

Borinquen Medical Centers of Miami-Dade

T.O.P.W.A. Program

ACCOMPLISHMENTS

~OCTOBER 2010 – DECEMBER 2015~



- The T.O.P.W.A. program launched in Borinquen on October 2010.
- Conducted **3,021** pregnancy tests and **3,138** HIV tests.
- Successfully enrolled **2,083** clients.
- Prenatal services provided to **112** HIV infected women.
- Outreach conducted in Overtown, Liberty City, Wynwood, Hialeah, Flagler, Miami Beach, Biscayne and Little Haiti, Miami Gardens, North Miami, Homestead, Kendall, Sweetwater **4 to 5** times a week.
- Transportation provided to UM for (TP2) patients on a weekly basis.

WHAT IS T.O.P.W.A?

Targeted Outreach for Pregnant Women Act

The goal of T.O.P.W.A. is to prevent pregnant women and their babies from contracting HIV.



WHO IS ELIGIBLE FOR T.O.PW.A.?

- * All women who are pregnant and do not have prenatal care
- * Women who are pregnant and HIV-infected
- * Women who are pregnant and using drugs and alcohol
- * Any pregnant woman regardless of their INS Status



WHAT SERVICES DOES T.O.P.W.A. PROVIDE?

- * Assistance finding prenatal care
- * Linkage to substance abuse programs
- * Pregnancy Testing
- * HIV testing and counseling
- * Family planning services

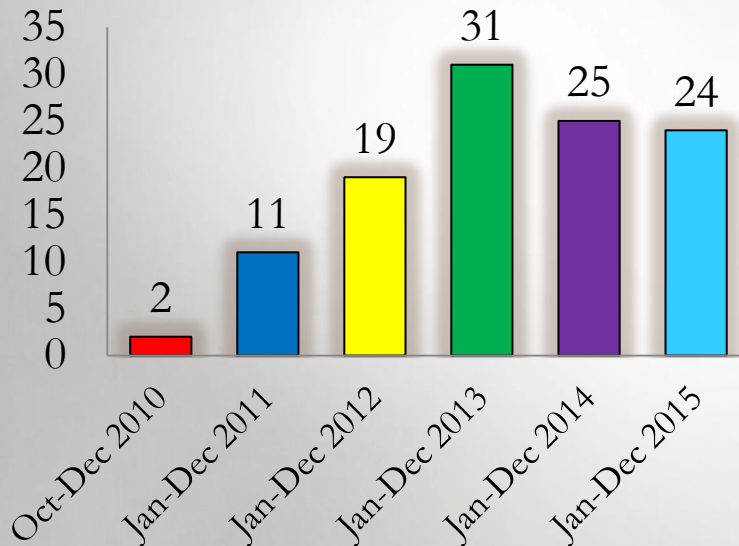


THE BENEFITS OF T.O.P.W.A. FOR HIV-INFECTED WOMEN:

- * Assistance in applying for Medicaid
- * Free pregnancy and HIV testing
- * Help link to prenatal care
- * Transportation to OB appointments
- * Walmart gift cards
- * Assistance with screening for Healthy Start, WIC, and other social service programs
- * Baby showers and gifts
- * A Healthy Baby!

~T.O.P.W.A. ACCOMPLISHMENTS~

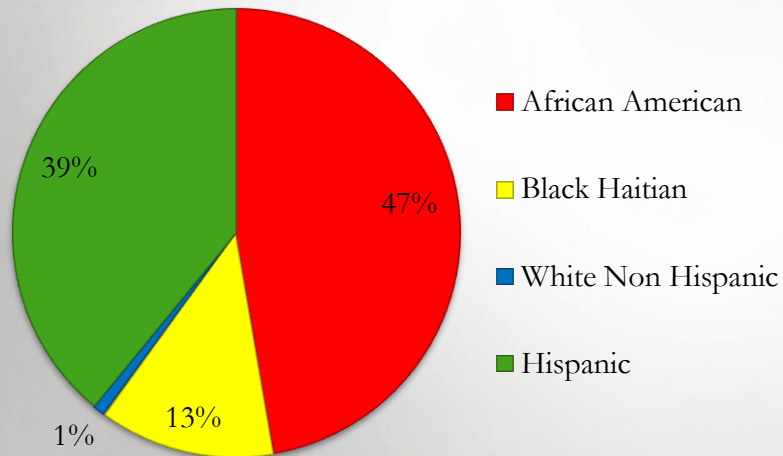
TP2 Enrollments



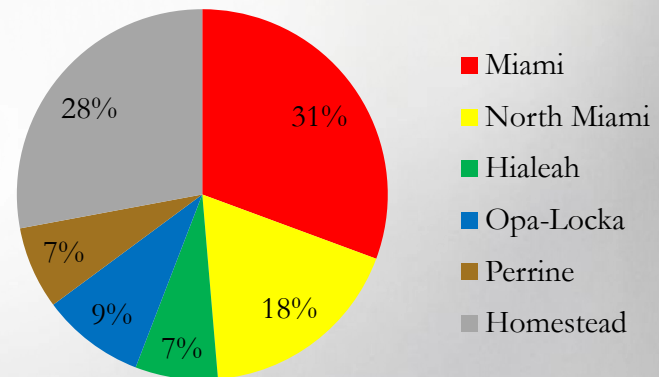
TP2 enrollments have increased since the inception of our program. Many of our TP2 referrals are from the University of Miami and other Community Organizations.

~T.O.P.W.A. STATISTICS~

TP2 Moms by Ethnicity



TP2 Moms by City



~T.O.P.W.A. BABY SHOWERS~



~HEALTH FAIR & ACTIVITIES~





HOW TO REFER A
PREGNANT WOMEN
TO T.O.P.W.A.



Borinquen Medical Centers of Miami-Dade
 3601 Federal Highway
 Miami, Florida 33137
 Website: www.borinquenhealth.org
 Email: BHCCTOPWA@borinquenhealth.org
 Fax: (786) 476-2827

T.O.P.W.A. Referral Form

Patient Contact Information:

- Patient Name
- D.O.B
- Age
- Address
- Contact Information

Patient Demographics:

- Sexual Orientation
- Race/ Ethnicity
- Language
- Physical Identifiers
- E.D.D
- Number of Pregnancies

Reason for Referral:

- At risk: (Check all that apply)
- Reason for referral (Explain)

Referring Agency:

- Referring Agency Information & Contact Name
- If HIV-infected; Western blot needed

Please fax referral forms to:
 (786) 476-2827 or private email:
BHCCTOPWA@Borinquenhealth.org

Patient Contact Information:

Patient Name: _____ DOB: ____/____/____ Age: _____
 (Please Print clearly)

Address:
 (If applicable, please provide the name of apartment complex)

Please describe what stores, schools, hospitals & etc are nearby the address:

Apt: _____ City: _____ County: _____ State: _____ Zip: _____

Patient Demographics:

Sexual Orientation: _____

Race/Ethnicity: _____

Languages: _____

Physical Identifiers: _____

EDD or Number of weeks: _____

Is this the patient's first pregnancy: ____Yes ____No

Patient contact information:

Home Phone : (____) _____-

Cell Phone: (____) _____-

Email Address (If available): _____

Additional Contact information:

Emergency Contact: _____

Relation to Patient: _____

Phone:
 (____) _____-

Reason For Referral:

At Risk: (Check all that apply)

- ☐ Adolescent ☐ Pregnant Woman
☐ New Diagnoses ☐ Known Substance Abuse

Other (Please Specify) : _____

• Is the patient lost-to-care ____Yes ____No

• Does the patient need transportation assistance: ____Yes ____No

• Reason for referral: _____

Referring Agency:

(Please fill in the information below)

Referral Date: _____

Agency Name: _____

Agency Address: _____

Contact Name: _____

Office number: _____

Fax number: _____

I have attached the following documents
 with the referral:
 (Check all that apply)

- ☐ Western Blot
☐ Ryan White certified letter to the
 University of Miami (Specialty Care)
☐ Other: _____

T.O.P.W.A. Department Contact Information:

Naylise (305) 576-6611 Ext: 1415 or (786) 715-5770 • Angelene (305) 576-6611 Ext: 1542 or (786) 715-8675 •
 Lucindy (305) 576-6611 Ext: 1518 or (786) 715-9356

Source of recruitment: _____ Received by T.O.P.W.A. Specialist: _____ Date: _____

BORINQUEN

MEDICAL CENTERS
OF MIAMI-DADE



3601 Federal Highway
Miami, Florida 33137

Web: www.borinquenhealth.org

Email: BHCCTOPWA@Borinquenhealth.org

T.O.P.W.A.

(Targeted Outreach for Pregnant Women Act)

We can assist you with the following services for free:

- Pregnancy Testing
 - **Monday - Friday (08:00 AM—3:00 PM)**
- Assistance with Food Stamps and Medicaid
- Prenatal and Medical Health Care Services
- HIV/AIDS & STD Counseling and Testing
 - **Monday - Wednesday (08:00 AM—4:30 PM)**
 - **Thursday (08:00 AM—5:30 PM)**
 - **Friday (08:00 AM—3:30 PM)**
- Transportation Assistance
- Case Management
- Healthy Start Services
- Child Birth Classes
- Parenting Classes
- Baby Showers

For more information on the TOPWA Program please call
TOPWA Specialists at: (305) 576-6611

Naylise: Office xtn 1415 or Cell (786) 715-5770

Angelene: Office xtn 1542 or Cell (786) 715-8675

Lucindy: Office xtn 1518 or Cell (786) 715-9356

Fax: (786) 476-2827

We speak English, Spanish and Creole.

~CONTACT INFORMATION~



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labraham@borinquenhealth.org

Designed by: Naylise G. Sifonte



T.O.P.W.A. PRESENTATIONS

If you would like the T.O.P.W.A. program to do a presentation in your organization or know of an organization that would benefit from the program, please contact the T.O.P.W.A. Special Programs Coordinator:

Claudia Polastri

Borinquen Medical Centers of Miami Dade

305-576-6611, ext. 1414

cpolastri@Borinquenhealth.org