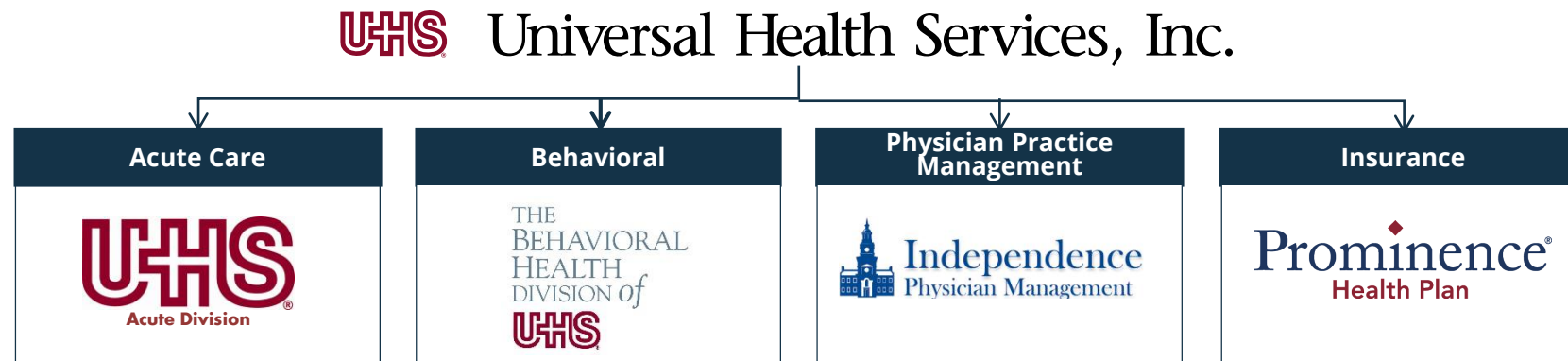
The quality of work life and the well being of healthcare professionals (Bodenheimer and Sinsky, 2014).

Shelah Adams

National Director of Behavioral Health Integration
Universal Health Services

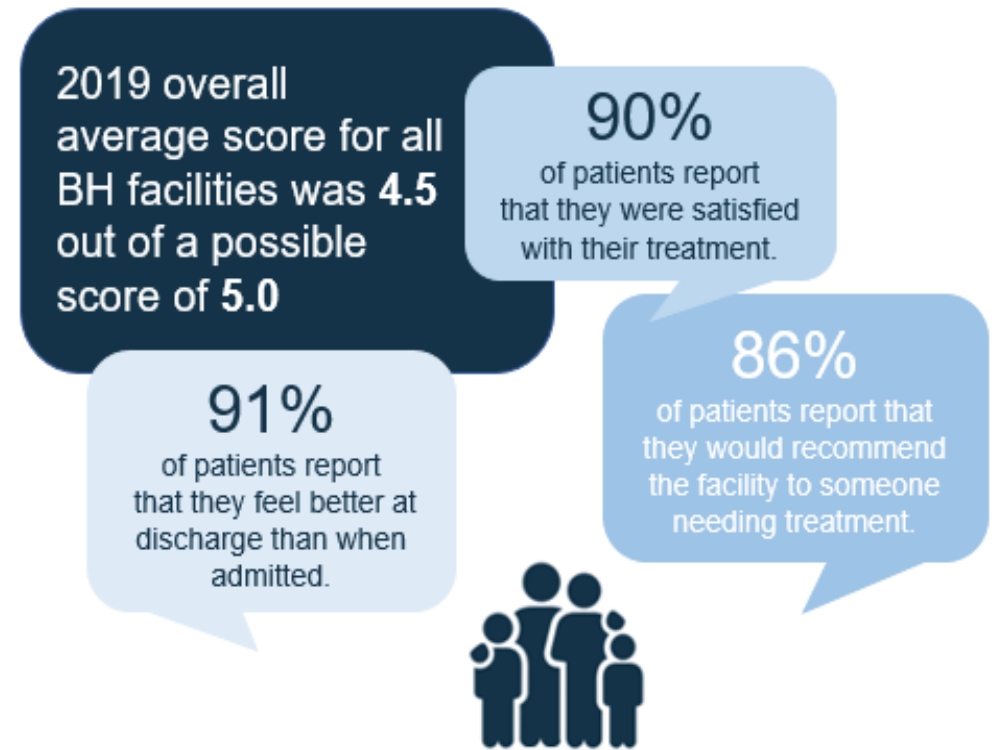
Universal Health Services (UHS) Overview

- Founded in 1979
- Owns or operates 27 acute care hospitals
- Over 300 behavioral health facilities
- Operates in 37 states, Washington D.C., Puerto Rico, and the U.K.
- Ranked No. 293 on the Fortune 500 list with \$11.4B revenue in 2018
- Diversified business model



UHS Outcomes (Performance, Data)

- On CMS quality metrics, our results continue to exceed the national average
- UHS facilities outperform the industry on core measures issued by TJC
- All UHS behavioral health and acute hospitals are fully accredited by TJC
- Robust data collection analysis and benchmarking through Mental Health Outcomes (MHO)



New Behavioral Health Hospital



Milwaukee Business Journal



[Universal Health Services plans \\$33 million mental health hospital in West Allis](#)

Published Jun 03, 2019 by Rich Kirchen

A major new competitor will enter metropolitan Milwaukee's mental health and addiction-treatment market through a proposed \$33 million hospital in West Allis that includes a contract with Milwaukee County for patients with acute mental health conditions. **Universal Health Services** plans to build a 120-bed behavioral health hospital at 1706 S. 68th St., the Pennsylvania-based

CBS 58 News



[Proposal submitted for new West Allis Behavioral Health Hospital](#)

Published Jun 03, 2019

Universal Health Services has submitted an offer to the City of West Allis Community Development Authority to buy land for a new behavioral health hospital. The hospital would be located near 68th and Mitchell. According to a press release, the hospital would address the

Milwaukee Journal Sentinel



[Universal Health Services plans 120-bed behavioral health hospital in West Allis](#)

Published Jun 03, 2019 by Guy Boulton

Universal Health Services is seeking approval to build a \$33 million behavioral health hospital in West Allis that would provide care to patients now treated at the Milwaukee County Behavioral Health Division's hospital in Wauwatosa as well as other patients. The company, which operates more than 200 behavioral health hospitals as well as acute-care hospitals, has contracted with the Behavioral Health Division to build a hospital that would replace the outdated hospital at the Mental Health Complex.

Wisconsin Health News



[NEW BEHAVIORAL HEALTH HOSPITAL PLANNED FOR WEST ALLIS](#)

Published Jun 03, 2019

Pennsylvania-based **Universal Health Services** has submitted an offer to the City of West Allis to buy a site for its 120-bed behavioral health hospital. The proposed \$33 million facility, set to open in 2021, will provide care for adolescents and adults. It'll have five 24-bed units, with three dedicated

Milwaukee Courier



[Universal Health Services Submits Proposal for New West Allis Behavioral Health Hospital](#)

Published Jun 08, 2019

Universal Health Services (NYSE: UHS) submitted an offer to the City of West Allis Community Development Authority to purchase the site at 1706 S. 68th St. for a new state-of-the-art behavioral health hospital. The hospital design and construction plans will be reviewed by the City Plan Commission and Common Council at a series of future public meetings.

Investing to Serve our Local Community

\$87.9 million

The proposed behavioral health hospital will have an estimated total impact on income of nearly **\$87.9 million** throughout all businesses and industries for Milwaukee-West Allis, Wisconsin.*

For every \$1 of income generated by the proposed behavioral health hospital, another estimated **\$0.35** is generated in other businesses and industries.

250-300 jobs

The proposed behavioral health hospital will employ over **250-300 jobs** including physicians, nurses, clinicians, mental health technicians and support staff.

\$31.2 million

The construction and operation of the proposed behavioral health hospital will boost personal consumption expenditures by more than an estimated **\$31.2 million**.

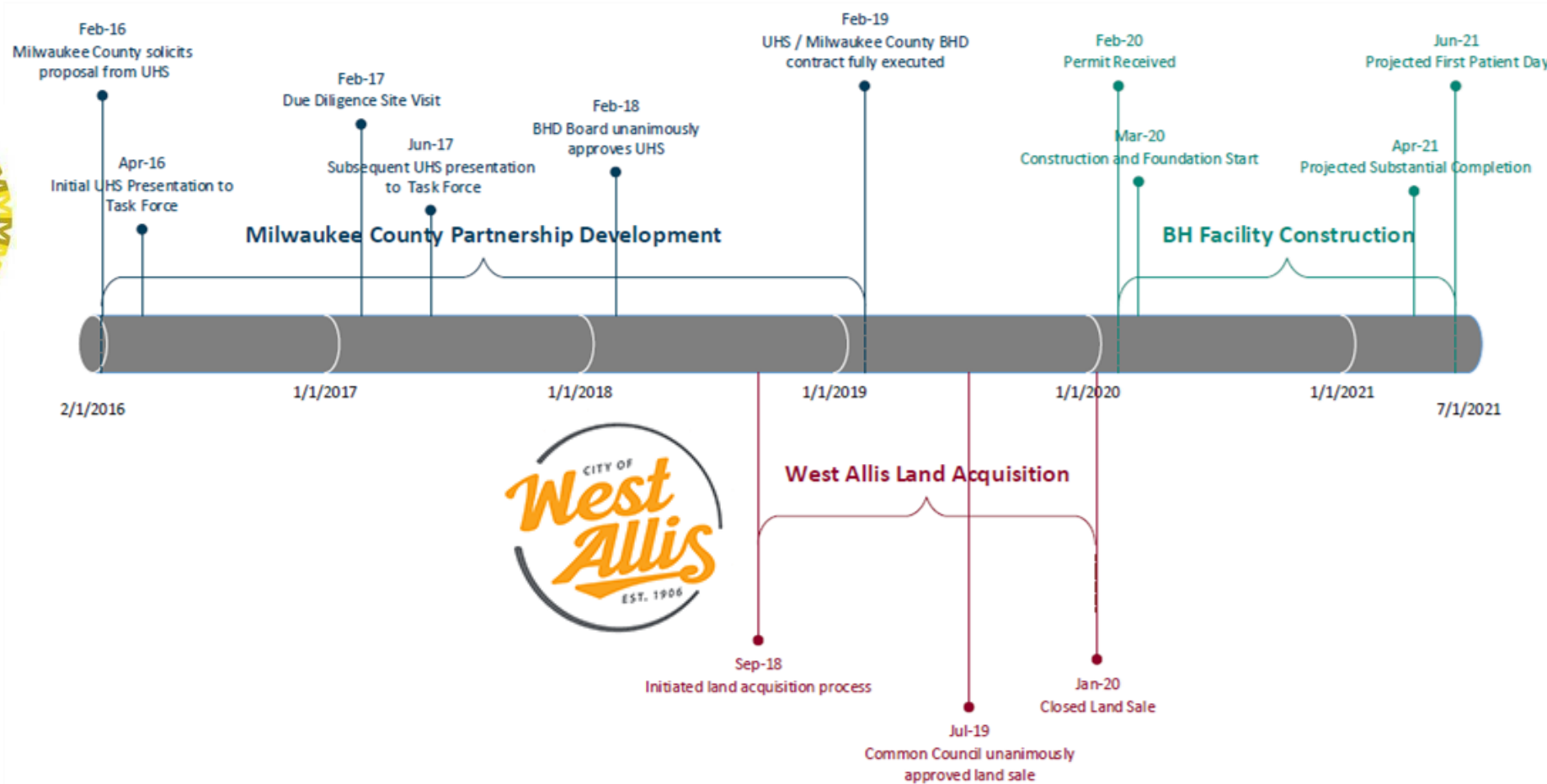
\$11.3 million

Annually, the proposed behavioral health hospital will generate more than an estimated **\$11.3 million** in compensation paid to hospital employees.

\$50.5 million

The proposed behavioral health hospital will contribute an estimated **\$50.5 million** to the Gross Area Product (GAP) of Milwaukee-West Allis.

Timeline

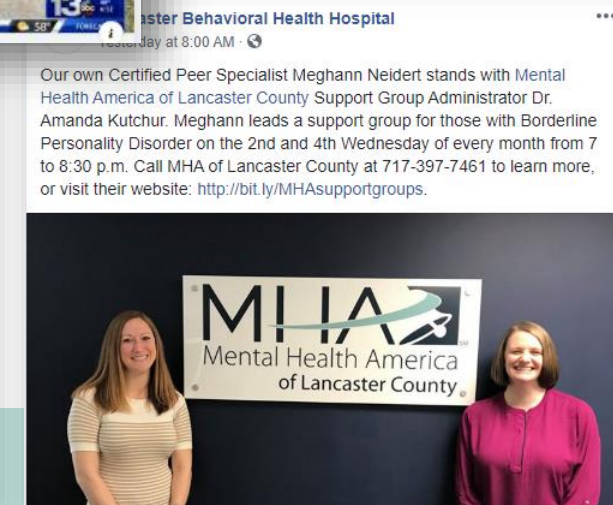
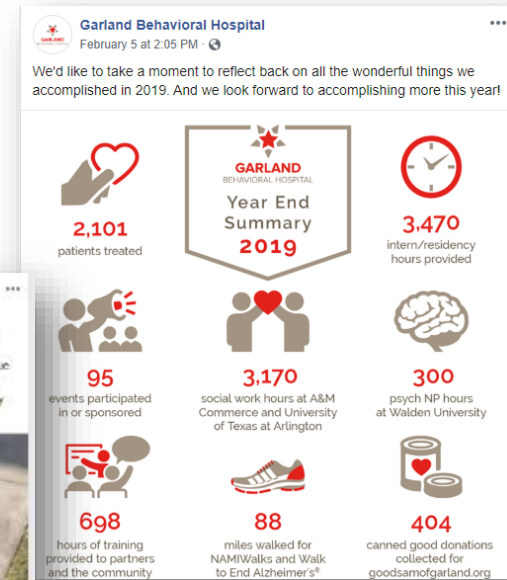


Local Opportunities and Goals

- Membership with the Milwaukee Health Care Partnership
- Full integration with Milwaukee County services
- Commitment to training and education
- On-site court available for surrounding counties
- Community involvement and partnerships



Members of the community advisory board members include Lieutenant David Khaleel, Plantation Police Department; Captain Lynette Fabrone, Fort Lauderdale Police Department; Manny Llano, Chief Executive Officer, Fort Lauderdale Behavioral Health Center; Dr. Vince Van Hasselt, Nova Southeastern University, Director, First Responder Research and Training Program; Lt. Colonel Joseph Benjamin, Director of Operations, Broward Sheriff's Office Corrections; and BSO District Fire Chief Kenneth Kronheim, LMHC.



Joy Tapper

Executive Director

Milwaukee Health Care Partnership



MILWAUKEE HEALTH CARE
—●—
PARTNERSHIP

**iCare Behavioral Health
Forum**

March 5, 2020

MILWAUKEE HEALTH CARE
—●—
PARTNERSHIP

Mission

Launched in 2007, the Milwaukee Health Care Partnership is a public/private consortium dedicated to ***improving health care access*** for low-income, underserved populations in Milwaukee County, with the aim of contributing to:

- ✓ improved health outcomes,
- ✓ promoting health equity
- ✓ and lowering the total cost of care.

Members

- 4 Milwaukee-based health systems and MCW
- 5 FQHC
- City/County/State Health Agencies

Affiliates

- Free Clinics, WHA, WPHCA, United Way....

Core Functions

1. Assess & build understanding of community health needs
2. Develop and implement a coordinated plan
3. Secure and align public and private funding and invest in high-impact initiatives
4. Monitor and report outcomes
5. Serve as a clearing house for new initiatives

	COVERAGE	ACCESS	CARE COORDINATION	COMMUNITY HEALTH
	GOAL: Secure and retain adequate and affordable health insurance	GOAL: Increase availability, accessibility and acceptability of health care services	GOAL: Enhance care coordination/navigation within and across the delivery system	GOAL: Identify and address targeted community health needs
SPONSOR	Insurance Outreach and Enrollment <ul style="list-style-type: none"> Increase Enrollment in Medicaid, Marketplace and Other Insurance Options and improve Health Insurance Literacy * (MKE/ CWI) Support Local Implementation of Medicaid Eligibility and Enrollment Reforms including the 1115 Waiver (MKEN/CWI/DHS) 	Primary Care Capacity Building <ul style="list-style-type: none"> Support Implementation of FQHC Capacity Building Plan Priorities * (WPHCA) Continue to Enhance Select Free and Charitable Clinic Capabilities (FC3) Support Health System Medicaid Access Strategies Specialty Access <ul style="list-style-type: none"> Continuously Improve the Specialty Access for Uninsured Program * Behavioral Health Access <ul style="list-style-type: none"> Improve Access and Navigation to Inpatient and Outpatient Mental Health and Addiction Services * (BHD) Support Implementation of Key Elements of the Psychiatric Crisis Services Redesign (BHD) 	ED Care Coordination <ul style="list-style-type: none"> Continuously Improve Cross-System ED Diversion and Transition Care Management with a Focus on Frequent Users * (MCOs/ MHD) Patient Navigation <ul style="list-style-type: none"> Improve Health and Social Service Referral and Patient Engagement Processes and Tools * (2-1-1/CBOs) Implement and Evaluate Housing Navigation Services for Homeless Patients * (MCHD) Health Information Exchange <ul style="list-style-type: none"> Optimize EHR and HIE Capabilities (WISHIN/ P-PING/MYHD) 	Community Health Needs Assessment <ul style="list-style-type: none"> Review Triennial CHNA Processes for Improvement Promote and Continuously Improve Health Compass Milwaukee Analytics and Utilization (CUPH) Community Investments <ul style="list-style-type: none"> Continuously Improve Shared Community Investment Fund (SCIF) and Health Improvement Fund (HIF) Strategic Alignment and Accountability (UWGMWC)
PARTICIPATE	Medicaid Policy /Program Reform <ul style="list-style-type: none"> Inform Medicaid Policy and Program Reforms (WHA/WPHCA) Support Local Implementation of DHS Policy and Regulatory Changes (DHS) 	Oral Health Access <ul style="list-style-type: none"> Continue to Improve Oral Health Access and Service Connections * (CHA) Medication Access <ul style="list-style-type: none"> Support Drug Assistant and other Medication / Vaccine Access programs (FQHCs/FC3/MHD) Urgent Care <ul style="list-style-type: none"> Monitor and Promote Walk-In and Urgent Care Service Options (DHS/MCOs) 	Medical Home Care Coordination <ul style="list-style-type: none"> Promote and Continuously Improve Primary Care -Based Health and Social Resource Navigation (MCOs) 	Violence Prevention <ul style="list-style-type: none"> Implement Health Care Sector Violence Prevention Priorities * (OVP) Infant Mortality Reduction <ul style="list-style-type: none"> Identify and Implement Health Care Sector Access Strategies * (MHD)
MONITOR	Payment Reform <ul style="list-style-type: none"> Monitor and Inform Medicaid Payment and Managed Care Reforms (WHA/WPHCA) Marketplace Reform <ul style="list-style-type: none"> Track Marketplace and Other Private Health Insurance Reforms (WHA/WPHCA) 	Workforce Development <ul style="list-style-type: none"> Monitor and Inform Safety-Net Recruitment and Retention Strategies 	Medical Transport <ul style="list-style-type: none"> Monitor Medical Transportation Policies and Practices (DHS) 	Public Health Improvement <ul style="list-style-type: none"> Support Immunization and Other Milwaukee Public Health Department Priorities (MHD) Place-Based Health Improvement <ul style="list-style-type: none"> Monitor Neighborhood-Based Health and Economic Improvement Efforts (CDA)

2019 Community Health Needs Assessment (CHNA) Top 5 Health Issues

Community Survey Phone survey	Stakeholders Key informants and focus groups
1 Chronic Diseases	1 Mental Health
2 Substance Use	2 Access to Health Care
3 Access to Health Care	3 Violence
4 Infectious Disease	4 Substance Use
5 Violence or Crime	5 Nutrition and Healthy Food

Health Compass Milwaukee

- 260+ indicators / health outcomes and factors, comparative data

MHCP Behavioral Health Provider Work Group

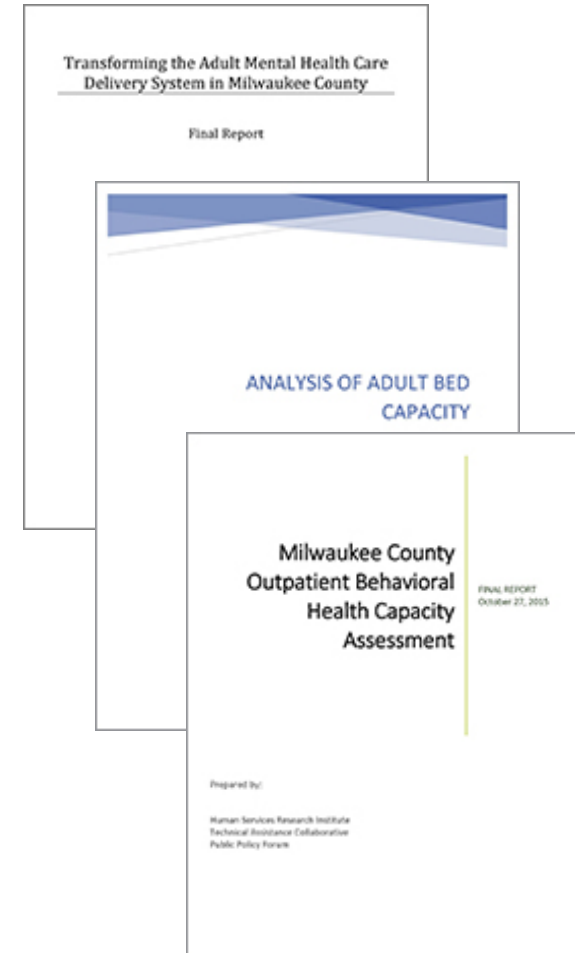
Initiated in 2007

- Established BHD-Health System Patient Transfer Agreements * 2008

Co-Sponsored Multiple Studies & Planning Efforts

- Milwaukee County Redesign Study * 2010
- IP Capacity Analysis * 2014
- OP Capacity Analysis * 2015
- Psychiatric Crisis Redesign * 2018-2019
- Child/Adolescent Crisis Services * 2020

Collectively Invested +\$4 Million over-and-above Individual Member Investments



Shared Behavioral Health Access Priorities

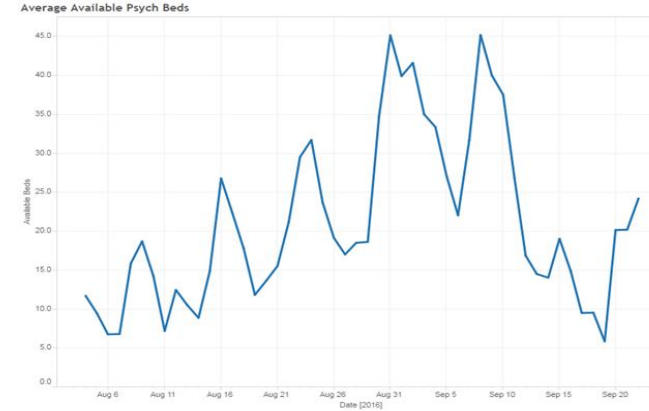
Provider strategies to improve access & coordination of care, with a focus on low-income and vulnerable populations

1. Ensure Access to Inpatient Services
2. Expand Outpatient Capacity
3. Improve the Psychiatric Crisis Delivery System
4. Enhance Service Navigation
5. Provide Input to Public Policy and Regulatory Reforms
6. Support Workforce Development

Access to Inpatient Care

1. Monitor and Promote Private Health System Inpatient Capacity

- WHAIC Bed Tracker



2. Support Coordination of Adult and Youth Inpatient Services with BHD and Universal

- *ED and inpatient transfer and medical clearance agreements*
- *WISHIN participation*
- *BHD bed “guarantee” / private provider MOUs*
- *Medical education partnerships*
- *Regional / multi-county partnerships*

3. Concurrently Monitor BHD and State Inpatient Capacity

Expand Outpatient Services

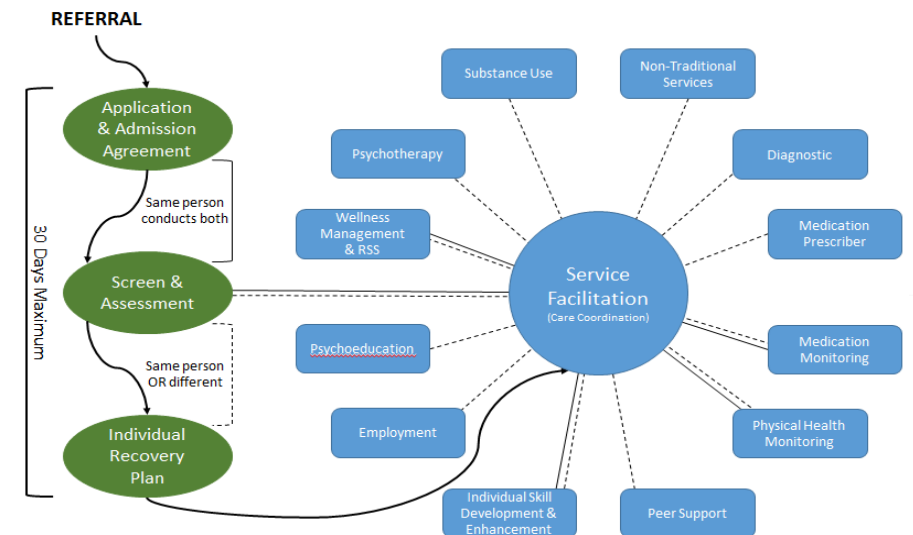
1. Continue to Promote Integrated Primary Care/Behavioral Health

- Co-located PC and BH programs
- PC-Based BH consultation
- Intra System Telepsychiatry

2. Support Shared Teleconsultation Services

(e.g.) CPCP, Periscope/Perinatal, Geriatric, Addiction, Crisis

3. Promote Participation and Enrollment in Comprehensive Community Services (CCS)



Psychiatric Crisis Delivery System Redesign

1. Service Enhancements

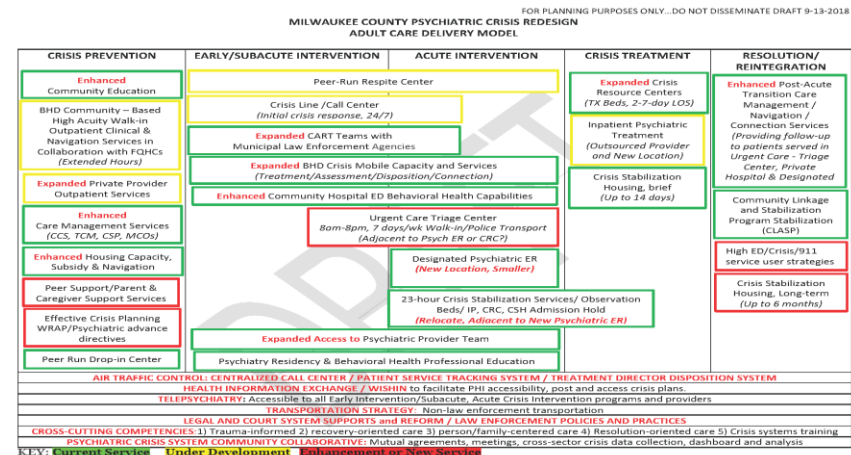
- Crisis Resource Center (CRC) Expansion and Enhancements
- Mobile Crisis/ CART Continuous Improvement
- “Team Connect” / Transition Care Mgmt. and Follow-Up
- Private Hospital ED Capabilities

2. New Services & Supports

- BHD- FQHC Access Centers
- Telehealth & Other HIT
- Air Traffic Control
- Transportation

3. Psychiatric ER Due Diligence

4. Child/Adolescent Delivery Model



Enhance Service Navigation / Care Coordination

1. Strengthen Information and Referral Capabilities

- For Consumers
- For Providers and Mobilizers

2. Improve Health Information Exchange

- Leveraging Epic, WISHIN, Patient Ping, Health and Social Information Interoperability

3. Embed Peer Supports Services

4. Rationalize Care Coordination “System”

- Multiple Care Coordination Entities / Unknown to One Another
- “Coordinating Care Coordinators”

Public Policy and Workforce Development

Policy Priorities

- ✓ Increase Medicaid Reimbursement
- ✓ Improve Telepsychiatry/Teleconsultation Regulation
- School Mental Health
- Update DHS 35 and 75 Rules/Regulations
- Promote Housing Navigation and Subsidies

Workforce Development Priorities

- ✓ Pipeline Programs
- ✓ Increase Clinical Practicums for all Disciplines
- ✓ Provider Trauma Education

Immediate Opportunities for Improvement

Service Expansion

- *Build Outpatient Capacity**
- Implement Community- Based *Crisis Services*
- Complete *Psychiatric ED Due Diligence* and Implement other Psych Crisis Redesign Elements
- *Embed Peer Services*

System Improvements

- *Workforce Development**
- *Medicaid Payment, Access and Accountability**
- Behavioral Health Service *Navigation*
- Exchange of *Health Information*
- Align *Care Coordination* Infrastructure

Troney Small

Family Navigator
Next Step Clinic

Next Step Developmental and Mental Health Clinic:

- **Amy Van Hecke, Marquette University, Executive Co-Director**
 - **Leah Jepson, Mental Health America of WI, Executive Co-Director**
 - **Amy Leventhal, PhD, Next Step Director of Clinical Services**
 - **Troney Small, Next Step Clinic Family Navigator**
 - **Ida Winters, Next Step Clinic Family Navigator**
-
- *A partnership between Marquette University, Mental Health America of WI, Milwaukee Coalition for Children's Mental Health, Next Door Foundation, True Love Baptist Church, MIRACLE Network, MATC, United Way/Milwaukee Succeeds, UWM, Alverno College, MCW, and the Greater Milwaukee Foundation.*



Background on Developmental and Mental Health Disparities



How common are developmental and mental health challenges in children?

- Developmental Disorders (Autism):
 - 1 in 59 children has Autism
 - Almost all families had concerns about their children by 3 yrs. of age; but **only 47%** of the children were able to be diagnosed at that time. The other half were diagnosed much later.
- Mental Health Disorders:
 - 1 in 5 kids has a diagnosed mental health disorder
- Both issues are worsened by poverty and toxic stress

Who Gets Help in WI?

- Parents of Black children report concerns about their child's development, but are less likely to have a regular doctor or receive developmental screening
- About 1/3 of children have had no comprehensive evaluation by 36 months of age, with children of color more likely to be missing out.
- Black and Hispanic children identified later, if at all
 - Especially impacts low-income children of color
- Children of color more likely to be misdiagnosed as intellectual disability or behavior/conduct problems, than autism or mental health disorders



Barriers

- Coping with many, complex challenges
- Lack of access to knowledge or education about these issues- who has the “inside info” to get help
- Lack of access to professionals who can diagnose; Lack of access to treatments
- Not enough clinicians of color who understand the community
- Bias and misdiagnosis; Dismissal of concerns
- School-to-prison pipelines rather than developmental or mental health support
- Poverty; discrimination and institutionalized racism
- Stigma and misinformation, mistrust of systems of care



Sharing Families Voice

Coalition for Children's Mental Health

- A cross-systems group of professionals, parents, and advocates based out of Mental Health America of WI
- Working to improve the mental health of children 0 – 8 in Milwaukee (and their families!)
- Developing partnerships and collaboratively seeking solutions to barriers to identification and care
- Advocating for the voices of lived experience in all that we do.

- www.mkekids.org



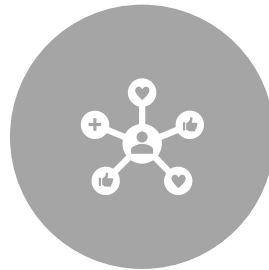
Helping with the Maze



Role of Family Navigators



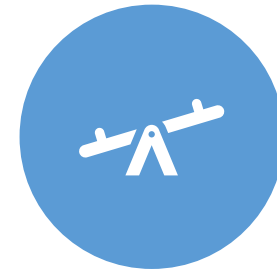
HELPING FAMILIES ACCESS AUTISM
AND MENTAL HEALTH SCREENING
FOR THEIR CHILD



ENSURING THAT FAMILIES KNOW
ABOUT THE MEDICAL PATHWAY
AND IN-HOME SERVICES FOR
AUTISM



HELPING FAMILIES ACCESS THE
MEDICAL EVALUATION/DIAGNOSIS
OF AUTISM OR MENTAL HEALTH
THERAPIES FOR THEIR CHILD



ASSISTING FAMILIES IN GETTING
SERVICES FOR THEIR CHILD AND
FAMILY, IN SCHOOL AND AT-HOME

Next Step Clinic

- <https://vimeo.com/312993240/3e3cbda6d4>
 - Located within a trusted community partner: Next Door (29th and Meinecke)
 - A Family Advisory Board will steer clinic development, build trust, and empower families
 - Family Navigation services
 - Screening and diagnosis services:
 - Autism
 - Mental health challenges
 - Therapy services:
 - Family-based therapies for trauma-related mental health challenges of children and parents
- Train clinicians of the future in both developmental/Autism care and trauma informed therapies/healing-centered engagement via practicum experience

Barbara Beckert

Director of the Milwaukee Office

Director of External Advocacy for Southeastern Wisconsin

Disability Rights Wisconsin

Where have we been?

- Inpatient/institutional services
- Criminal justice involved youth and adults
- Crisis services
- Community services
- Prevention
- Social determinants (benefits counselling, housing, transportation, employment)
- Self determination/ peer directed/ peer support
- Racial and ethnic disparities

Where are we going?

- Changing county role – oversight and quality assurance
- Invest savings to significantly expand community services
- Services embedded w/ community partners and in the jail/HOC
- Prevention and diversion from inpatient, crisis, & justice system
- Drop-off center w/respite beds & resources for justice involved
- Address benefits counselling, housing, employment, transportation
- Support from peers/ navigators
- Nothing about us without us: self determination & empowerment
- Racial, ethnic, and disability equity

How do we get there? Policy opportunities

- County opportunities
- Leverage entitlements: Medicaid, CCS, CLTS, Family Care & IRIS
- Suspend not terminate Medicaid coverage for incarcerated enrollees
- Medicaid expansion
- Expand CPCP statewide and broaden the model
- State investment in regional crisis centers & peer respite
- Medicaid coverage of housing related services
- Expand CIT / CIP training
- Pilot projects to address racial, ethnic and disability equity
- Fund family / peer navigators

Questions & Answers

Speakers will respond to comment cards submitted

Watch Your Email

- You will receive an email to the email address you used to register
- It will include a link to www.iCareHealthPlan.org/forum to:
 - View a video recording of the Forum
 - Download presentations and other materials
 - View the registrant list
 - Review answers to questions submitted to Forum speakers
 - Offer feedback and suggestions via an online evaluation



Dr. Anita Holloway

Market Vice President and Medical Officer
Humana

Committee Chair
iCare Stakeholder Planning Committee

Closing Commentary

Thank You For Coming

The Behavioral Health Redesign Forum was made possible by:

- Pam Alarcon Schwalbach ● Sarah Anderson ● Marlena Anderson
- Nancy Argubright ● Jessica Barrera ● Lindsey Bartelt ● Dr. Mary Ellen Benzik
- Heather Block ● Marigsa Carmona ● Darlean Foster ● Shikeda Gates
- Leigh Hayden ● Kirk Heminger ● Lisa Holden ● Amy Hoyt ● Marlon Jackson
- LaCresha Jackson ● Bill Jensen ● Sharon Jordan ● Sandy Lipinski
- Dr. Tom Lutzow ● Kerry Marley ● Grace Mroczynski ● Kris Peterka
- Erin Portik ● Rebecca Rossi ● Anita Webb
- Josie Weithaus ● Jarvis West ● Tarsha Wiggins

*Extra special thank you to **Rebecca Stanis** and **Candice Scheibel***