The journey towards NQAS Certification is not a short trek. A journey that began way back in October 2001, when the first female baby was delivered at Nartiang PHC, now in her late adolescence (pic-1), whose delivery was, then, conducted in a non-existent labor room, assisted by a dhai and a grade-iv staff. Back then, active management of third stage of labor was unheard of, and NRHM was still at the conception stage. Time flew by and govt. support got more active. In 2007 NRHM provided manpower support with the posting of 3 contractual GNM’s. Untied fund and RKS grant gave us the liberty in financial decisions and empower us in the local purchase of emergency medicines and other consumables. Institutional deliveries became more routine and inpatients’ treatment began to pick up.
On September 1, 2010, RKS made local arrangement by engaging a local rice stall owner in providing free diet to all mothers who delivered in the PHC (pic-2). One year later, GOI launched the JSSK program!

October 12, 2010, Nartiang PHC became the first public health institution in the state to perform a No-Scalpel Vasectomy (NSV) on a 29 year-old family man (pic-3). In a society where male participation in family planning was unheard of, an orthodox group of Shillong-based alfa male were pulling us down in the local print media. We did not stop there.
To improve access to Adolescent Friendly Health Services, a special clinic, ‘Friends’ Corner’ was inaugurated by the Local MDC on 31st March 2011 (pic-4). A quality initiative at its best, in as much as exit interview of adolescent clients with regard to the satisfaction level of their experience with the clinic, has been part and parcel of the clinic till date.

Pic-4: Inauguration of Friends’ Corner at Nartiang PHC on 31st March 2011
At Nartiang PHC, the community has been doing a great deal of Samaritan work by donations towards patients’ welfare. We have been receiving donations from members of the community, friends and well-wisher of Nartiang PHC, which have been contributing to the asset of the Rogi Kalyan Samiti (RKS). Some of the donations are mentioned below:

**DONATION RECEIVED BY RKS NARTIANG PHC**

<table>
<thead>
<tr>
<th>Sr.No.</th>
<th>Donor</th>
<th>Address</th>
<th>Item donated</th>
<th>Date of receipt by RKS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Shri.B.Sharma</td>
<td>Pharma Distributor, Shillong</td>
<td>Kent Maxx RO water filter</td>
<td>30(^{th}) April 2009</td>
</tr>
<tr>
<td>2</td>
<td>Shri. S.Sariang</td>
<td>Ex-Headman, NartiangModop</td>
<td>Portable Power Inverter</td>
<td>10(^{th}) August 2009</td>
</tr>
<tr>
<td>3</td>
<td>Rev. K.S.Shylla</td>
<td>Pastor In charge Nartiang Presbyterian Church</td>
<td>Rice Cooker(electric)</td>
<td>18(^{th}) August 2009</td>
</tr>
<tr>
<td>4</td>
<td>Shri M.Shylla &amp; Mrs. W.Pale</td>
<td>Community members NartiangModop</td>
<td>Oxygen Cylinder with flow meter &amp; trolley</td>
<td>30(^{th}) September 2009</td>
</tr>
<tr>
<td>5</td>
<td>Shri. (L) J.K.Passah</td>
<td>Ex-President SeinrajJowai</td>
<td>Oxygen cylinder with flow meter &amp; trolley</td>
<td>5(^{th}) February 2011</td>
</tr>
<tr>
<td>6</td>
<td>Smt. EmbokTalang</td>
<td>Community member NartiangModop</td>
<td>Heater cum blower</td>
<td>7(^{th}) February 2011</td>
</tr>
<tr>
<td>7</td>
<td>Shri PheinNonglein</td>
<td>Businessman, Mynsgnat village</td>
<td>LCD TV for Friends’ Corner</td>
<td>7(^{th}) June 2011</td>
</tr>
<tr>
<td>8</td>
<td>Shri. PheinNonglein</td>
<td>Businessman, Mynsgnat village, Ex-EM JHADC</td>
<td>1.5Kva Inverter</td>
<td>10 July 2012</td>
</tr>
<tr>
<td>9</td>
<td>We Care Foundation</td>
<td>Shillong</td>
<td>100 RDKs for Hep-B and Hep-C and 150 doses of Hepatitis-B Vaccines</td>
<td>9-12-2017</td>
</tr>
<tr>
<td>10</td>
<td>Roshan Joshi</td>
<td>Pharma Distributor, Shillong</td>
<td>Fire Extinguishers, 3 nos.</td>
<td>September 2018</td>
</tr>
</tbody>
</table>
Environment is one of the determinants of health, as depicted in the traditional triangular relation between the Agent, Host and Environment. *Direct discharge of liquid waste is a curse to the local ecosystem.* In August 2015 we got an official directive to find out ways and means for safe disposal of liquid waste as mandated by the NGT. In January 2016, after lots of consultations, we came up with the idea of how to indigenously treat the liquid waste and dispose it without causing any harm to the local environment. **We coined the word ‘BIOWAT’ – an acronym for BIO-medical Waste Water Treatment.** The BIOWAT is a simple and indigenous system of liquid waste treatment. It took us 5 months to conceptualize the system and 2 months for executing the construction work.

September 1 2016 - the first batch of liquid waste underwent treatment at the BIOWAT and some of the effluent’s parameters were matching with the standards as prescribed by the State Pollution Control Board.

On 26 February 2017, we were selected to present the BIOWAT, before a distinguished jury, at one of India’s biggest conglomerations of Innovations coming from different fields, the ‘SKOCH SUMMIT’ which was held at New Delhi.

In March 2017 we were informed that the BIOWAT had been chosen as one of the 50 Best Innovations in Health Care in India. On 17th March 2017 we were invited to collect the SKOCH Order of Merit Award, during the 47th Skoch Summit at New Delhi.

On 18 March 2017, we were so happy that the BIOWAT had been conferred the ‘**Skoch Health Award 2017**’ Silver.
Pic-5: The BIOWAT conferred the SKOCH Health Award 2017 at New Delhi on March 18 2017
In July 2017, National Health System Resource Center (NHSRC), New Delhi, selected the BIOWAT amongst the Health Ministry’s Best Practices. We were invited to give a power point presentation at the 4th National Summit on Good Replicable Practices & Innovations in Health System in India, organized by MOHFW Govt. of India, which was held on the 7th July 2017 at Indore in Madhya Pradesh (pic-6) The BIOWAT was included in the Coffee Table Book which was released during the summit by the Honorable Speaker of Lok Sabha, Smti. Sumitra Mahajan.

Pic-6: Presentation of the BIOWAT at the 4th National Summit on Good, Replicable, Practices and Innovations in Public Health Care Systems on 7th July 2017 at Indore Madhya Pradesh (Dr. R. Pohsnem, sitting 3rd from left during the post-presentation discussion)
In April 2016 we occupied and began to utilize the newly built Maternal and New Born Care Unit, in which we run the ANC clinic, Immunization Clinic, ANC laboratory, Cold Chain Room, Delivery Room and Post Natal ward

Fresh with the inspiration we received at the national level, we formed the Quality Assurance Team (QAT) on July 31 2017. We conducted the baseline assessment of the PHC against NQAS. Regular meeting of the QAT were being held. Gaps were identified and action planning being done.

On 9\textsuperscript{th} December 2017, ‘We Care Foundation’, Shillong, donated 100 kits of HBV and HCV RDKs and 150 doses of Hepatitis-B vaccines to Nartiang PHC. Immediately we screened all the staffs for HBV and HCV and vaccination of all the staffs against Hepatitis –B virus was completed. We are thankful to Dr.B. Medhi, chairperson ‘We Care Foundation’, for their kind contribution toward the safety of our staffs (pic-7)
In May 2018 with the help of HE wing and utilizing the revenues from MHIS-III and back up by RKS fund we set up the Medical Record Room as per provision of the WHO Medical Record Guideline for developing countries.

![Medical Record Room at Nartiang PHC](pic-8)

In June 2018 we procured a B-Class Pre-vacuum portable autoclave by utilizing the RKS fund.

In June 2018, the B-class pre-vacuum autoclave was installed by a company engineer and training of staff nurses was given by the engineer of the company. The B-class autoclave, which conforms to the European Standards for Advancement of Medical Devices, has eliminated some
of the process’s wastes which are inherent in the traditional N-class (gravity) autoclave. Now, staff nurse on duty in the labor room can do multitasking - running a sterilization cycle in the nursing station and conducting delivery in the labor room - simultaneously. (Pic-9&10)

The Quality Team prepared the Quality Improvement manual along with the relevant SOPs and Hospital wide policies and orientation of the process owners was conducted and the SOPs and Hospital wide Policies were issued on 1st September 2018.

Patient Satisfaction surveys were conducted on regular (monthly) basis and Corrective and Preventive Action (CAPA) were carried out by the facility in charge.

State Assessment of the PHC against NQAS was completed on 18th September 2018.

Two rounds of fire mock drill were conducted, first round on 5th September 2017 and 2nd round 21st September 2018. Fire safety training for all category of staffs were given alongside the mock drill. Resource persons were called in from the Fire & Emergency Services Department Jowai. (pic-11 &12)
To prepare the Fire Safety and Exit Plan we took help from Shri. L. Rymbui, consultant architect Jowai Municipal Board, and ex-architect MUDA Shillong. The plan was ready well ahead of the 2nd round of fire mock drill.

Utilizing the OPD revenue, we engaged Saraighat Fire Solution Guwahati for installation of the Fire Detection and Alarm System (FIDAS), (pic-13), which they did on 18th September 2018. The firm installed the Manual call points and automatic smoke detectors at strategic points of the PHC’s general building and Maternal and Newborn Care Unit – as per the fire safety plan. The firm also installed the fire extinguishers as per recommendation of the fire safety plan.

Following the installation work we wrote to the Superintendent of Police Fire & Emergency Services, Fire Brigade Shillong, requesting for fire safety audit of the PHC building. On 10th October 2018, a team from the office of SP (Fire Safety and Emergency Services), Shillong, conducted the fire safety audit of the building and they were satisfied with the fire readiness of the facility. On 24th October 2018 a Fire Safety Certificate was issued to the PHC by the SP Fire & Emergency Services Shillong.(pic-14)

*We are proud to say that we are the first public health institution (primary & secondary level) to have a fire safety plan and fire safety certificate in place.*
By 1st November 2018 we were ready with all the Statutory and Legal Requirement of NQAS applicable to a 24x7 PHC.

November 2018 to January 2019 was the period during which fine tuning of key processes and training and mentoring of all categories of staffs took place. It was also the time period during which closure of remaining gaps were executed.

Finally, the external assessment was undertaken on 6th and 7th February. (Pic-15)
We had our weaknesses, gaps which could not be closed at all—the National Program for the Care of the Elderly, the National Program for control of Deafness, the NCD program, the National Tobacco Control Program.

However, we realized we must harness our core competency—checkpoints which we must get full compliance. Those were our strengths which we could not compromise, and those were the credentials which catapulted us to the Full Certification.

On 10 May 2019, Ministry of Health & Family Welfare, formally declared that Nartiang PHC meets the Full Certification Criteria under the National Quality Assurance Standards (NQAS) program. (pic-16)
We owe our gratitude to the following for helping us reached our destination

1. The Mission Director NHM cum Secretary Health & Family Welfare, Shri. Praveen Bakshisir for handholding us in the journey
2. The Director Health Services (MI)
3. The Director Health Services (MCH & FW)
4. The Deputy Commissioner West Jaintia Hills, Shri LN Garod, for his exemplary support in making sure that one of the areas of concerns ‘Patients Rights’ under NQAS is fully complied with
5. The Superintendent of Police (Fire & Emergency Services) Shillong, for helping us with the fire safety audit of the PHC building.
6. Dr. (Mrs) J. Lyngwa, Retired Joint DHS and NQAS External Assessor, for being our mentor
7. Dr. (Mrs) L. Challam, Joint DHS for supporting us
8. RRC team led by Dr. A. Roy and RRC consultants viz., Dr. Mosmi, Dr. Suchitra and Dr. Anup for supporting us in the final preparation
9. The Executive Engineer HE Wing Shillong, for helping us with the civil works
10. The Executive Engineer PWD North Division West Jaintia Hills, Jowai, Shri D.Langstang, for helping with the approach road and the directional signage toward the PHC is completed well ahead of time.
11. Smt. B.Blah, MCS, BDO Thadlaskein Block cum Chairperson RKS Nartiang PHC for guiding us in the management of RKS.
12. Past & Present DM &HO of West Jaintia Hills for supporting us
13. Shri.E.Pala, Ex SDO HE Wing West Jaintia Hills and Shri.Dhar Present SDO HE Wing West Jaintia Hills, for helping us being able to close the structural gaps well in time.
14. Shri. LastmediRymbui, Ex ArchitechMUDA Shillong, for making the Fire Safety Plan of the PHC building, and for doing it for free without even charging the travelling cost from Shillong to Nartiang and back.
15. Shri. M.Sungoh, Junior Engineer PWD North Division, for kindly helping us with the GPS Layout of the PHC in the nick of time.
16. Shri Harsh JhunJhun Wala of Eastern Panorama Offset and his team, bah Alwin, Bah Reynold and Kong Ewa for helping us with the design of the departmental bilingual directional signage, it took nearly two months for the design, and online proofreading of 90 nos. of signage before the final print and for being patient with the delay in payment of the bill from our side.
17. Dr.(Ms) S.Surong, MO Nartiang PHC for her exemplary commitment and support all the while
18. Dr.(Mrs) E Garod, Dental Surgeon, Nartiang PHC for being in the team and giving feedback always.
19. To all the staff nurses for being 100% all the time
20. Lab technicians for good work
21. Grade-IV staffs, especially Smt. C.Phalyngki, a casual labor, who is committed to the 3 bucket system, managing the laundry and toilets 365 days a year despite a meagre payment.
22. Shri. Paulus Thubru, Health Assistant, who is being the main pillar of the quality journey.
23. Shri. Micky Donald Rymbai, Smt.M.Phalyngki, persons behind the Bin Card System
24. Quality team, and other committee members
25. Donors of RKS, members of RKS for supporting us
26. Staffs of 108 EMRI, Nartiang Station.
27. 3rd year GNM students of Dr.Norman Tunnel Hospital, Jowai
28. Sr.Station Officer Fire & Emergency Services, Jowai, LFM. Lamare & his members for having kindly organized the Fire mock drills in the PHC