Centre for Health Solutions – Kenya (CHS) is a local, not-for-profit organization that utilizes 100% local expertise as well as strategic partnerships to implement evidence informed solutions and interventions to existing and emerging public health concerns.

WHO WE ARE

VISION
A world of healthy families through universal access to health interventions and services

MISSION
To optimize the delivery and use of health interventions to communities through evidence informed solutions, innovations and research to address existing and emerging public health needs.
TABLE OF CONTENTS

Foreword ..................................................................................................................... 3
Our impact .................................................................................................................. 4
Background ................................................................................................................. 5
KEY ACHIEVEMENTS DURING THE SECOND STRATEGIC PERIOD 2016-2020 ................................................................................................................................. 6-10

THE HEALTH GOAL
Goal 1: All of society well-being through a healthy-public approach, adaptive to local evidence ................................................................................................................................. 11

THE PEOPLE GOAL
Goal 2: Engage inspired and multi-competent individuals in a flexible work environment ........................................................................................................................... 12

THE TECHNOLOGY GOAL
Goal 3: Optimize adaptable, responsive and innovative technology for operational and programmatic excellence ......................................................................................... 13

THE SOCIAL IMPACT GOAL
Goal 4: Leverage brand positioning for impact ................................................................................................................................. 14

THE BUSINESS GOAL
Goal 5: Grow CHS current business and develop a social enterprise through innovative approaches ......................................................................................................................... 15
As we celebrate 10 years of service to local communities, our commitment towards the provision of quality health services remains strong. We have made tremendous progress in health service delivery and HIV/TB program implementation over the last 10 years, and are encouraged to explore what the future holds. Lessons learned over the years and research on the current implementation environment have been an integral part in the development of our third strategic plan 2021 – 2025.

During the first strategic period (2010-2015), CHS was an unknown brand with nascent systems and a limited track record of public health program implementation. The first strategic plan therefore, focused on strategic positioning of CHS as the preferred partner for health solutions, delivering of optimal models for public health, aspirations of being a learning organization and optimising of organisational resources for maximal value.

The second strategic plan (2016-2020), saw CHS transition into a recognised brand with geographical footprint across all the 47 counties in Kenya. CHS portfolio grew to a total cumulative funding of USD 196,105,364. CHS developed new systems to improve resource management, operational and program efficiency, these included; the Enterprise Resource Planning tool, CHS Reporting and Information System, V-Lab: Patient sample Barcoding, Heroes Mobile Application among others.

Our third strategic transition comes in the wake of a changing operating environment which includes: the COVID 19 pandemic, scale up of technology (5G, blockchain and artificial intelligence) and the dynamic workplace of the future. The 3rd strategic plan therefore focuses on adapting to these factors through five innovative goals grounded on five thematic areas: Health, Technology, People, Social Impact, and Business Development.

Dr Paul Wekesa
Chief Executive Officer (CEO), CHS
Currently taking care of approximately 16% (177,626) People Living with HIV (PLHIV) in Kenya

Made the biggest investment in Electronic Medical Records (EMR) with 253 facilities implementing EMR constituting 19% of the 1,304 EMR sites in the country
CHS has committed to consistently serve communities across Kenya through the implementation of HIV and TB services while strengthening all the core components of the health systems. These include supportive functions such as laboratory and pharmacy systems, monitoring and evaluation (M&E), human resources for health, health care financing and leadership and governance. CHS has additionally strategically developed a close and trusted partnership with the Government of Kenya at national and county levels, with donors and other stakeholders for the delivery of sustainable health services.

The prosperity of a nation depends a lot on the productivity of its citizens, which depends on the health of its nation. CHS programming is structured around the World Health Organisation’s (WHO) six pillars of health systems strengthening, service delivery, health workforce, health information systems, accesses to essential medicines, leadership and governance and financing.

During the second strategic period CHS expanded into new program areas: Voluntary Medical Male Circumcision (VMMC), Key populations for HIV and differentiated service delivery (DSD). We reached 4,013,063 people with HIV testing services and linked 43,966 (90%) to life saving anti-retroviral therapy, and 344,068 and 2,423 people successfully notified and treated for drug sensitive and drug resistant TB respectively.
## KEY ACHIEVEMENTS DURING THE SECOND STRATEGIC PERIOD 2016-2020

### Strategic goal 1: Healthy communities through partnerships that strengthen health systems

| HIV Care                                                                 | • Cumulatively over ten years provided HIV testing services to 7,165,401 people, identified 103,138 HIV positive clients and linked 88,578 (90%) to life saving antiretroviral treatment (ART) Provided maternal and infant prophylaxis to 19,001 pregnant mothers and HEIs  
|                                                                         | • Provided 141,469 Voluntary Medical Male Circumcision services  
|                                                                         | • Reached 17,709 key population with a combination of prevention services (biomedical, behavioural, and structural interventions) in Machakos, Kitui, Makueni, and Muranga Counties  
|                                                                         | • 6,634 eligible clients have accessed PREP services at CHS supported facilities to reduce risk of HIV acquisition  
|                                                                         | • Made the biggest investment in Electronic Medical Records (EMR) with 253 facilities implementing EMR constituting 19% of the 1,304 EMR sites in the country  
| Successfully implemented HIV care program innovations                  | • Adoption of efficient HIV testing strategies (Partner Notification Services and eligibility screening) to improve HIV diagnosis  
|                                                                         | • Differentiated service delivery (DSD) models tailored to client needs Fast track models, Facility ART groups and Community ART groups leading to efficiency in the delivery of HIV care  
|                                                                         | • Operation Triple Zero (OTZ) intervention targeting adolescents.  
| Developed and implemented health innovations                           | • CRIS (CHS Reporting and Information System) for real time performance monitoring  
|                                                                         | • CHS SBS (CHS Sample Barcoding System) to improve turnaround time, and rejection rates from documentation errors  
|                                                                         | Texts for Adherence for appointment reminders reducing attrition and improving retention rates to 95% across projects  
| Tuberculosis care 2016-2019                                            | • Through support to NTLD, 344,068 and 2,423 people were successfully notified and treated for drug sensitive and drug resistant TB respectively.  
|                                                                         | • Improved access to TB diagnosis through scale-up of GeneXpert diagnostics by NTLD in country from 10 in 2013 to 189 in 2018.  
|                                                                         | • 707,274 GeneXpert tests were conducted with 188,006 patients with TB and 1,522 Rifampicin Resistant patients diagnosed.  

| Drug Resistant TB (DR TB) | Evidence for contemporary TB programming through the planning and conducting the 1st Post Independence Kenya National Tuberculosis Prevalence Survey 2016  
Finding missing persons with TB through roll out of Active Case Finding strategies. As a result, Kenya registered a 12% increase in TB cases in 2017, increasing case notification for the first time in 10 years.  
Strengthened the use of routine data for program planning. Engaged the International Union against TB (UNION) to develop an in-county customized “Principles of Tuberculosis Prevention and Care” training. Through this training, 322 county and sub county TB coordinators in 45 counties and 32 national level program officers trained to conduct data driven planning and implementation.  
Scaled up of the shorter-term regimen (STR) for eligible DR TB patients by conducting sensitizations in the 10 high burden DR TB counties that are responsible for 50% of the country’s DR TB burden. Following these sensitizations 2,329 DR TB patients were initiated on the STR in 2019.  
Successfully implemented TB care innovations:  
- DR TB clinical review meetings to provide high quality care for DR TB patients in 10 high burden counties for enhanced monitor and support  
- Partnership with lancet labs to support 7079 DR TB patient tests (2016-2018) to monitor adverse drug reactions |

| Strategic goal 2: Increase visibility and strategic partnerships | CHS recognized for its work and innovations in the delivery of high quality HIV and TB prevention, treatment and care services locally and globally including:  
- Health informatics conference-Viral load automation tool Atlanta, Georgia  
- International AIDS Society (IAS) – Community Service Delivery Models Hague, Netherlands  
- 50th Union World Conference on Lung Health – Use of ECHO in capacity building of local health care workforce capacity Hyderabad, India  
- INTEREST conference in Rwanda  
- Zambia (presentation TB screening and linkage in community based DSD models in Siaya county, Western Kenya)  
Hosted various local and international teams at the various CHS supported health facilities for benchmarking on Operation Triple Zero (OTZ) sites, DSD, Tuberculosis preventive therapy (TPT)  
Provided health information through various out of home campaigns and through our online platforms including the CHS website, Facebook, Twitter and e-newsletters.  
- Over 7k followers on Facebook  
- Over 2.9k Followers on Twitter  
- Over 1k impressions per post  
- Average of 750-800k hits per month on the website |
### Brand recognition locally and internationally

- Awards and recognitions include:
  - The Africa Leadership Award due to our exemplary work in HIV and TB
  - The CEO of the year award in Africa
  - The TB REACH global photo contest competition
  - The photo was displayed at the 49th Union Conference in the Hague, Netherlands and at the MC Gill Summer Institute in Infectious Disease and Global Health (Montreal, Canada)
    - Leading NGO in HIV AIDS 2019 report
    - 5th highest funded NGO in Kenya
    - 4th leading NGO in the utilization of funds

### Increased requests for partnerships

- Children’s Investment Fund Foundation (CIFF) due to creative and innovative approach towards health service delivery for adolescents living with HIV
- CHS received an invitation from CDC to apply for Key Populations Investment Fund (KPIF) barely six months into KP programming. This demonstrates CHS’s ability to diversify and deliver high quality services
- TB Alliance partnership for the roll out of the child friendly medicines placing Kenya as the first country to distribute the improved child friendly formulations of TB drugs
- Private public partnership in programming for TB – e.g. All Pack Industries
- Kenya Paediatrics Association (KPA)
- Dolutegravir study Assessment of periconceptional Dolutegravir use and risk of adverse pregnancy outcomes in Kenya (P576/08/2018)
- TB REACH wave 5

### Strategic Goal 3: New Business Development

- Expanded pool of funding through award of new grants; KPIF, CIFF, Shinda, Naishi, TB Reach, TB Alliance with total managed funds of USD 196,105,364 a 41.625% increase
- Re-awards including Tegemeza Plus project and TB ARC II activity
- New program areas such as Key populations, VMMC
- Growth of CHS institutional funds from KES 0 in 2015 to KES 34M 2020
- Established CHS Institute in 2019 for social enterprise as a sustainability initiative
- New partnerships established
- Engagement with associations- Kenya Paediatrics Association, Respiratory Society of Kenya
- Technical Expertise in Enterprise Resource Planning system: Offered Technical assistance to Counties and other NGOs.
- Engagement of private sector through leveraging on TB ARC advocacy initiatives
- Accredited Continuous Professional Development (CPD) provider
Strategic Goal 4: Growing People

- CHS increased the staff numbers from 33 in 2015 to 254 in 2020 to support expansion programs geared towards achievement of organizational goals.
- CHS has continuously promoted an open door policy and open communication that has resulted to highly levels of innovation, dynamism and creativity in development of health interventions.
- Adoption of the quarterly staff performance review system has improved performance tracking.
- Internal career progression- with 35 staff with internal promotions
- Average retention rate in the period was 95%

During the strategic period, CHS has built capacity of more than 380 staff and over 2,000 Ministry of Health personnel for enhanced performance through various approaches such as mentorship, CME, on/off job training, online courses, professional development and sponsored courses.

Strategic Goal 5: From Research to action

- Introduction of biannual program conferences with sharing best practices and innovations improved uptake of interventions within CHS.
- Four evaluation/research protocols developed and approved, CHS positioned to analyse program data and contribute to the existing body of knowledge in public health programming and research.
- Three data analysis and research writing workshops, which have empowered staff on scientific writing with 32 manuscripts in progress at different stages.
- Four manuscripts approved by CDC Atlanta for publication.
- Eight manuscripts submitted to CDC Atlanta for publication approval.
- Three manuscripts already published, about 10 publications are in the process of being developed.
- CHS abstract repository with over 100 abstracts.
- Partnership with international universities initiated.
- Supported the 1st Siaya annual scientific conference in partnership with Jaramogi Oginga Odinga University of Science and Technology (JOUST).
- Partnership with CDC and NASCOP in conducting a national HIV research study titled “Assessment of periconceptional Dolutegravir use and risk of adverse pregnancy outcomes in Kenya” (P576/08/2018) Award amount USD 90,000.
STRATEGIC GOAL 6: Resource Management and operational efficiency

- Enhancement of Ms. Dynamics Navision from a financial accounting package to a fully fledged ERP (Enterprise Resource Planning tool)
  - Reduced turnaround time from an average of 3-5 days to real time information availability for program managers using the business intelligence module
  - Automation of business processes to avail remote workflow hence collapsed geographical and physical barriers
  - Enhanced accountability and documentation availability through enhanced technology platforms

- Up to date policies responding to emerging business needs and regulatory environment.
- Online policy dissemination
- Training of staff on compliance (USAID rules & regulations 9, Project management 22, Corporate governance 6, IFRS 8, Fraud awareness 259)
- Development and adoption of a risk management framework
- Successfully completed 33 external audits and 12 system reviews in the strategic period
- Transition to Corporate Services in line with CHS leadership philosophy of service
- Implementation of service level agreements (SLA) aligning services from the Corporate Services Unit to Program teams
Goal 1: All of society well-being through a healthy-public approach, adaptive to local evidence

CHS seeks to contribute to a robust, strengthened, resilient and adaptive health system across all spheres of influence; locally, regionally, and globally. CHS appreciates that while health is a state of well-being, this state is dynamic and there is a need to identify and continuously respond to emerging health issues.

APPROACH

• Leverage on the progress made in the last 10 years, to sustain and cultivate strategic partnerships, increase pool of technical expertise and expand the current portfolio of programs
• Adopt technology and artificial intelligence to strengthen the emerging area of self-care, telemedicine, e-learning, tele-mentorship, and diagnostics
• Ensure programming is evidence-based, through health research and various interventions

OBJECTIVES

<table>
<thead>
<tr>
<th>Objective</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Objective 1</td>
<td>To position CHS as the preferred partner in the development and implementation of sustainable health models</td>
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<tr>
<td>Objective 2</td>
<td>To develop robust, resilient and integrative health systems to address existing and emerging health needs through a patient-centred approach</td>
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<td>Objective 3</td>
<td>To position CHS as a leader in health research in Kenya, the region, and globally</td>
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<td>Objective 4</td>
<td>To contribute to global health security initiatives</td>
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<td>Objective 5</td>
<td>To develop and adopt use of innovative e-health solutions in program design, implementation, monitoring, and evaluation</td>
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</table>

KEY INNOVATIONS

• Development and implementation of a CHS-South-to-South Technical Assistance Initiative aimed at building the capacity of local Public Health entities
• Development and implementation of a County Technical Support Initiative (CTSI) package
• ‘New Public Health Initiative’ Technical team in place with a detailed concept note on engagement of CHS in priority initiatives, and by population sub-groups
• CHS Research Unit and Hub establishment
• E-health initiatives developed to respond to identified health needs
Goal 2: Engage inspired and multi-competent individuals in a flexible work environment

CHS seeks to adopt and sustain innovative, dynamic, people-centred practices and strategies that will promote the engagement of all individuals whose values and beliefs are aligned to the overall organizational goals.

APPROACH
• Develop organizational policies that promote a flexible working arrangement to respond to the shift in the workplace
• Implement innovative staff recruitment and retention strategies to fit the organizational culture

OBJECTIVES

<table>
<thead>
<tr>
<th>Objective 1</th>
<th>To establish a flexible work arrangement that facilitates and responds to the novel and future work environment by 2021</th>
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<tr>
<td>Objective 2</td>
<td>To promote a culture of innovations by optimizing multi-competent, inspired, and passionate individuals who will add value to the organization</td>
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<td>Objective 3</td>
<td>To recruit and retain 95% of a dynamic workforce that will help achieve organizational goals</td>
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<td>Objective 4</td>
<td>To engage people in positioning the CHS brand</td>
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KEY INNOVATIONS
• Work from home policy and flexible work engagement
• Automation of the employee recruitment process
• Engagement and positioning of people as CHS brand ambassadors through initiatives such as friends of CHS, and alumni
Goal 3: Optimize adaptable, responsive and innovative technology for operational and programmatic excellence

CHS seeks to attain operational and programmatic excellence through developing, improving, and adopting innovative technologies that are adaptable and responsive to existing and emerging public health needs.

APPROACH
Develop distinguished, flexible, accessible, and secure solutions that accommodate the employee of the future.

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<td>To develop a one-stop, automated, decentralized, interoperable system that enhances utility and business intelligence by 2025</td>
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<tr>
<td>Objective 2</td>
<td>To enhance responsiveness to emerging market needs by innovating, developing, and adopting new technologies by 2025</td>
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<tr>
<td>Objective 3</td>
<td>To establish a robust information security framework that is responsive to CHS business processes and needs by 2022</td>
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</tbody>
</table>

KEY INNOVATIONS
- Establishment of a Technology Team of Experts (TToE)
- Establish an organizational “technology hub”
- Utilization of block chain technology document management & other emerging secure technologies
Goal 4: Leverage brand positioning for impact

CHS seeks to position itself nationally and globally as the preferred partner for health solutions, by amplifying the impact of its services to local communities; as well as enhancing the organisation's ability to identify with and tell the CHS brand story among its internal and external audiences.

APPROACH:
Develop and implement a communication strategy that seeks to consistently and creatively engage and retain the attention of CHS audiences while empowering them to share their CHS impact stories.

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<td>To document human interest stories highlighting CHS social impact</td>
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<td>Objective 2</td>
<td>Develop a brand story to optimize CHS brand visibility by 2021</td>
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<tr>
<td>Objective 3</td>
<td>Enhance CHS brand credibility to promote strategic partnerships</td>
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<tr>
<td>Objective 4</td>
<td>Enhance brand ambassadorship to promote CHS work</td>
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KEY INNOVATIONS

- CHS social impact innovations
- Positioning CHS as a thought leader in health
- CHS brand story
Goal 5: Grow CHS current business and develop a social enterprise through innovative approaches

CHS seeks to grow its portfolio and enhance its sustainability plan by venturing into social enterprise through its business arm CHS Institute Limited.

APPROACH
Develop and adopt a CHS Institute Limited strategic plan and business models that are susceptible to the ever changing financial, business and market needs landscape, while providing an avenue for staff to explore and demonstrate their untapped strengths.

OBJECTIVES

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<thead>
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<th>Objective 1</th>
<th>To harness opportunities from the firm foundation in the current business model for continued growth through 2025</th>
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<tr>
<td>Objective 2</td>
<td>To establish a firm foundation for the CHS Institute as a social enterprise and package product offerings through 2025</td>
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<tr>
<td>Objective 3</td>
<td>To grow CHS assets portfolio from USD 430,000 to USD1,000,000 by 2025</td>
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<tr>
<td>Objective 4</td>
<td>To brand and market at least eight product packages by 2022 and balance by 2025</td>
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<tr>
<td>Objective 5</td>
<td>To position the Institute as a partner in public health capacity building initiatives</td>
</tr>
</tbody>
</table>

KEY INNOVATIONS

- CHS Institute as a social enterprise
- CHS Institute positioning as a public health capacity building organisation