



Centre for Health Solutions - Kenya

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*Preferred Partner for Health Solutions*



# STRATEGIC PLAN 2016 - 2020



# Foreword

Over the last five years, we have successfully implemented our First Strategic Plan developed as a blueprint for the establishment and initial growth of CHS as a preferred partner for health solutions. During its implementation, CHS supported the provision of quality health services to over 1.5 million Kenyans. We learnt important lessons that form a basis for our work in the next five years.

The Second Strategic Plan (2016 – 2020) launches us into the next phase of our growth, presenting another milestone for CHS. With this plan, we reaffirm our commitment of continued dedication to serve the people of Kenya and beyond. We reaffirm our commitment as a resourceful partner to the Ministry of Health at the national level and health departments at county level. Importantly, we reaffirm our commitment to patients and clients who seek health services at supported facilities and in the community.

The second strategic period will be driven by six overarching goals. The first goal focuses on partnerships to strengthen health systems for healthy communities, while the second goal emphasizes strategic partnerships and visibility. Since the nature of our work involves seeking grants and donations, our third goal defines our continued quest for new business opportunities. As a conscientious employer, we value our employees and seek to grow them as described in the fourth strategic goal. We seek to foster a strong foundation for learning and contribution to the body of knowledge through the fifth goal and commit to prudent management of resources in the sixth goal.

CHS needs all stakeholders in order to implement this strategic plan. We seek the support of government at both national and county level. We also seek the support of donors, who continue to majorly contribute to our growth. We reach out and join hands with our partners, corporates and colleagues and assure all of our commitment to work in partnership to achieve our common aspiration of a world of healthy families.

**Dr Paul Wekesa,  
Chief Executive Officer**



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# Chapter 1

## BACKGROUND

Centre for Health Solutions – Kenya (CHS) was established in July 2010 and began operations in October 2010.

Over the last five years, CHS has implemented its first strategic plan that has been at the core of the growth of the organisation. The first strategic plan was the foundational strategy, which focused on important organisational development necessary for the establishment of CHS as the preferred partner for health solutions. Below is a review of key achievements and lessons learned from the first strategic period.

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### Building on the Foundation of the First CHS Strategic Plan

The first strategic plan defined four strategic goals. The first strategic goal focused on strategic position of CHS as the preferred partner for health solutions nationally and regionally by 2015. The second strategic goal focused on the delivery of optimal models for public health while the third goal defined the aspiration to be a learning organization. The fourth strategic goal focused on the optimisation of organisational resources for maximal value.

The table on the next page presents highlights of key achievements during the first strategic period. In addition, it presents lessons learnt following the implementation of the first strategic plan.

These achievements and lessons from the first strategic period, provide an important foundation for the future of CHS. The operating environment keeps changing making it necessary for local organisations such as CHS to continuously review strategies and approaches. The next section presents an overview of the current operating environment, highlighting key issues that informed the development of the second CHS Strategic Plan.

## Key Achievements of the First CHS Strategic Plan

Strategic Goal	Achievements	Lessons Learnt
<p><b>Goal 1:</b> To strategically position CHS as the preferred partner for health solutions nationally and regionally by 2015</p>	<ul style="list-style-type: none"> <li>• Remained focused on the strategic plan</li> <li>• Expanded/increased level and type of funding</li> <li>• Developed a brand that is well known and respected across the country</li> <li>• Communicated our brand and our work through our website and growing online presence and content</li> <li>• Our staff gave back to society through various CSR activities</li> <li>• We have increased the number and scope of partnerships with government including counties, donors, not-for-profit organisations, corporate and Universities</li> <li>• We have developed Governance Structures and worked closely with the CHS Board to guide the growth of CHS</li> </ul>	<ul style="list-style-type: none"> <li>• Strategy and its implementation is key to organisational growth</li> <li>• Strong partnerships are important to achieve goals</li> <li>• Brand consistency has an important role in growing organisations</li> <li>• Engagement with stakeholders through communication and giving back have an important role in growing organisations</li> </ul>
<p><b>Goal 2:</b> To deliver optimal service delivery models for public health</p>	<ul style="list-style-type: none"> <li>• Growth in supported health facilities from 22 to 190</li> <li>• Reached over 1.5 million beneficiaries with quality services through supported health facilities</li> <li>• Optimal HIV service delivery models developed, defined and scaled up</li> <li>• Evident and documented results of effective implementation</li> <li>• Shared implementation models adopted nationally e.g. HTC Referral Tool, structure of MDR TB investigation tools, Quality Assurance (QA) model</li> <li>• Health infrastructure improved across 13 facilities at a cost of Kshs 56,642,824</li> <li>• Capacity building solutions developed and implemented (Residential Mentorship and e-Learning)</li> <li>• Quality equipment like suction machines, ECG machines, pulse oximeters, blood pressure machines stethoscopes, among others provided to supported health facilities</li> </ul>	<ul style="list-style-type: none"> <li>• Collaboration and building on the existing systems fosters growth</li> <li>• Translating policy guidelines to implementation is key for quality programs</li> <li>• Understanding and responding to health system gaps supports quality service delivery</li> <li>• Institutionalizing capacity building is key for quality service delivery</li> <li>• Understanding the local context and adaptability are key for public health programs</li> </ul>

## Key Achievements of the First CHS Strategic Plan (cont.)

Strategic Goal	Achievements	Lessons Learnt
<p><b>Goal 3:</b> To be a learning organisation</p>	<ul style="list-style-type: none"> <li>Human Resources for Health support provided at a total cost of Kshs 307,267,295</li> <li>Expanded scope: from implementation to policy level interventions (NSP, GDF, NTLD Program Mid Term Review, STOP TB Partnership strategic plan, TWGs and ICCs, contribution to the development of the National HTC referral model, development of National Antiretroviral Therapy guidelines)</li> <li>Shared our learning through 56 abstracts presented at local and international conferences</li> <li>Utilised data for continuous improvement of programs and systems</li> <li>Institutionalised capacity building opportunities for staff and guests</li> <li>Implemented a robust internship program to motivate the interest of Kenya's youth in public health</li> </ul>	<ul style="list-style-type: none"> <li>Documentation and dissemination of learning contributes to the body of knowledge</li> <li>Learning should contribute to continuous improvement</li> <li>We can impact the future by providing opportunities to young people</li> </ul>
<p><b>Goal 4:</b> To optimise organisational resources for maximal value</p>	<ul style="list-style-type: none"> <li>Established robust finance and compliance systems at CHS</li> <li>Adopted best practices through dynamic organisational policies and procedures</li> <li>Implemented a robust health financing model through sub grant management system to fund counties and partners</li> <li>Leveraged on technology for efficiency</li> <li>Conducted external audits for continuous systems improvement with four unqualified audits</li> <li>Capacity building activities in support of optimising organisational resources</li> </ul>	<ul style="list-style-type: none"> <li>Building systems contributes positively to organisational growth</li> <li>Using technology enables growth and efficiency</li> <li>Implementing audit findings supports continuous improvement</li> </ul>

## Understanding the Operating Environment

Devolution continues to take shape since the enactment of the new constitution of Kenya in 2010. Through devolution the constitution has created systems for the de-concentration of power, authority and finances to 47 counties. This has had a profound effect on all socio-political, administrative and economic sectors in the country.

In the not-for-profit sector, devolution means that new centres of influence have emerged outside of Nairobi. Successful implementation of programs would require collaboration with the established county governments. Significantly, following devolution, counties assumed key responsibilities for health services such as leadership and governance, human resources, commodity procurement, financing, informatics and service delivery.

Kenya has a predominantly young population. In 2014, young people under 15 years constituted 42% of the population, with those between 15 and 34 years constituting 37% of the country's population. The majority of Kenyans live in rural areas and have attained primary level education. In 2014, the informal sector generated the bulk of the employment opportunities, with unemployment highest among the youth aged 20 years estimated at 35%. Social inequality and poverty present challenges to the people of Kenya. With a predominantly Christian population, cultural practices and norms influence socio economic activities.

Kenya has the largest economy in East Africa. The economy is driven predominantly by the agricultural sector as the country positions itself as a regional finance and transport hub. The 2015 Kenya Facts and Figures report indicated significant growth in the information and technology sector. By 2014, mobile phone subscriptions had increased from 68 per 100 people in 2011 to reach 78 per 100 people. Internet subscriptions peaked at 38 per 100 inhabitants from a 2011 baseline of 15 per 100 people. In addition, social media has created new avenues for information sharing and a tool for collective action. The 2015 Status of Blogging and Social Media report indicated a total of 2.1 million Twitter users with over 700,000 of them listed as monthly active users and 4.3 million Facebook users. Blogging platforms boast of 15,000 registered blogs, with 3,000 currently active.

Kenya's Vision 2030 targeted annual economic growth rates at 10% per annum. However, challenges exist such as wealth concentration and high poverty rates.

## Contextual Issues in Health

The Constitution of Kenya (2010) provides that every citizen has the right to life, right to the highest attainable standard of health including reproductive health and emergency treatment, right to be free from hunger and to have food of acceptable quality, right to clean, safe and adequate water and reasonable standards of sanitation and the right to a clean healthy environment. This expanded provision therefore requires health systems that are robust enough to guarantee a healthy populace. Further, the constitution devolved power to 47 counties; and one of the key devolved functions is the delivery of health services. Therefore, these expanded health-related rights are to be provided within a devolved structure.

According to the Kenya Health Policy (KHP) 2012-2030, the current annual mortality is estimated at approximately 420,000 persons. Of these, 270,000 (64%) are attributable to communicable diseases, 110,000 (26%) to non-communicable conditions and 40,000 (10%) due to injuries. The policy aims to target the three conditions and contain them to below levels of public health importance hence 31% reduction in absolute numbers of deaths. The policy goal is “attaining the highest possible standard of health in a manner responsive to the needs of the population” using six principles: equity, people centredness, participation, efficiency, multi-sectoral involvement and social accountability. The focus on the policy will be on two obligations: realisation of the right to health as outlined in the constitution and contribution to development as outlined in the vision 2030.

The medium term plan towards achievement of the goals of the KHP is the Kenya Health Sector Strategic Plan (KHSSP) 2014-2018, which targets universal health coverage, with a focus on providing equitable, affordable, accessible and quality health services. This speaks to broad health systems strengthening with a special focus on service delivery, health infrastructure and health financing. Currently, the government targets to expand health insurance through the National Health Insurance Fund (NHIF), and has developed a quality improvement framework, the Kenya Quality Model for Health (KQMH). With a special focus on maternal and newborn health, KHSSP has objectives addressing communicable and non-communicable diseases, injuries and access to quality services. Further, it aims to reduce risk factors for ill health through multisectoral collaboration thus addressing the determinants of health. It seeks to work through partnerships including development and implementing partners and the private sector. Key targets are to: i) reduce, by at least half, the infant, neonatal and maternal deaths; ii) reduce, by at least 25%, the time spent by persons in ill health; iii) improve, by at least 50%, the levels of client satisfaction with services and to iv) reduce by 30%, the catastrophic health expenditures.

Another key strategy is the Community Health Strategy 2014-2018, which seeks to empower the community to make decisions about their health and to implement and monitor health interventions initiated by the community. The strategy will build demand for services through improving awareness and health seeking behaviours of households. It introduces an innovative approach whereby social determinants of health are addressed through people’s active participation at the community level. Many County Health Strategic Investment Plans have a major focus on community involvement through the community health strategy.

Challenges the health system needs to address include underfunding of the health sector; currently, only 6% of the national budget goes to health, less than half of the recommended 15% as per the Abuja Declaration.

## Centre for Health Solutions – Kenya

CHS is now an established local organisation with national reach. We pride ourselves in our reputation as a credible Kenyan entity, with a track record of achieving results that impact the health of Kenyans. CHS has implemented robust sustainable models for health through strong partnerships with stakeholders. We have focused on innovations as well as documenting and disseminating lessons learnt at several local stakeholder forums.

The competent, youthful and dynamic staff at CHS have found a conducive working environment that creates opportunities to grow and be the best. Our staff have spent thousands of hours working hand in hand with health workers at the National and County level to ensure knowledge exchange and mentorship. We have harnessed our technical expertise to make meaningful contributions to health policies in Kenya, while ensuring that these policies translate into implementable interventions at health facilities and communities.

CHS has a track record of being a trustworthy steward of resources. We have established robust financial and operational policies, procedures and systems that ensure optimisation of minimal resources. Our strong systems have established the organisation's readiness to prudently manage additional resources. Through sub granting we have ensured resources are closer to the patient for quality care. We have maintained openness in resource utilisation with audit and system reviews by both donors and reputable international audit firms returning unqualified reviews.

We are however cognisant of important gaps that remain unfulfilled. The sustainability of local organisations like CHS remains a challenging proposition. This is in the backdrop of increased competition for limited donor resources. In addition, changing donor priorities impact organisations especially those without adequate institutional funds. Further, our systems need to continually evolve and respond to the changing environment as we embark on new programs and engage stakeholders.

# Chapter 2

## THE STRATEGIC PLAN



### Vision

CHS envisions a world of healthy families through universal access to health interventions and services.

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### Mission

CHS optimises delivery and use of health interventions to communities, through evidence-informed solutions, innovation and research to address existing and emerging public health needs.

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### Corporate Values

- Integrity – We provide services in an accountable and responsible manner
- Partnership – We collaborate with government, donors, stakeholders and communities to complement and synergise in the delivery of sustainable health services
- Commitment – We are dedicated to improving the health of communities
- Result-orientated – We focus on efficient processes that maximise output
- Excellence – We strive for quality in our services
- Innovation – We focus on continuous improvement

# STRATEGIC GOAL



Healthy Communities through Partnerships  
that Strengthen Health Systems

## ***Purpose of the Goal***

The purpose of this goal is to inform the delivery of accessible, cost-effective and quality preventive, promotive, curative and rehabilitative health interventions and to strengthen health systems for a healthy population.

## ***Strategic Objectives***

- SO 1** To deliver health interventions that address existing and emerging health needs by addressing the needs of sub-populations
- SO 2** To develop and adapt technologies for health
- SO 3** To advocate for various health issues and needs

## ***Approaches***

CHS will endeavour to align programmatic activities to local and international strategies and policies e.g. Kenya Health Policy, Kenya AIDS Strategic Framework, United Nations Sustainable Development Goals, Kenya Health Sector Strategic and Investment Plan, Constitution of Kenya, Vision 2030.

By leveraging strategic partnerships for implementation of health programs with local and national governments, learning and training institutions among others, CHS will make investments for maximum impact through timely and accurate interventions in the right places.

For sustainable outcomes, CHS will embrace a people centred, participatory, culturally appropriate and equitable approach to its programming, engaging actors and implementers across sectors to address social determinants of health and ensure sector wide programming.

CHS shall ensure maximum efficiency in use of resources including technology, time, financial, human and other resources with health programming under the convergence framework.

## ***Expected Outcomes***

- Institutionalisation and adoption of CHS health models
- Increased use of technology in health
- Increased coverage/access to health services
- Improved health of communities
- Increased health awareness among local communities
- Robust and responsive health systems that provide the right services at the right time, in the right place for all those in need

# STRATEGIC GOAL



Increase Visibility and Strategic Partnerships

## ***Purpose of the Goal***

The purpose of this goal is to further strengthen the position of CHS as the preferred partner for health solutions in Kenya and the region.

## ***Strategic Objectives***

- SO 1** To develop and maintain strategic partnerships at county and national levels to support program implementation, resource mobilisation and advocacy
- SO 2** To position CHS as a credible provider of up-to-date health information for media and local communities
- SO 3** To strengthen internal and external communication through the correct application of the CHS brand and dissemination of key messages
- SO 4** Increase CHS visibility at county, national and regional levels to enhance advocacy and resource mobilisation efforts

## ***Approaches***

CHS will seek to promote its results oriented program performance and position as the preferred partner for health solutions through a target audience centred approach. Target audiences of CHS messages will be considered active participants of a specific process and not just recipients.

The development and implementation of a communication and media strategy that will outline key messages, define the audiences and channels of use will guide all communication and visibility efforts for the strategic period. CHS will make use of a wide range of approaches and tools, such as social media, mainstream media, communications for development, networking activities and the use of champions, among others to increase visibility.

Communications for development will seek to support project outputs and activities and will involve communities in dialogue, consultation and participation – based on understanding their local context.

The development, implementation and monitoring of a partnership framework will form the basis of all strategic partnerships to identify partnership needs, potential partners and how to engage them for improved health outcomes.

## ***Expected Outcomes***

- Increased visibility of CHS activities, projects, products and position, locally and regionally
- Improved sharing of information on CHS health programs and current health affairs
- Increased requests for information on CHS specific health priorities
- Stronger brand recognition externally and internally
- Increased requests for partnerships
- Robust strategic partnerships at county and national level

# STRATEGIC GOAL



New Business Development

## ***Purpose of the Goal***

The purpose of this goal is to identify and explore opportunities for CHS to grow its business through attracting increased and diversified funding sources.

## ***Strategic Objectives***

- SO 1** To expand the pool of funding aligned to identified public health priorities by the year 2020
- SO 2** To identify and venture into revenue generating activities/programs in line with existing in-house expertise and the CHS niche, growing CHS institutional funds by the year 2020
- SO 3** Develop and institutionalise a strategic approach to donor relationship management including reporting and reviews

## ***Approaches***

The CHS approach to partnership with the corporate sector will encompass dual objectives—pursuing benefits for the business and for society. Through the creation of shared value through smart partnering, CHS will offer corporates more than just an opportunity to enhance their reputation, but to also improve core value creation by addressing major strategic issues or challenges, while improving the overall quality of life and living standards of local communities.

CHS will identify areas where the highest potential for mutual benefit exists. These will be areas of interest to CHS where a corporate organisation significantly interacts with—and thus can have the greatest impact on—society.

The CHS approach in engaging corporates will focus on a long-term approach and not “quick fix” projects. At the same time, the approach will seek, as much as possible, to engage the entire workforce. The offering to corporates will take a step-by-step approach to identify and drive mutual value creation - doing good business and creatively addressing significant issues that face business and society.

CHS forecasts that it will require an average of Kshs 126 M (US\$1.26M) in unrestricted funding every year for the next five years to effectively deliver on this strategic plan.

## ***Expected Outcomes***

- Longer-term, unrestricted/institutional funding
- Increased donors types (corporate, individual, foundations)

# STRATEGIC GOAL



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Growing People

## ***Purpose of the Goal***

The purpose of this goal is to position human capital as a strategic pillar towards advancing organisational growth and performance.

## ***Strategic Objectives***

- SO 1** To build a people-focused organisational culture to enhance staff engagement and performance
- SO 2** To continuously build the capacity of staff through dynamic learning approaches in line with organisational goals
- SO 3** To continuously track, attract and retain the best talent towards achieving organisational goals

## ***Approaches***

For improved talent management and retention, CHS will develop a competency framework for all levels of staff that will inform the process of talent profiling and creation of a talent database that will be useful in the development of a staff succession program.

In an effort to continuously build the capacity of staff through dynamic learning, CHS will introduce leadership and management and job rotation programs while also seeking to build cross-cutting functional skills (e.g. Finance for non-finance staff, HR for line managers) to enhance performance.

CHS will make use of a collaborative and participatory approach to employee relations while fostering a culture of work life balance with a focus on the well being of individual staff members.

## ***Expected Outcomes***

- Reduced attrition of talented staff
- Improved employee relations and internal communication
- Improved compliance to CHS policies and procedures through thorough and easy to reference orientation and induction processes
- Improved performance planning and management

# STRATEGIC GOAL



From Research to Action

## ***Purpose of the Goal***

The purpose of this goal is to define approaches to grow the capacity of CHS in operations research, implementation science and health evaluations and to utilise evidence to inform public health policy and practice

## ***Strategic Objectives***

- SO 1** To build the capacity of CHS in operations research, implementation science and health evaluations
- SO 2** Establish strategic partnerships for research
- SO 3** To communicate research findings to diverse audiences through appropriate dissemination approaches

## ***Approaches***

In an effort to build capacity in conducting research, CHS will develop a Research and Health Care Evaluations Strategy complimented by a costed research work plan while making a deliberate effort in resource mobilisation for research grant writing.

CHS will deliberately build the capacity of its workforce and that of its partners in the research process, while providing an environment that nurtures innovation led by a team that will hold brainstorming sessions, partner and create innovation forums with local and international institutions of higher learning, technology and research partners and other stakeholders.

There will be a sustained effort to showcase CHS research, models and best practices at relevant forums locally, regionally and internationally through appropriate media, leveraging on target audience and communication channel mapping from the CHS Communication and Media Strategy.

CHS will enhance and operationalise the CHS knowledge hub plan for better documentation, dissemination and archiving of CHS implementation models and research findings that will inform advocacy activities to influence policy and practice.

There will be continued and coordinated participation in relevant scientific communities/ activities including engagement in the various national and county technical working groups and taskforces.

## ***Expected Outcomes***

- A fully fledged research program
- Established formal relationships with local and international institutions of higher learning to collaborate in research and learning
- Published research in peer reviewed journals
- Innovative health solutions developed through the innovation team
- Increased visibility through documentation and dissemination of CHS work: abstracts, manuscripts, manuals, policy briefs, research reports among other documents
- CHS health interventions/innovations incorporated in national policies and guidelines

# STRATEGIC GOAL



Resource Management and Operational  
Efficiency

## ***Purpose of the Goal***

The purpose of this goal is to define approaches to ensure efficient, effective and economic allocation and utilisation of CHS resources.

## ***Strategic Objectives***

- SO 1** To continuously improve efficiency and effectiveness by strengthening business processes, governance and maintaining strong and dynamic internal control systems
- SO 2** To continuously enhance organisational compliance with necessary regulatory frameworks, CHS internal policies and donor regulations
- SO 3** To continuously improve both internal and external client satisfaction through improved business process
- SO 4** To continuously optimise the use of technological innovations for management of CHS resources

## ***Approaches***

CHS will continue with the implementation of existing fiscal policies that promote responsible, accountable and transparent management of resources. These policies will be periodically reviewed to conform to best practices, enhancing organisational compliance with both donor and internal regulations and policies.

For increased efficiency in operations and service delivery using the existing technology platform, HR, Finance, Procurement, Stores, Payroll and reporting modules shall be integrated into a single operating unit that shall eliminate disjointed and stand alone operating systems and optimise information sharing across the organisation.

CHS will make use of its ICT Department in continuously building the capacity of staff and developing emerging computing solutions that will optimise CHS business processes and systems

By harnessing the good working relationship with its implementing partners, CHS will strengthen their financial management systems and developing effective communication channels with them.

## ***Expected Outcomes***

- Improved donor confidence through improved accountability, value for money, good governance and stewardship of resources
- Improved information flow characterised by availability of accurate, reliable and relevant information to internal and external clients
- Better understanding and interpretation of financial reports through staff participation in budget development for increased accountability and transparency
- Improved compliance with both donor and CHS rules and regulation
- Utilisation of custom-made and robust ICT tools that respond to technological changes in the market promoting smooth workflow processes and a paperless work environment
- Reduced risk exposure including possible litigation

# Chapter 3

## POSSIBLE RISKS & MITIGATION MEASURES

Risk	Mitigation
Funding: <ul style="list-style-type: none"> <li>• CHS cannot fund health programs in this strategy</li> <li>• CHS lacks institutional funds to support sustainability of the organisation</li> </ul>	<ul style="list-style-type: none"> <li>• Respond to calls for proposals from donors to fund programs</li> <li>• Increase grant writing capacity</li> <li>• Seek local and international donors who can provide unrestricted funds</li> <li>• Invest institutional funds to grow the portfolio</li> </ul>
Changes in donor and government priorities	<ul style="list-style-type: none"> <li>• While this strategy accommodates broad interventions in health, CHS is cognisant of the constantly changing donor environment and the potential effects to the operations of the organisation. Monitoring both donor and government priorities will be critical</li> </ul>
Competitive NGO sector	<ul style="list-style-type: none"> <li>• Develop strong partnerships with other organisations</li> <li>• Seek opportunities to complement existing strengths with partners</li> </ul>
Understanding of the strategy by all staff	<ul style="list-style-type: none"> <li>• A lack of buy-in by staff would derail the implementation of this strategic plan</li> <li>• Involvement of staff and institutionalising their contribution to achievement of the strategic plan will be critical</li> </ul>
Managing our reputation	<ul style="list-style-type: none"> <li>• Maintaining high standards in our work will be important</li> <li>• Fostering a strong brand identity and proactively managing our image in social spaces and among stakeholders</li> </ul>



Centre for Health Solutions - Kenya  
Kasuku Road off Lenana Road, CVS Plaza, 4<sup>th</sup> Floor, North Wing  
P.O. Box 23248 - 00100, Nairobi, Kenya | Tel: +254 (0) 271 0077

[info@chskenya.org](mailto:info@chskenya.org) | [www.chskenya.org](http://www.chskenya.org)



Centre for Health Solutions - Kenya



@chskenya