

Goals and outcomes

- Self-medicating and managing medicines
- Adherence
- Pain control
- Memory work
- Decision making and planning
- Orientation
- Problem-solving
- Managing activities for daily living - washing, dressing etc.
- Nutritional awareness and support
- Cooking safety assessment
- HIV information and education
- Sexual health information and education
- Yoga
- Art therapy
- Digital inclusion training
- Increasing strength and exercise tolerance
- Increasing/maximising mobility
- Health protection
- Social worker support
- Finance management, applying for social support, housing and benefits
- Using resources in the community
- Counselling and emotional support

REFERRALS

Phone: 020 7613 6347

Email: admissions.mildmay@nhs.net



Mildmay Mission Hospital is rated 'Outstanding by the Care Quality Commission, providing a 'gold standard' level of personalised, multidisciplinary care for people with complex needs.

Life in all it's fullness for everyone
in Mildmay's care

For more information:

T: 020 7613 6347

E: admissions.mildmay@nhs.net

W: mildmay.nhs.uk/homeless-pathway

To support Mildmay's work:

T: 020 7613 6311

E: info@mildmay.org

W: mildmay.org/donate



Mildmay Mission Hospital

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London E2 7DZ

W: mildmay.nhs.uk

Social: [@MildmayUK](https://www.instagram.com/MildmayUK)

Registered charity No 292058



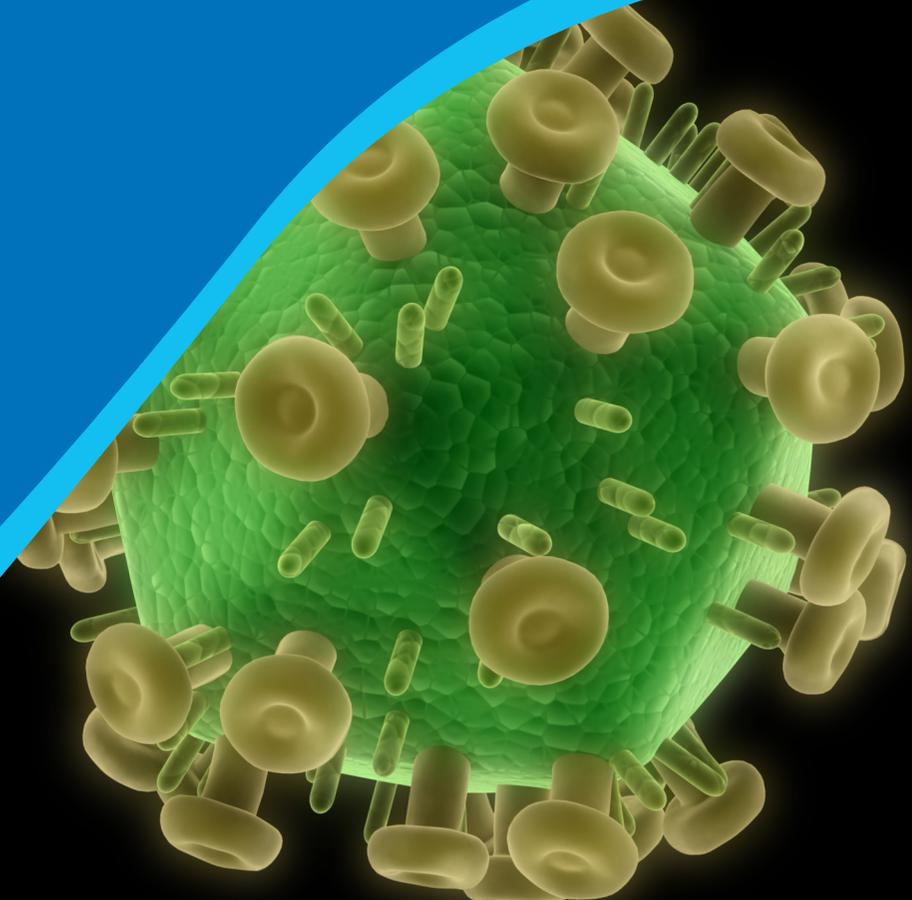
MILDMAY

Transforming Lives



Mildmay Mission Hospital

HIV Pathway



HIV PATHWAY

Mildmay Mission Hospital utilises a multidisciplinary team (MDT) to provide three structured pathways of rehabilitation and care for patients with complex HIV and HIV-associated neurological disorders (HAND).

Our patient-centred approach encourages patients to be active in their treatment decisions and care plans. Goal-oriented care plans work to maximise independence and improve physical, psychological, cognitive and emotional wellbeing. This can lead to a reduction in incidences of readmission to hospital.

Mildmay works in partnership with the patients' Acute Centres, Community Specialists and family and friends to facilitate the best possible outcomes for patients.

Mildmay offers three inpatient HIV pathways:

PATHWAY ONE

Referral for both HIV-associated neurological disorders (HAND) and complex rehabilitation

- The average length of stay for patients admitted for HAND is 12-weeks. The minimum length of admission is four weeks
- Patients requiring admission for Complex Rehabilitation are also admitted for a minimum of four weeks but this is dependent on their needs and treatment
- All patients accessing Pathway One will receive input from all of the MDT as required
- Extensions can be granted for longer admission time if there is an identified need

- A patient's care needs are assessed within the first three days of admission by the relevant disciplines. A key worker is then appointed from the MDT. Patient care and rehabilitation are planned and implemented with the involvement of the patient and liaison with the referrer. Continuous assessment and evaluation of the patient's short- and long-term goals are made and include weekly MDT meetings lead by our specialist HIV Consultant
- All patients on this pathway have three or four weekly Discharge Planning Meetings to discuss the patient's needs, progress, future needs and discharge options.

PATHWAY TWO

Minor rehabilitation and respite

- Patients requiring minor rehabilitation/respite are usually admitted for two weeks but can be admitted for a minimum of one week
- Extensions can be granted for longer admission time if there is an identified need
- Patients on this pathway are usually admitted for psychological support, symptom control, e.g. pain management and adherence support
- On admission, patients are assessed by the medical and nursing team and a named nurse is allocated
- Patients needs and goals are discussed at the weekly ward rounds and weekly MDT meetings.

PATHWAY THREE

End-of-life/palliative care

- Patients requiring this pathway will always be allocated the next available bed, This is the only pathway with no fixed time period

- Patients are assessed by the medical and nursing teams and are allocated a named nurse. Referrals for specialist input by our MDT will come from the nursing and medical assessments to ensure there is excellent pain and symptom control and treatment
- Care needs and input are discussed weekly in the ward rounds.

Mildmay's multidisciplinary team

- Admissions Manager
- Art Therapist
- Chaplains (multi-faith)
- Clinical Lead Nurse and nursing team (Registered General Nurses and RMNs)
- Dietician
- Liaison Psychiatrist
- Medical Director
- Occupational Therapist
- Physiotherapists
- Psychologist
- Rehabilitation Assistants
- Senior House Officer
- Social Worker
- Speech and Language Therapist
- Volunteer companionship and support.

Facilities

- Two wards, each with a communal lounge and kitchen for patient use
- Twenty-six ensuite single rooms
- Well-equipped physiotherapy gym
- Assessment Centre
- Specialist therapeutic equipment
- Assisted bathrooms
- Tranquil courtyard garden
- Day Therapy Centre
- Digital Inclusion Suite
- Laundry