Complementary feeding is a key determinant of nutrition and health outcomes among infants and young children. Globally, government bodies in partnership with key stakeholders and policy-makers have made great efforts to advocate for and support the implementation optimum complementary feeding practices. However, malnutrition still remains the single greatest concern in Sub-Saharan region. Kenya has made progress in exclusive breastfeeding and reduction of rates of acute malnutrition, but the recent research results from the demographic health survey have indicated gaps in complementary feeding practices among care-givers across the counties. Out-patient therapeutic programs (OTPs) established in Nairobi County aim at addressing severe acute malnutrition (SAM) affecting children 6-59 months of age. There are 6 OTP centres in Kamukunji sub-county managing SAM children on an out-patient system. There is limited literature on the knowledge, attitude and practices on complementary feeding among the caregivers of the children admitted into the OTP centres. The main purpose of this study is to determine the knowledge, attitudes and practices (KAP) on complementary feeding among caregivers with children 6-23 months of age admitted into OTP centres in Kamukunji sub-County. The study will adopt a cross-sectional analytical study design. A sample size of 200 mothers from four OTP centres in Kamukunji sub-county will participate in the study. Data will be collected from the mothers using researcher-administered structured questionnaires and focused group discussions (FGDs) guide, from OTP staffs using Key Informants Interview (KII) guide. Information to be collected will be on care-givers’ knowledge, attitude and practices on complementary feeding. Data will be checked, coded and analysed using SPSS software (version 22). Descriptive statistics (frequency, mean, median, standard deviation and percentages) will be used to summarize data on demographic and socio-economic characteristics of the study population and complementary feeding practices. Nutri-survey software will be used to analyse nutrient intake in the previous 24 hours. Dietary diversity score (DDS) will be used to analyse the diet diversity supplied to the children by the care-givers where consumption of at least four food groups per day will be considered as the minimum dietary diversity. Knowledge of caregivers will be summarized through explanatory notes percentages established against the current complementary feeding knowledge indicators. Chi-square test will be used to establish associations between categorical variables such as consumption of different food groups and demographic and socio-economic status of the care-givers and dietary intake of children. T-test and ANOVA will be used to test for differences between continuous variables such as care-giver’s income levels and the child’s minimum meal frequency. A p-value of <0.05 will be used as the criterion for statistical significance. The FGDs will be analysed using content analysis, to get a summary of textual or non-numeric responses. The study findings will be useful to caregivers, the Ministry Health (MoH), Division of Clinical Nutrition, and Non-governmental organisations.