MESSAGE FROM THE PRESIDENT

I was proud to become President of Mildmay in November 2019 and in the brief time since then, the charity - as indeed the entire world has been through an unprecedented, challenging time.

Mildmay is no stranger to difficulties and indeed throughout our history, it has overcome obstacles time and again. I am pleased to say that despite an extremely challenging year, the charity is not only still here, but continuing to treat patients who are extremely unwell with complex Neuro-HIV.

As we look to the future, it is clear that we will be treating a new group of patients who are in dire need of the expertise and specialist services of our hospital. London’s homeless and rough sleepers have always found it challenging to receive appropriate hospital care and many are discharged far too soon to free up much-needed hospital beds. This new work will be difficult and there will be many lessons to be learned along the way. But, given Mildmay’s long history and exemplary record of accomplishment, I am confident that the charity will successfully navigate the trials ahead.
CHAIRMAN’S FOREWORD

2019 marked twenty years of my involvement with Mildmay. As the Chairman of The Spring Harvest Charitable Trust, I oversaw its £325k donation to Jajja’s Home - Mildmay’s centre for children with AIDS in Kampala, visiting them for their official opening in August 2001. Then in 2004 I become a Trustee of Mildmay, overseeing work not only in Uganda and Kenya, but also projects eventually handed over to national governments in Tanzania, Zimbabwe, Rwanda and Eastern Europe. In 2007, I became Chairman of Mildmay’s Board.

Over these years Mildmay has faced so many challenges over economies of scale, funding and meeting the ongoing and the changing needs of our patients. At the heart of it all, there is the need to balance the books while maintaining the excellent quality of our care which is demanded by our inspectors like the Care Quality Commission.

In December 2018, the Board looked at several new patient pathways. Despite some challenges still to be overcome – particularly over funding from NHS England, we aim in 2020 to establish London’s first step-down facility for people who are homeless or rough-sleepers. This new pathway will become part of our regular portfolio alongside treating those with advanced HIV diagnoses.

During 2019 we were on the brink of going under as a result of a severe reduction in patient referrals caused by NHS funding issues, effectively cutting off the charity’s primary source of income. Well, many months have passed and praise the Lord, we are still in business!

Counter to expectations, the COVID-19 pandemic has meant that we appear, at least in the short term, to be turning a corner as we pilot the step-down homeless pathway and also, for a short time, took in increasing numbers of HIV patients, thus playing our part in easing the burden on NHS hospitals. HIV inpatient numbers have since fallen again and this remains an unresolved issue. To get to this point, Mildmay has spent many weeks in negotiation with all our stakeholders, with a strong underpinning of prayer and dependency upon the Living God and slowly, gently we have been encouraged - often in small ways. Philippians 4 became our daily mantra as we claimed the promises of God, that we can do all things through Him who strengthens us and gives, provides for what we need. Long may that be!

We have held in there, never losing the battle nor giving up and not once in all my time with Mildmay have we been so full and working to maximum effect! We trust and pray that we will discern God’s hand and will for the next stage of our journey.

At our AGM in November we said goodbye and thank you to Margaret Sentamu for her ten years’ service as President and welcomed her successor, Lord Norman Fowler, the
Lord Speaker of the House of Lords. We also bid our farewells to Jim Bennett, Ron Swan and Diana Forrest as loyal and faithful Trustees. We welcome new Trustees Lorna Priddle, Anthony Curwen and Naggib Chakhane to the Board. They bring a variety of different skills and relevant experience from the UK and East Africa.

We are so very grateful and give thanks to all those that support us year after year and without whom we would not survive. Finally, my personal thanks to all in the Mildmay family in the United Kingdom and in East Africa. In particular, we cannot highlight enough the work of the Chaplaincy teams under the leadership of Sister Bernie Devine and the scores of volunteers who unstintingly give their time, as we seek in the name of Jesus to offer life and love in all its fullness.
INTRODUCTION

The past year for Mildmay has been undoubtedly one of considerable ups and downs, both from a financial perspective but also when viewed through the eyes of the staff, trustees and members.

2019 began with a focus on a new direction, a new strategy. This was the same Mildmay and the same underpinning ethos and foundations but with a clear change to where we were heading. This was not because we felt that our job working with patients with complex neuro-HIV conditions was finished. Far from it. This was because the number of patients had diminished sufficiently to allow us the opportunity to help a different group of patients.

So, it was with some anticipation that the managers and trustees sought to work alongside our NHS commissioners to identify which patients were most in need of Mildmay Hospital’s expertise. Throughout the first six months or so we believed that we were headed in the direction of complex neurorehabilitation. Running alongside this was the possibility of treating Hepatology patients, stepped down from the Royal London. In the end neither of these two options came about and with the year fast drawing to a close and the charity’s finances reaching the point where we would have to close our clinical services, we found our new purpose; providing step down care for homeless patients referred from across London’s hospitals.

In January 2020 it became clear that this option was not going to happen quickly enough, and the charity was compelled to start issuing redundancies to the clinical team and to begin the decommissioning process. Then came March 2020 and the world seemed to shift on its axis. COVID19 swept around the world and the UK went into lockdown. Mildmay Hospital was commissioned to help with the fight against the virus and suddenly our wards were close to full.

As I look back from several months beyond the start of this enormous battle, with just a glimmer of a good outcome in sight, I can reflect on just how completely this situation took the charity, and everyone else for that matter, by surprise.

The future might still be uncertain. But we now have a clear purpose and everything we do is focussed on supporting our NHS partners in winning this battle. Soon we will have to once again think about the future of the charity. But for now, we have a clear and unwavering purpose.
MILDMAY UK

Over the past thirty years Mildmay Hospital has provided treatment and rehabilitation for people with complex and severe HIV-related health conditions, including HIV-associated neurocognitive disorders and HIV-related brain impairment. Our work with patients in London and from around the UK is focused on our twenty six-bed hospital. We provide both inpatient and day therapy services as well as hosting outpatient services on behalf of Barts & the Royal Hospital. Mildmay is rated as ‘Outstanding’ by the Care Quality Commission.

Inpatients who are referred from around the UK arrive at Mildmay’s specialist hospital with a challenging range of mobility and other challenges, often requiring twenty-four-hour care. Patients stay for fifty five days on average for a programme of rehabilitation and nursing care based on their individual needs. By the time they leave Mildmay, their lives have often been transformed, with about ninety per cent of patients discharged home or to a long-term nursing home placement.

Mildmay’s high success rate is due to the individualised treatment provided by our in-house therapy team which includes counselling, mental health services, physiotherapy, occupational therapy, speech and language, social work and dietitian support.

Mildmay’s innovative Day Therapy service develops goal-orientated plans which seek to maximise independence, promote skills acquisition and build confidence. A therapeutic programme of group and one-to-one work is offered. This includes community-based horticultural therapy, music, yoga, art therapy and computer-based cognitive programme, computer training, physiotherapy and Healthy Living and Expert Patient education and discussion groups.

MILDMAY’S WORK OVERSEAS

Mildmay works with over 100,000 of the most vulnerable and hard-to-reach people living with and affected by HIV and other related health issues, including children and their families, orphans and other vulnerable groups.

Mildmay trains many people to provide basic healthcare and social support for people living with HIV in their communities. Our programme of education also trains community healthcare workers, senior government officials, prison wardens and drug rehabilitation teams. This training opens up access to care for those in the remotest regions.
MILDMAY KENYA

The past year has been another challenging one for the Mildmay team in Kenya. There continues to be significant disruption to the delivery of healthcare services in Kenya.

Drug supply is affecting the ability for health workers to provide even basic healthcare and there continues to be a significant challenge with corruption affecting many of the important areas of government services.

Despite this, our team continues to deliver services in increasing numbers. The Kenya Red Cross, which administers the Global Fund for Kenya, doubled the size of the area to which Mildmay provides its HIV services.

Unfortunately, they were unable to double the size of the budget and so the small head office team who run operations out of Kisumu continue to try to do more with less.

We were pleased to see the first Tuk Tuk Ambulance finally delivered to Mageta Island. This important piece of equipment is part of the work that Mildmay is doing to support the local team of two nurses and twenty-five community health volunteers to provide HIV and maternity support services to an island population of over twelve thousand people.

We continue to work with the County Health Services to try to provide essential health equipment to the island and in the last year with the support of partners KMET and Kenya Red Cross, Mildmay was able to provide delivery equipment and fifteen hundred delivery packs.

MAGETA ISLAND HEALTH CENTRE REFURBISHMENT

Mageta Island has the highest HIV and AIDS prevalence and child mortality rates in Kenya, with one health centre for all the island’s inhabitants. The facility faces several unique challenges unlike other rural facilities due to its geographical location (on a remote island) and the population targeted. Despite the best efforts of the staff who operate the health centre, it is in poor condition, both in its fabric and its facilities and equipment. The building is over sixty years old and has suffered from long-term lack of investment by County Health Services, who have simply not had the funds available to invest in it. Accessing the facility for regular supervision and support remains a challenge for the County and Sub-County Health Management Teams.

The facility’s dilapidated condition is discouraging to the island’s residents, and those that have the resources to do so will take a boat to the mainland to seek treatment, which
in turn, means less incentive to invest in the clinic, exacerbating its decline. The poorest and most impoverished residents have no choice but to use the health centre, despite its condition and lack of modern and hygienic facilities.

**Aims**
To refurbish the only health centre on Mageta Island to improve healthcare standards and encourage use the clinic.

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<tr>
<th>Description</th>
<th>Cost</th>
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<td>Total refurbishment cost</td>
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<tr>
<td>Total equipment cost</td>
<td>£11,907</td>
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<tr>
<td>Total project cost</td>
<td>£24,551</td>
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</table>

**Outcomes**
- A safer, cleaner and better-equipped facility that will better serve the needs of the community
- A robust healthcare system for pregnant women on Mageta Island that copes with emergency complications and where mothers can expect to give birth successfully the vast majority of the time
- Increased attendance, with better health outcomes among the general population, but in particular, high-risk groups
- Improved education regarding personal health among the general population, but particularly, high-risk groups
- People in the community living healthier, longer lives
- Better trained, more responsive and productive healthcare workers will have gained a sense of pride in the improved effects of their work, feeling better-motivated
- The health centre will be a benchmark for quality local healthcare facilities - a model that can be applied in other rural areas of Kenya
SAFE FAMILIES PROJECT

In 2017, we appealed to our supporters to help us provide emergency obstetric and maternity support for the inhabitants of Mageta Island. The problem we had to address was that healthcare was effectively inaccessible to pregnant women, or at least, very difficult to access, given that there are no roads or cars on the Island, and the remote location of the health centre in relation to where most people live.

Your donations have provided
- A modified ambulance enabling vulnerable pregnant woman to deliver their babies at Mageta’s community health facility. The ambulance is able to navigate the difficult terrain of the Island safely and will also be equipped to deal with in-transit emergencies
- Vital postnatal care, including testing for HIV
- Training for 30 Community Health Volunteers (CHV) in emergency obstetric care. Each CHV reaches around 100 households
- Education for households on the importance of dedicated maternity services

Impact
- 6,495 women have been reached annually through this programme
- A reduction of maternal deaths in childbirth and the transmission of HIV from mothers to babies
- Trained community health volunteers not only provide maternity and emergency obstetric care but also share their knowledge, giving enormous benefit to the community as a whole
The emergency vehicle is community property and has been supported by Mildmay to run sustainably as a vital community resource

**Outcomes**

- A robust healthcare system for pregnant women on Mageta Island that copes with emergency complications and where mothers can expect to give birth successfully the vast majority of the time
- Improved health among the general population, but in particular, high-risk groups
- Improved education regarding personal health among the general population, but particularly, high-risk groups
- Pregnant mothers supported to give safe birth to children
- People in the community living healthier longer lives

**Unexpected outcomes**

- When the vehicle is not being used for emergencies and obstetric interventions, the Clinic uses it as a mobile consulting room to travel around the island and bring healthcare to the villagers

**MAGNET THEATRE**

The Magnet theatre project working with the local community in Siaya County, was envisaged to bring together young people to be able to discuss, access and contribute to the dialogue of HIV, SRHR (sexual and reproductive health rights) and demand creation and utilisation of the services related to HIV/SRHR.

Theatre is a highly effective means of effectively mobilising and teaching large groups of people in a short period of time. Young people are able to make informed choices when they are provided with the right information, the right way and at the right time - and there is no better way than through theatre.

**Challenges**

There is still a huge need to reach young people through theatre and include governance and its effect on service delivery, particular in Kenya where the political situation can create additional challenges.

If young people cannot relate politics and governance and its effect on access to quality health care, education, employment or empowerment opportunities, then the opportunity will be lost to see an empowered health generation.

Besides this project, there is little other investment from the government in the arts, whether visual or performing arts.
**MILDMAY UGANDA**

Mildmay Uganda was Mildmay’s first international programme, opening in Kampala in 1998. Today Mildmay Uganda is an independent NGO, or non-governmental organisation (charity), with its own board.

Mildmay Uganda has now been successfully running as an independent charity for over seven years and during that time they have continued to grow into an organisation with a reach of nearly six and a half million people.

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**ELIZABETH WARD AT THE MILDMAY HOSPITAL IN KAMPALA**

Mildmay UK fully funds the paediatric ward known as Elizabeth Ward at the Mildmay Hospital in Kampala. This is the only facility in the region providing high-quality care to children with the most complex cases of HIV-associated health conditions.

Children are admitted to Elizabeth Ward with conditions such as HIV, meningitis and malaria. Elizabeth Ward treats over 500 children a year from under-privileged families who require specialist care. Last year, thanks to your generosity, Mildmay UK was able to provide £20,000 in funding.

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**MILDMAY UGANDA AT A GLANCE**

The next page shows just some of what Mildmay Uganda has achieved. To learn more, visit their website at [mildmay.or.ug](http://mildmay.or.ug)
Mildmay Uganda at a glance

**HIV care**
- 89,000 PLHIVs supported on the lifesaving drugs
- 83% Viral load suppression
- 3.2% Elimination of Mother to Child Transmission (EMTCT) rate less than the national target of ↓5%
- 40,721 Estimated unwanted pregnancies averted

**Maternal and Child Health**
- 6,308 Skilled birth attendance supported HIV positive

**Prevention**
- 634,164 Tested for HIV and received results,
- 48,710 Men reached with Voluntary Medical Male Circumcision (VMMC)
- 6m Free condoms distributed and People reached with oral or injectable contraceptives
- 1,800 Estimated Key Populations (KPs) reached with prevention services
- 42,007 Adolescent Girls and Young Women (AGYW) enrolled in the DREAMS project
- 19,905 Adolescent Girls and Young Women (AGYW) received a minimum of 3 HIV prevention services

**Estimated New HIV Infections Averted**
- 8,831
- 8,170
- 8,000
- 8,400
- 8,200
- 8,000
- 7,800

Mildmay Uganda averted an estimated 8,831 new HIV infections (17% of the National).
SUPPORT MILDMAY

Without our supporters, Mildmay simply would not be here. Every single contribution that you make to our work in either the UK or Africa impacts the lives of real people. These people are exactly those that our founders the Rev William Pennefather and his wife Catherine established the charity for.

VOLUNTEER

Volunteering at our hospital in Shoreditch makes a huge difference to those in our care. People choose to volunteer for a variety of reasons. For some it offers the chance to give something back to the community or make a difference to the people around them. For others it provides an opportunity to gain new skills and experiences, meet new people, pass on knowledge, and have fun. Regardless of the motivation, what unites them all is that they find it both challenging and rewarding.

If you would like to volunteer your time to Mildmay then we would be delighted to hear from you. Simply contact volunteer.coordinator@mildmay.org

DONATE

Every donation, regardless of size, makes a difference to our work. You can make a one-off donation or set up a regular payment through our website, or simply send us a cheque made payable to Mildmay UK. Our address is on the back page.

www.mildmay.org/donate

LEAVE A GIFT IN YOUR WILL

Choosing to leave a Gift to Mildmay in your Will is a great way to support us. It costs nothing now but ensures that you can make a life-changing difference in the future. No gift is too small. Gifts in Wills help to secure our future and build on our work. Setting up a legacy gift isn’t complicated, and you will find more information on our website.

PRAY FOR OUR WORK

Let us know if you would like to subscribe to our Prayer Diary which is produced twice a year.
TO FIND OUR MORE...

Call us on

0207 613 6311

or visit

www.mildmay.org

If you would like to receive updates on Mildmay’s work please call us on the above number or email us at info@mildmay.org

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**BOARD OF TRUSTEES**

**President**

The Rt Hon. The Lord Fowler

**Trustees**

The Very Revd John Richardson, Chair

Emma Buchan

Dr. Rosalind Furlong

Christobel Khunda

Carol Stone

The Prebendary Ronald Swan

Andrew Warrilow

Naggib Chakhane

Anthony Curwen

Barry Rowen

Lorna Priddle

**Chief Executive Officer**

Geoff Coleman
# ACCOUNTS BREAKDOWN MILDIMAY UK

## Incoming Resources 2018-2019

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<td>Donations, grants &amp; gifts</td>
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<td>Legacies</td>
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<td>NHS contract income</td>
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<td>International contract income</td>
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<tr>
<td>Investment &amp; interest income</td>
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<tr>
<td>Other income</td>
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**Total Incoming Resources**  
£3,176,000

## Resources Expended 2018-19

<table>
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<th>Resource</th>
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<tr>
<td>Fundraising &amp; Publicity</td>
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<td>UK residential healthcare</td>
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<td>UK adult day therapy services</td>
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<td>International Alliance Support</td>
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<td>The Mildmay Centre, Uganda</td>
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<td>Training &amp; Consultancy, Kenya</td>
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**Total Resources Expended**  
£3,625,000
THANK YOU

Our sincere thanks go to all our supporters including thousands of individuals, charitable trusts and foundations, companies, churches and other organisations whose funding and support make it possible for our work to reach and transform the lives of so many people. Find out more about our supporters on our website.