

COMPASSIONATE CARE FOR ALL

Launch Impact Report 2025

Building Kenya's First Scalable Community-Based Home Healthcare Model

Nyeri County, Kenya

September – December 2025

Bridging the gap between hospital discharge and safe recovery at home

EXECUTIVE SUMMARY

In September 2025, Compassionate Care For All launched a community-based home healthcare model to address a critical gap in post-hospital care in Kenya.

Within 4 months, we piloted a low-cost, high-impact care system combining caregiver training, home visits and telehealth support.

Key Results:

- ✓ 20 patients supported
- ✓ 20 caregivers trained
- ✓ 32 home visits conducted
- ✓ 60 telehealth consultations delivered
- ✓ 160 individuals reached through care networks

We proved:

A family-centered care model can significantly improve recovery outcomes at minimal cost, while reducing pressure on overstretched health systems.

THE URGENT PROBLEM

Across Kenya:

- ✓ Thousands of patients are discharged annually without structured home care
- ✓ Over 80% of caregiving is informal and untrained
- ✓ Rehabilitation services are urban-centered and inaccessible

Result:

Families manage complex conditions alone:

- Stroke recovery
- Dementia
- Chronic illness
- Disability and injury recovery
- Elderly related illness

Consequences:

- Preventable complications
- Hospital readmissions
- Caregiver burnout
- Loss of dignity in care

For low-income households → home care is not a choice, it is a necessity without support

OUR SOLUTION

We deliver a continuum-of-care model bridging hospital discharge and home recovery:

Core Components:

- Home-based rehabilitation support
- Practical caregiver training
- Telehealth monitoring
- Follow-up home visits
- Palliative care guidance
- Shared assistive device & rehab kit system

Innovation:

We shift care from institutions to households — safely, affordably, and sustainably.

THEORY OF CHANGE

Problem:

Caregivers lack skills, tools, and support.



Intervention:

Train caregivers + provide structured home care + enable telehealth + shared equipment access

**Outputs:**

Improved caregiving practices, increased confidence, better monitoring

**Outcomes:**

Reduced complications, improved recovery, lower system burden

**Impact:**

A scalable, community-driven home healthcare system in Kenya

GEOGRAPHIC FOCUS

📍 Nyeri County (Pilot Region)

Coverage:

- Nyeri Town
- Othaya
- Kieni

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Why Nyeri?

- High rural population
- Limited rehab services
- Strong community networks
- Nyeri has the highest rate of non communicable

IMPACT DATA

Metric	Result
Patients supported	20
Caregivers trained	20
Caregiver Champions	2

Home visits	32
Telehealth sessions	60
Total community reach	160

PATIENT OUTCOMES

Patients demonstrated:

- Improved medication adherence
- Better nutrition and recovery practices
- Early detection of complications
- Increased emotional wellbeing

Emerging insight: Home monitoring reduces risk escalation

CAREGIVER IMPACT

Caregivers reported:

- Increased confidence in care delivery
- Reduced stress and uncertainty
- Improved patient handling skills
- Stronger peer support networks

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Multiplier Effect:

1 trained caregiver → impacts entire household

1 trained caregiver benefits the entire household and future care situations

DELIVERY MODEL

Our model integrates:

- Home visits (high-touch care)
- Training (capacity building)
- Telehealth (low-cost scaling)
- Community champions (local ownership)
- Assistive device sharing (cost reduction)

Result: High-impact at low operational cost

COST EFFICIENCY & VALUE

Early pilot insights show:

- Telehealth reduces follow-up costs significantly
- Caregiver training reduces repeat interventions
- Preventing complications is far cheaper than hospital readmissions

WHY THIS MODEL WORKS

1. Caregiver-Centered Design

Builds long-term capacity, not dependency

2. Hybrid Care (Physical + Digital)

Balances cost and reach

3. Community Ownership

Ensures sustainability

4. Shared Equipment Model

Reduces financial barriers



CHALLENGES & RESPONSE

Challenge	Mitigation
Low awareness	Community education
Resource constraints	Telehealth integration
Transport barriers	Localized care delivery
Training gaps	Structured caregiver modules

SCALE PLAN 2026

Targets:

- 800 patients supported
- 500 caregivers trained
- 100 caregiver champions
- Expansion to 3 counties

New Additions:

- Mental health support for caregivers
- Expanded assistive device network

Transition: **Pilot** → **Scalable system**

WHY INVEST

This is a **high-leverage investment opportunity**:

- Proven early results
- Addresses a critical system gap
- Scalable across Kenya & Africa
- Cost-efficient model
- Strong community ownership

We are building the missing layer in Africa's healthcare system

SLIDE 16 — FUNDING OPPORTUNITY

We are seeking support (Cash or Inkind) support to:

- Scale to new regions
- Strengthen caregiver training systems
- Expand telehealth infrastructure
- Build assistive device networks

Opportunity:

Invest early in a model with national-scale potential

CONCLUSION

In just four months, we have demonstrated:

- Proof of concept
- Strong community adoption
- Measurable impact

With the right investment, this model can transform home healthcare access across Kenya.

SLIDE 18 — CONTACT

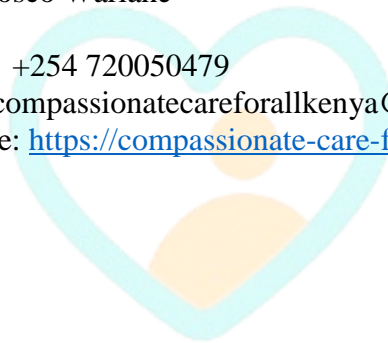
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