

#### <u>CIVIL SURGEON, CIVILHOSPITAL, FARIDABAD</u> <u>NOTICE INVITING e-Tender</u>

Civil Surgeon, Faridabad on behalf of Health Department ,Haryana invites online bids on the website: https://haryanaeprocurement.gov.in from eligible bidder having valid license and other eligible criteria given in tender documents for a period of one year extendable to another one year subject to satisfactory services for below mentioned work :-

Sr No	Particulars of Tender	Estimated cost (Rs.)	Bid Document cost + e processing	EMD	Date of start of downloading of tender document.	Last Date of submission of bid
1.	Appointment of Concurrent Auditor for District Health & Family Welfare Society Faridabad for the F.Y. 2018-19 for Audit of all programs under NHM & Non NHM	45000	1000+1000= 2000	2500	10.12.2018 from 10:30 A.M.	21.12.2018 Upto 13.:00 P.M.

Under this process, the Pre-qualification/ Technical online bid Application as well as online Price Bid shall be invited at single stage under two covers i.e. PQQ/Technical & Commercial Envelope. Eligibility and qualification of the Applicant will be first examined based on the details submitted online under first cover (PQQ or Technical) with respect to eligibility and qualification criteria prescribed in this Tender document. The Price Bid under the second cover shall be opened for only those Applicants whose PQQ/ Technical Applications are responsive to eligibility and qualifications requirements as per Tender document.

The payment for Tender Document Fee and e-Service Fee shall be made by eligible bidders online directly through Debit Cards & Internet Banking Accounts and the payment for EMD can be made online directly through RTGS/NEFT Please refer to 'Online Payment Guideline' available at the Single e-Procurement portal of GoH (Govt. of Haryana) and also mentioned under the Tender Document.

Intending bidders will be mandatorily required to online sign-up (create user account) on the website https://haryanaeprocurement.gov.in to be eligible to participate in the e-Tender. He / She will be required to make online payment of (Mention EMD Amount) towards EMD fee in due course of time. The intended bidder fails to pay EMD fee under the stipulated time frame shall not be allow to submit his / her bids for the respective event / Tenders. The interested bidders must remit the funds at least T+1 working day (Transaction day + One working Day) in advance i.e. on or before (Mention Date & Time); and make payment via RTGS /NEFT to the beneficiary account number specified under the online generated challan. The intended bidder / Agency thereafter will be able to successfully verify their payment online, and submit their bids on or before the expiry date & time of the respective events/Tenders at https://haryanaeprocurement.gov.in.

The interested bidders shall have to pay mandatorily e-Service fee (under document fee – Non refundable) of Rs.1000/- (Rupee One Thousand Only) online by using the service of secure electronic gateway. The secure electronic payments gateway is an online interface between bidders & online payment authorization networks. The Payment for document fee/ e-Service fee can be made by eligible bidders online directly through Debit Cards & Internet Banking.

The Bidders can submit their tender documents (Online) as per the dates mentioned in the key dates:-

Key Dates



Sr. No.	Department Stage	Bidder's Stage	Start date and time	Expiry date and time
1		Tender Document Download and Bid Preparation/Submission	10.12.2018 from 10:30 A.M.	21.12.2018 Upto 13.:00 P.M.
2	Technical Bid Opening	21/12	2018 at 15:00 PM	
3	Financial Bid Opening	Will be intimated later on		

#### **Important Note:**

- 1) The Applicants/bidders have to complete 'Application / Bid Preparation & Submission' stage on scheduled time as mentioned above. If any Applicant / bidder failed to complete his / her aforesaid stage in the stipulated online time schedule for this stage, his / her Application/bid status will be considered as 'Applications / bids not submitted'.
- 2) Applicant/Bidder must confirm & check his/her Application/bid status after completion of his/her all activities for ebidding.
- 3) Applicant/Bidder can rework on his/her bids even after completion of 'Application/Bid Preparation & submission stage' (Application/Bidder Stage), subject to the condition that the rework must take place during the stipulated time frame of the Applicant/Bidder Stage.
- 4) In the first instance, the online payment details of tender document fee + e-Service and EMD & PQQ/Technical Envelope shall be opened. Henceforth financial bid quoted against each of the item by the shortlisted bidder/Agency wherever required shall be opened online in the presence of such bidders/ Agency who either themselves or through their representatives choose to be present. The bidder can submit online their bids as per the dates mentioned in the schedule/Key Dates above.

The bids shall be submitted online in two separate envelopes:

#### **Envelope 1: Technical Bid**

The bidders shall upload the required eligibility & technical documents online in the Technical Bid.

#### **Envelope 2: Commercial Bid**

The bidders shall quote the prices in price bid format under Commercial Bid.

#### Instructions to bidder on Electronic Tendering System

## These conditions will over-rule the conditions stated in the tender documents, wherever relevant and applicable.

#### 1. **Registration of bidders on e-Procurement Portal:-**

All the bidders intending to participate in the tenders process online are required to get registered on the centralized e

- Procurement Portal i.e. <u>https://haryanaeprocurement.gov.in</u>. Please visit the website for more details.

#### 2. **Obtaining a Digital Certificate:**

2.1 The Bids submitted online should be encrypted and signed electronically with a Digital Certificate to establish the identity of the bidder bidding online. These Digital Certificates are issued by an Approved Certifying Authority, by the Controller of Certifying Authorities, Government of India.

**2.2** A Digital Certificate is issued upon receipt of mandatory identity (i.e. Applicant's PAN Card) and Address proofs and verification form duly attested by the Bank Manager / Post Master / Gazette Officer. Only upon the receipt of the required documents, a digital certificate can be issued. For more details please visit the website – https://haryanaeprocurement.gov.in.



**2.3** The bidders may obtain Class-II or III digital signature certificate from any Certifying Authority or Subcertifying Authority authorized by the Controller of Certifying Authorities or may obtain information and application format and documents required for the issue of digital certificate from.

**2.4** The bidder must ensure that he/she comply by the online available important guidelines at the portal https://haryanaeprocurement.gov.in for Digital Signature Certificate (DSC) including the e-Token carrying DSCs.

**2.5** Bid for a particular tender must be submitted online using the digital certificate (Encryption & Signing), which is used to encrypt and sign the data during the stage of bid preparation. In case, during the process of a particular tender, the user loses his digital certificate (due to virus attack, hardware problem, operating system or any other problem) he will not be able to submit the bid online. Hence, the users are advised **to keep a backup of the certificate** and also keep the copies at safe place under proper security (for its use in case of emergencies).

**2.6** In case of online tendering, if the digital certificate issued to the authorized user of a firm is used for signing and submitting a bid, it will be considered equivalent to a no-objection certificate /power of attorney / lawful authorization to that User. The firm has to authorize a specific individual through an authorization certificate signed by all partners to use the digital certificate as per Indian Information Technology Act 2000. Unless the certificates are revoked, it will be assumed to represent adequate authority of the user to bid on behalf of the firm in the department tenders as per Information Technology Act 2000. The digital signature of this authorized user will be binding on the firm.

2.7 In case of any change in the authorization, it shall be the responsibility of management / partners of the firm to inform the certifying authority about the change and to obtain the digital signatures of the new person / user on behalf of the firm / company. The procedure for application of a digital certificate however will remain the same for the new user.

**2.8** The same procedure holds true for the authorized users in a private/Public limited company. In this case, the authorization certificate will have to be signed by the directors of the company.

#### 3 **Pre-requisites for online bidding:**

In order to operate on the electronic tender management system, a user's machine is required to be set up. A help file on system setup/Pre-requisite can be obtained from Nextenders (India) Pvt. Ltd. or downloaded from the home page of the website - <u>https://haryanaeprocurement.gov.in</u>. The link for downloading required java applet & DC setup are also available on the Home page of the e-tendering Portal.

#### 4 <u>Online Viewing of Detailed Notice Inviting Tenders:</u>

The bidders can view the detailed N.I.T and the time schedule (Key Dates) for all the tenders floated through the single portal eProcurement system on the Home Page at <u>https://haryanaeprocurement.gov.in</u>.

#### 5 **Download of Tender Documents:**

The tender documents can be downloaded free of cost from the E- procurement portal <u>https://haryanaeprocurement.gov.in</u>

#### 6 Key Dates:

The bidders are strictly advised to follow dates and times as indicated in the online Notice Inviting Tenders. The date and time shall be binding on all bidders. All online activities are time tracked and the system enforces time locks that ensure that no activity or transaction can take place outside the start and end dates and the time of the stage as defined in the online Notice Inviting Tenders.



#### 7 <u>Online Payment of Tender Document Fee, eService fee , EMD fees & Bid Preparation & Submission (PQQ/</u> <u>Technical & Commercial/Price Bid):</u>

i) Online Payment of Tender Document Fee + e-Service fee:

The online payment for Tender document fee, eService Fee & EMD can be done using the secure electronic payment gateway. The Payment for Tender Document Fee and eService Fee shall be made by bidders/ Vendors online directly through Debit Cards & Internet Banking Accounts and the Payment for EMD shall be made online directly through RTGS / NEFT. The secure electronic payments gateway is an online interface between contractors and Debit card / online payment authorization networks.

ii) **PREPARATION & SUBMISSION Of online APPLICATIONS/BIDS:** 

Detailed Tender documents may be downloaded from e-procurement website (<u>https://haryanaeprocurement.gov.in</u>) and tender mandatorily be submitted online.

Scan copy of Documents to be submitted/uploaded for Prequalification or Technical bid under online PQQ/ Technical Envelope: The required documents (refer to DNIT) shall be prepared and scanned in different file formats (in PDF /JPEG/MS WORD format such that file size is not exceed more than 10 MB) and uploaded during the online submission of PQQ or Technical Envelope.

## FINANCIAL or Price Bid PROPOSAL shall be submitted mandatorily online under Commercial Envelope and original not to be submitted manually)

#### 8. ASSISTANCE TO THE BIDDERS:-

In case of any query regarding process of etenders and for undertaking training purpose, the intended bidder can also avail the following and can contact service provider as per below:

**Office Timings of Help-desk support** for Single e Procurement Portal of Government of Haryana-Technical Support Assistance will be available over telephone Monday to Friday (09:00 am. to 5:30 pm) & Training workshop will be conducted on

every 1st, 2nd Friday (from 3:30 pm upto 6:00 pm) and 4th Saturday (from 11:30 am upto 3:00 pm) of each month.

All queries would require to be registered at our official <u>email-chandigarh@nextenders.com</u> for on- time support (Only those queries which are sent through email along with appropriate screenshots or error description will be considered as registered with the Help-desk)

#### Important Note:-

(a) Any intending bidder can contact the helpdesk on or before prior to 4 hours of the scheduled closing date & time of respective e-Auction/ Tender event.

(b) For queries pertaining to e-Payment of EMD, please contact the helpdesk at least 2 business days prior to the closing date & time of e-Auction/Tender event.

(c) Help-desk support will remain closed during lunch break i.e. from 1:30 PM up to 2:15 PM on each working day.

#### Schedule for Training:

Training workshop will be held on 1st, 2nd Friday (from 3:30 pm upto 6:00 pm) and 4 <sup>th</sup> Saturday (from 11: 30 am upto 3:00 pm) of each month at following addresses:		
Nextenders (India) Pvt. Ltd	Nextenders (India) Pvt.Ltd.	Nextenders (India) Pvt. Ltd.,
Municipal Corporation	Public Health Division No. 2	Nirman Sadan (PWD B&R),
Faridabad, Near B.K.Chowk,	Hisar, Model Town Opp. N.D	Plot No 01, Basement,
Opp. B.K.Hospital, NIT,	Gupta Hospital,	Dakshin Marg, Sec- 33 A,
Faridabad	Hisar	Chandigarh -160020
Contact no.	Contact: 9034357793	For Support- 1800-180-2097,
9310335475		0172-2582008-2009



For Support Call – 1800-180-2097

## Haryana e-Procurement Help Desk Office will remain closed on Saturday (except 4<sup>th</sup> Saturday), Sunday and National Holidays

**NOTE:-** Bidders participating in online tenders shall check the validity of his/her Digital Signature Certificate before participating in the online Tenders at the portal <u>https://haryanaeprocurement.gov.in</u>.

For help manual please refer to the 'Home Page' of the e-Procurement website at <u>https://haryanaeprocurement.gov.in</u>, and click on the available link 'How to...?' to download the file.

#### **Guideline for Online Payments in e-tendering**

Post registration, bidder shall proceed for bidding by using both his digital certificates (one each for encryption and signing). Bidder shall proceed to select the tender he is interested in. On the respective Department's page in the e-tendering portal, the Bidder would have following options to make payment for tender document & EMD:

A. Debit Card

B. Net Banking

C. RTGS/NEFT

Operative Procedures for Bidder Payments

#### A) Debit Card

The procedure for paying through Debit Card will be as follows.

(i) Bidder selects Debit Card option in e-Procurement portal.

(ii) The e-Procurement portal displays the amount and the card charges to be paid by bidder. The portal also displays the total amount to be paid by the bidder.

(iii) Bidder clicks on "Continue" button

(iv)The e-Procurement portal takes the bidder to Debit Card payment gateway screen.

(v) Bidder enters card credentials and confirms payment

(vi) The gateway verifies the credentials and confirms with "successful" or "failure" message, which is confirmed back to e-Procurement portal.

(vii) The page is automatically routed back to e-Procurement portal

(viii) The status of the payment is displayed as "successful" in e-Procurement portal. The e-Procurement portal also generates a receipt for all successful transactions. The bidder can take a print out of the same,

(ix) The e-Procurement portal allows Bidder to process another payment attempt in case payments are not successful for previous attempt.

#### B) Net Banking

The procedure for paying through Net Banking will be as follows.

(i) Bidder selects Net Banking option in e-Procurement portal.

(ii) The e-Procurement portal displays the amount to be paid by bidder.

(iii) Bidder clicks on "Continue" button

(iv) The e-Procurement portal takes the bidder to Net Banking payment gateway screen displaying list of Banks

(v) Bidder chooses his / her Bank

(vi) The Net Banking gateway redirects Bidder to the Net Banking page of the selected Bank

(vii) Bidder enters his account credentials and confirms payment

(viii) The Bank verifies the credentials and confirms with "successful" or "failure" message to the Net Banking gateway which is confirmed back to e-Procurement portal.

(ix) The page is automatically routed back to e-Procurement portal

(x) The status of the payment is displayed as "successful" in e-Procurement portal.

The e-Procurement portal also generates a receipt for all successful transactions. The bidder can take a print out of the same. (xi) The e-Procurement portal allows Bidder to process another payment attempt in case payments are not successful for previous attempt.

C) RTGS/ NEFT



The bidder shall have the option to make the EMD payment via RTGS/NEFT. Using this module, bidder would be able to pay from their existing Bank account through RTGS/NEFT. This would offer a wide reach for more than 90,000 bank branches and would enable the bidder to make the payment from almost any bank branch across India.

I. Bidder shall log into the client e-procurement portal using user id and password as per existing process and selects the RTGS/NEFT payment option.

ii. Upon doing so, the e-procurement portal shall generate a pre-filled challan. The challan will have all the details that is required by the bidder to make RTGS-NEFT payment.

iii. Each challan shall therefore include the following details that will be pre-populated:

- Beneficiary account no: (unique alphanumeric code for e-tendering)
- Beneficiary IFSC Code:
- Amount:
- Beneficiary bank branch:
- Beneficiary name:

iv. The Bidder shall be required to take a print of this challan and make the RTGS/NEFT on the basis of the details printed on the challan.

v. The bidder would remit the funds at least T + 1 day (Transaction + One day) in advance to the last day and make the payment via RTGS / NEFT to the beneficiary account number as mentioned in the challan.

vi. Post making the payment, the bidder would login to the e-Tendering portal and go to the payment page. On clicking the RTGS / NEFT mode of payment, there would be a link for real time validation. On clicking the same, system would do auto validation of the payment made.

#### D) Over-the-Counter (OTC)

This solution shall allow the bidder having account with ICICI Bank, to make the payment from any CMS enabled Branch of ICICI Bank in India. Bidders can make the payment via cash(if amount is <=  $\Box$  49,999), Demand Draft or ICICI Bank Cheque.

The procedure for paying through OTC mode is as follows:

(i) Bidder selects Over-the-Counter remittance option in e-Procurement portal.

(ii) The e-Procurement portal displays the amount to be paid. Bidder chooses the bank account no. for refund of the amount.

(iii) Bidder clicks on "Continue" button

(iv)The e-Procurement portal displays the details of payment. Bidders clicks on "print \_challan" and prints the OTC challan.

(v) Bidder submits the OTC challan at the counter of any designated branch of ICICI Bank with Cash / Demand Draft / ICICI Bank Cheque (Payment in cash is allowed upto Rs. 49,999/-)

(vi) ICICI Bank verifies the URN (format to be discussed and decided) and Amount with e- Procurement portal prior to accepting the payment

(vii) On successful verification from e-Procurement portal, ICICI Bank accepts the payment. In case of failure, ICICI Bank shall return back the OTC challan and payment to the Bidder.

(viii) ICICI Bank will commit the payment transaction (in case of successful verification from e- Procurement portal) and sends the Bank Transaction Number (I-Sure Reference Number) online against the URN and Amount.(ix) ICICI Bank will generate receipt for the payment transaction and issues the same to the Bidder.

(x) The e-Procurement system updates the bank transaction number against the URN and Amount based on details sent by ICICI Bank online prior to generation of receipt.

(xi) The status of payment will be displayed as "verification successful" in e-Procurement portal, when the bidder clicks on verification option in the portal

(xii) Bidder would be required to upload the scan copy of receipt as received from ICICI Bank as part of proof in Nextender portal before submitting the tender



no.	Scenario	Do's / Don't's
1	In the event of making Payment through NEFT/RTG S	Do's • It is the bidder's responsibility to ensure that RTGS/NEFT payments are made to the exact details as mentioned in the challan which are: 1) Beneficiary account no: <client code=""> + <random number=""> 2) Beneficiary IFSC Code: As prescribed by ICICI Bank (this shall remain same across all tenders) 3) Amount: As mentioned on the challan. It is specific for every tender/transaction 4) Beneficiary bank branch: ICICI Bank Ltd, CMS 5) Beneficiary name: As per the challan • For every tender, details in the challan are different and specific to that tender only. Bidder should not make use of a challan for making payment for another tenders' EMD • It is advised that all the bidders make payment via RTGS/NEFT at least one day in advance to the last day of tender submission as certain amount of time is required for settlement and various parites are involved. The payment may not be available for the bidder validation. In such cases bidder may not be able to submit the tender • Bidder has to make only single payment against a challan as per the amount mentioned on the challan as per the amount</random></client>



2 In the event of making Payment through OTC	<ul> <li>Do's <ul> <li>It is the bidder's responsibility to ensure that OTC payments are made to the exact details as mentioned in the challan which are:</li> <li>Beneficiary account no: <client code=""> + <random number=""></random></client></li> <li>Amount: As mentioned on the challan It is specific for every tender/transaction</li> <li>Beneficiary name: As per the challan</li> <li>Bidder has to make only single payment against a challan as per the amount mentioned on the challan</li> <li>Bidder must do the payment before tender validity gets expired</li> <li>Bidder needs to mandatorily upload the scan copy of the payment receipt issued by ICICI Bank, in Nextender</li> </ul> </li> </ul>
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<ul> <li>such discrepancies, icrei Bank shan ensure that such communication is sent to the Client within 3 days from the date of rejection by the Bidder's Bank</li> <li>For every tender, details in the challan are different and specific to that tender only. Bidder should not make use of a challan for making payment for another tenders' EMD</li> </ul>	should be valid and should not have discrepancies su signature not found, stale DD, mutilated, material alteration, favouring third party etc., In the event o Demand Draft returned by bidder's Bank on account such discrepancies, ICICI Bank shall ensure that such	<ul> <li>Don't's</li> <li>If the bidding amount is greater than Rs49,999, then Bidder should not make payment in cash. In this case, Bidder should pay via Demand Draft/ICICI Bank Cheque</li> <li>It is bidders's responsibility to ensure that Demand draft should be valid and should not have discrepancies such as</li> </ul>
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# **Request for Proposal (RFP)**

For Appointment of Concurrent Auditor for District Health & Family Welfare Societies



## (DH&FWS) of State Haryana for Audit of all programmes under NHM & Non NHM

# [2018-19]



#### **REQUEST FOR PROPOSAL (RFP)**

- ✓ District Health & Family welfare Society(DH&FWS), FARIDABAD seeks to invite Proposal from <u>Chartered Accountant(CA) Firms and Cost</u> and <u>Management Accountant(CMA) Firms meeting the minimum</u> <u>eligibility criteria</u> for conducting the Concurrent audit of District Health & Family Welfare Society, FARIDABAD under the National Health Mission for the financial year 2018-19.
- ✓ This appointment will be for one year & can be renewable for next year subject to the satisfactory performance of Concurrent Auditors.
- ✓ A complete set of RFP specifying eligibility criteria, and other terms and conditions applicable for the above said assignment can be downloaded from Website<u>https://dhsfbd.haryanaeprocurement.gov.in</u> or www.nrhmharyana.gov.in
- ✓ Important Dates & Address are as follow:

Particulars	Address
Place of pre bid conference for the	O/o Civil Surgeon of the concerned
audit of District Health Societies	District
Place for opening of Technical Bids	O/o Civil Surgeon of the concerned
for the Concurrent Audit of District	District
Health Societies	
Contact number of DH&FWS	9654218152
E-mail ID of DH&FWS	dhs.csfbd@hry.nic.in

#### **Terms of Reference (ToR)**

#### Following Sections must be read carefully:

- Section 1: Introduction of Concurrent Audit
- Section 2: Background of National Health Mission
- Section 3: Object of Concurrent Audit
- Section 4: Scope & Coverage of Concurrent Audit of District Health Societies
- Section 5: Frequency of Concurrent Audit
- Section 7: District Audit Committee



Section 8: Auditing Standards to be followed by the CA/CMA Firms

Section 9: Terms for appointment of Concurrent Auditors (including maximum numbers of District Health Societies by one CA/CMA Firm)

Section 10: Content of Concurrent Audit Report & Executive Summary Report Section 11: Key Timelines

Section 12: Appointment & Selection of Concurrent Auditors (including guidelines for submission of proposal)

Section 13: District wise detail of Health Institutions Under NHM, HARYANA

Section 14: Responsibility of District Health Societies.

Section 15: Facilitation of the Audit

Section 16: Some important Issues

Section 17: Monitoring & Evaluation

Section 18: Technical evaluation & selection methodology.

Section 19: Monthly Financial Reporting at District level.

Section 20: Penalty Clause

## **SECTION 1: INTRODUCTION OF CONCURRENT AUDIT**

Concurrent Audit is a systematic examination of financial transactions on regular basis to ensure accuracy, authenticity, compliance with procedures and guidelines. The emphasis under concurrent audit is not on test checking but on substantial checking of transactions. Independent Chartered Accountant firms/Cost and Management Accountant Firms are



needed to be appointed at District level to undertake monthly audit National Health Mission( NHM) & Non NHM Programmes.

## SECTION 2: BACKGROUD OF NATIONAL HEALTH MISSION

- 1. National Rural Health Mission (NRHM)( at present known as National Health Mission) of the Ministry of Health & Family Welfare was launched on 12th April, 2005 by the Government of India to improve medical facilities in all the area in the country. The NHM seeks to provide accessible, affordable and quality health care to the population, especially the vulnerable sections. It also seeks to reduce the Maternal Mortality Ratio (MMR) in the country from 407 to 100 per 1,00,000 live births, Infant Mortality rate (IMR) from 60 to 30 per 1000 live births and the Total Fertility Rate (TFR) from 3.0 to 2.1 within the 7 year period of the Mission. It has now been termed as National Health Mission (NHM). NHM is overarching NUHM also and includes Non-Communicable Diseases (NCD) as well.
- 2. One of the visions of the Mission is to increase public spending on health from 0.9% to 2-3% of GDP, with the improved arrangement for community financing and risk pooling. The NHM has provided an umbrella under which the existing Reproductive and Child Health Programme (RCH) and various National Disease Control Programmes (NDCPs) have been repositioned. National Urban Health Mission (NUHM) has also been added as submission of National Health Mission.
- 3. At present the following Programmes/Schemes falls under the National Health Mission:
  - A. NHM-RCH Flexible Pool:
    - RCH Flexible Pool (including Routine Immunization (RI), Pulse Polio Immunization (PPIP) & National Iodine Deficiency Disease Control Programme (NIDDCP)
    - Health System Strengthening (including AYUSH, National Programme for Prevention and Control of Deafness (NPPCD), National Oral Health Programme (NOHP), National Programme for Palliative Care (NPPC), Assistance to State for Capacity building (Burn Injury), National



#### Programme for Fluorosis(NPF).

#### B.National Urban Health Mission (NUHM).

#### C. Flexible Pool for Communicable Disease:

- ✓ National Vector Borne Disease Control Programme (NVBDCP)
- ✓ Revised National Tuberculosis Control Programme (RNTCP)
- ✓ National Leprosy Eradication Programme (NLEP)
- ✓ Integrated Disease Surveillance Project (IDSP)
- D. Flexible Pool for Non-Communicable Disease:
  - ✓ National Programme for Control of Blindness (NPCB)
  - ✓ National Mental Health Programme (NMHP)
  - ✓ National Programme for Health Care of the Elderly (NPHCE)
  - ✓ National Tobacco Control Programme (NTCP)
  - ✓ National Programme for control of Deafness
  - ✓ National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS)

In addition to the above programmes covered under the umbrella of NHM, the following Non NHM Grants are also handled by the State as well as District Health Societies:

- (1) HUDA Grant
- (2) Construction worker Grant
- (3) IMR Grant
- (4) TFC/PWD Grant
- (5) ASHA/ANM State Budget

#### 4. Funding & Accounting Arrangements:

<u>Funds are transferred by the State Health Societies to the District Health Societies under</u> the common pool Grant and funds are further transfer by the Districts to the DH/SDH/CHC/PHC/SC under the common pool, however NHM funds are to be utilized as per approved RoP of respective District and Non NHM funds are to be utilized as per the guidelines of the respective Programme.



#### 5. Constitutions of State Health Societies and District Health Societies:

At the state level State Health Mission has been constituted under the Chairmanship of Honorable Chief Minister while the State Health Society has been constituted under the chairmanship of Chief Secretary of Haryana. Similarly at the district level District Health Mission has been constituted under the chairmanship of Honorable Minister In-charge of the district while District Health Society (DHS) has been formed under the Chairmanship of Deputy Commissioner.

For achievement of NHM goals and for effective implementation of NHM activities additional resources and capacities at various levels have been created, viz., State Programme Management Unit (SPMU) – at the state level, District Programme Management Unit (DPMU) at district level and Block Programme management (BPMU) at block level.

## SECTION 3: OBJECTIVE OF CONCURRENT AUDIT

- (i) The primary objective of the monthly concurrent audits is to enable the concurrent auditors to examine the accounts pertaining to the National Health Mission programme & Non NHM funds maintained by the State Health Societies & District Health Societies on a continuous basis, provide necessary technical and hand holding support with a view to ensure timely preparation of accounts and financial Monitoring reports (FMRs), reliability of information, effective monitoring of programme activities and advances, etc.
- (ii) Inter unit reconciliation
- (iii) Verification of Monthly Financial Reporting (as per Appendix A).
- (iv) Others key objectives:-
  - To ensure voucher/ evidence based payments to improve transparency,



- To ensure accuracy and timeliness in maintenance of books of accounts,
- To ensure timeliness and accuracy of periodical financial statements,
- To improve accuracy and timeliness of financial reporting especially at sub-district levels,
- To ensure compliance with laid down systems, procedures and policies,
- To regularly track, follow up and settle advances on a priority basis,
- To access & improve overall internal control systems.

## SECTION 4: SCOPE OF CONCURRENT AUDIT

- **1.** The scope of audit covers all activities being implemented by the District Health Societies, viz.
- RCH Flexipool
- Mission Flexipool( including AYUSH)
- Routine immunization
- Pulse Polio
- NUHM
- RNTCP
- NLEP
- IDSP
- NVBDCP
- NPCDCS
- NPHCE
- NPCB
- NMHP
- NPCD
- HUDA Grant
- IMR Grant
- TFC/PWD Grant
- Construction worker Grant
- ASHA/ANMs State Budget
- 2. The concurrent auditors are required:



- To review of the Books of Accounts of District Health Societies and expenditure incurred by the DHS
- To audit of Financial Statements of DHS
- To verification of the Monthly Financial Reporting of District Health Societies ( as per Appendix A)
- To review and analysis of the Age wise and Party wise Advances Report.
- To comparison between financial and physical performance and analysis
- To filling in the checklist provided.
- To vetting of the District ATRs and providing observations thereon
- To examine and ensure that the books of accounts of DHS are maintained accurately and in are updated in a timely manner as per operational guidelines for financial management.
- To express an opinion on whether the expenditure reported by the DHS to the higher authorities for the NHM project through the Financial Management Report (FMR)/ statement of expenditure (SOE), presents fairly and accurately, in all material aspects.
- To any other evaluation work, as desired by the Audit committee.

#### 3. Specific work of CHCs/PHCs/SDH/DH

District auditor shall visits Concurrent sample to CHCs/PHCs/SDH/DH/FRUs/DTC (in to a way cover all CHCs/PHCs/SDH/DH/FRUs/DTC in a year). Following is essential works of CHCs/PHCs/SDH/DH

- Checking of transaction posted by Accounts Assistant in tally EPR- 9 customized software.
- Audit of at least 2 sub-centres located within the CHC every month.
- Verification of Mandatory books of accounts( Yes/No format as mentioned at Appendix G)

Important Note: (1) Concurrent auditor of state health society will function as nodal auditor for the NHM who will oversee the work of all District Concurrent Auditors. For ensuring quality and timely completion of the whole audit exercise, the District Auditors are expected to cooperate and comply with



the directions of the nodal auditor as and when given and will provide necessary information when demanded.

(2) It must be noted first of all the District Health Society shall compiled the expenditure report of all health institution on or before  $8^{th}$  of month and then concurrent auditors will start monthly audit between  $9^{th}$  to  $12^{th}$  of each month.

(3) Concurrent auditors of District Health Societies shall start audit between 15 to 20 of every month subject to exception as mentioned in the notes of key timelines section.

## SECTION 5: FREQUENCY OF AUDIT

Concurrent Audit will be carried out on a "Monthly basis". Districts shall complied the monthly Financial Reporting( including Tally Data) on or before 8<sup>th</sup> of month immediately succeeding the relevant month and the concurrent auditor shall visit for the Audit between 9<sup>th</sup> to 12<sup>th</sup> of month immediately succeeding the reporting month. After the completion of Audit and after making rectification entries as recommended by the Concurrent Auditors, DHS shall send the monthly FMR to the SHS on or before 12<sup>th</sup> of month immediately succeeding the reporting month. State level auditors shall visit for audit between 15<sup>th</sup> to 20<sup>th</sup> of every month subject to the exception mentioned in the notes of key timelines.

## SECTION 7: DISTRICT AUDIT COMMITTEE

- (1) Formation of District Audit Committee
- (2) Functions of District Audit Committee
- (1) Formation of District Audit Committee

A District audit committee should be constituted at each District for monitoring and evaluation of Concurrent audit. The member of audit committee should be the following:



#### Person Committee

#### **Designation in**

Civil Surgeon	Member Secretary
Deputy Civil surgeon (NHM)	Member
Deputy Civil surgeon (NCD)	Member
Deputy Civil surgeon (Communicable disease)	Member
District Accounts Manager	Member
District programme Manager	Member
District ASHA Coordinator	Member

The District audit committee should function under the guidelines of Director Finance and Accounts at State level. The District audit committee should meet at least 6 times in a year.

#### (2) Functions of District Audit Committee

- Selection and appointment of District Concurrent auditors (in concurrence with the state Audit Committee).
- Monitoring timely audits at District level and timely submission of audit reports.
- DPM & DAC shall be responsible for providing the physical data to the Auditors on or before their schedule so that the physical data may be match with the financial data and auditors may report on the same.



- Monitoring whether adequate follow up action is being taken on the audit observations.
- Monitor whether ATR (Action taken report) has been prepared and given to the auditors and whether the same has been vetted
- Carrying out an assessment of audits in case the auditors are being considered to be reappointed with intimation to State audit committee.
- Renewal of the Concurrent Auditors contracts with intimation to State Audit committee.

## Section 8: Auditing Standards to be followed by the CA/CMA Firms

The audit will be carried out in accordance with Engagement & Quality Control Standards (Audit & Assurance Standards) issued by the Institute of Chartered Accountants of India in this regard. The auditor should accordingly consider materiality when planning and performing (except where a certain minimum coverage of implementing units is specified) the audit to reduce the risk to an acceptable level that is consistent with the objective of the audit. In addition the auditor should specifically consider the risk of material misstatements in the financial statements resulting from fraud.

## <u>Section 9: Terms for appointment of Concurrent Auditors (including</u> <u>maximum numbers of District Health Societies by one CA Firm)</u>



- 1. At the District level, the concurrent auditor appointed once can be retained/ reappointed for a maximum total term of two financial years i.e. current year and next year.
- 2. However, the contract awarded should be for one year at a time and should be renewed next year on the basis of auditor's performance review.
- 3. A CA/CMA Firm may take the audit of maximum *three Districts* subject to approval of State Audit Committee.

## <u>Section 10: Content of Monthly Concurrent Audit Report &</u> <u>Quarterly Executive Summary Report</u>

## (1) Contents of Monthly Concurrent Audit Report & Quarterly Executive Summary Report for District level Auditors

It may be noted that the Concurrent Audit Report of a District Health Society is required to be submitted on monthly basis and the Executive Summary Report of District Health Society is required to be submitted on quarterly basis.

(a) Content of Monthly Concurrent Audit Report of DHS

(b) Content of Quarterly Executive Summary Report of DHS

(a) Content of monthly concurrent audit report of DHS

The monthly Concurrent Audit report of DHS should contain the following reports and documents:

• Audited Trail Balance of DHS



- Audited Monthly FMR
- Age wise List of Advances of DHS
- Bank Reconciliation Statement of all the banks(NHM & Non NHM) of DHS
- Audited Monthly Financial Reporting( as per Appendix A)
- Mandatory Books of Accounts Status(Yes/No format as per Appendix G)
- Observations and Recommendations of the auditor(including observations on CHCs/PHCs/SDH/DH/DTC/FRUs visited)
- Action taken by District Health Society on the previous audit observations, along with his observations on the same.

#### **Important Notes:**

• The District level Concurrent Auditors shall submit their monthly concurrent audit report( both soft and hard copies) to the District Health Society on or before 15<sup>th</sup> of month immediately succeeding the reporting month and District Health Society shall submit the soft copy of Concurrent Audit Report to State head quarter on quarterly basis ie monthly concurrent audit report for the month of october, November and december 2018 shall be submitted to the state head quarter on or before 15<sup>th</sup> January. It must further be noted that the soft copy of Monthly Audit Report be submitted at <u>dfa.rhm@gmail.com</u> & also the concern Programme Division mail id e.g RNTCP, NLEP, NPCB, NVDBCP, IDSP, NPCDCS, NPHCE, Ayush etc *on quarterly basis*.

• The Audit observations & recommendations must be classified into the following categories so that the same may be monitor by the concerned Programme Officer:

i) RCH Flexipool, Mission Flexipool( including AYUSH). Routine immunization, Pulse Polio and Non NHM Grant.

- ii) Non Communicable Disease.
- iii) Communicable Diseases.
- iv) NUHM



(b) Content of Quarterly Executive Summary Report of DHS

Attached at Appendix B

## SECTION 11: KEY TIMELINES

The Key Timelines which need to be adhered to are summarized below:

#### Concurrent Audit for the Period April 2018 to December 2018

Activity	Timelines for submission of Concurrent
	Audit Report and Executive summary
	Report
Carrying out Concurrent Audit of District	Submission of Quarterly Concurrent Audit
Health Society for the Period April 2018	Report and Quarterly Executive Summary
to June 2018.	Report by Concurrent Auditor for the
	period April 2018 to June 2018 District
	Health Society on or before 11.01.2019
Carrying out Concurrent Audit of District	Submission of Quarterly Concurrent Audit
Health Society for the Period July 2018 to	Report and Quarterly Executive Summary
September 2018.	Report by Concurrent Auditor for the
	period July 2018 to September 2018 to
	District Health Society on or before
	21.01.2019
Carrying out Concurrent Audit of District	Submission of Quarterly Concurrent Audit
Health Society for the Period October to	Report and Quarterly Executive Summary
December 2018.	Report by Concurrent Auditor for the
	period October to December 2018 to
	District Health Society on or before
	31.01.2019

Note: Action taken report for Audit observations for the period April 2018 to December 2018 is required to be submitted to the State Head Quarter on or before 15.02.2019



## Concurrent Audit from the Period January 2018 onwards

Activity	Timelines
Carrying out concurrent audit	Monthly
Submission of Audit Report by Auditor to DHS	15 <sup>th</sup> of the next month
Submission of soft copy of District Audit report of previous three month to the Director Finance & Accounts at State level	On Quarterly basis( on or before 15 <sup>th</sup> of the month immediately succeeding the relevant quarter)
Submission of Hard Copy of District Concurrent audit reports of previous three month to the SHS Submission of scanned soft copy( duly verified by the Civil Surgeon, Concurrent Auditor & DAM) of Quarterly Executive Summary Report of DHS along with the Action taken Report on the Audit Paras of previous three months by the District Health Societies to the State Head Quarter at dfa.rhm@gmail.com	On Quarterly basis( on or before 20 <sup>th</sup> of the month immediately succeeding the relevant quarter) 20th of the month immediately succeeding the reporting Quarter. e.g the soft copy of Quarterly Executive summary for the third quarter of Financial year 2018-19 ( Oct- Dec) along with the Action taken report on the Audit paras of the concurrent audit report for October, November and December 2018 shall be submitted to the State Head Quarter on or before 20 <sup>th</sup> of January 2019.
Submission of Hard copies (duly verified by the Civil Surgeon, Concurrent Auditor & DAM) of Quarterly Executive summary Report of DHS along with the Action Taken report on Audit Paras of previsous three month by the DHS to the State Head quarter at dfa.rhm@gmail.com Submission of soft copy of the Quarterly Executive summary (SHS & DHS) & Action taken report of previous three month Audit Report by the SHS to the Mission Director, MoHFW, GoI	25th of the month immediately succeeding the reporting Quarter 25 <sup>th</sup> of the month immediately succeeding the reporting quarter
Submission of Hard copy of the Quarterly Executive summary (SHS & DHS) & Action taken report of previous	30 <sup>th</sup> of the month immediately succeeding the reporting month



three month Audit Report by the SHS to	
the Mission Director, MoHFW, GoI	

## Section 12: APPOINTMENT & SELECTION OF CONCURRENT AUDITOR( INCLUDING GUIDELINES FOR SUBMISSION OF PROPOSAL)

#### **District level Auditors**

• Appointment and selection of the District level concurrent auditors will be done by the respective District Audit Committee. The advertisement for e-Tender Should be made by the respective District.

• Interested Firms should upload their bids directly to the concerned district e-tender portal in two parts –Technical and Financial bids. The Bidders should upload scan copy of *Crossed Demand Draft with Technical Bids and also original copy of Technical Bids along with all related documents & DD* will be submitted in sealed envelopes to respective districts Tender Box kept at O/o Civil Surgeons, respective districts. This should be opened in meeting of the District Audit Committee.

• The Bidder should upload to signed bids documents (all page) technical and financial bids.

• The Technical Proposal shall be marked "ORIGINAL" or "COPY" as appropriate. All required copies of the Technical Proposal are to be made from the original. If there are discrepancies between the original and the copies of the Technical Proposal, the original governs. Each page, Form, Annexure and Appendices of the Technical and Financial Proposal must be signed by the Authorized signatory of the firm.

•The District Audit Committee would first download the technical bids from e-Tender portal and evaluate them on the basis of the criteria as prescribed in the



guidelines. The base minimum figures/threshold will be 60% and CA/CMA firms scoring above the base minimum figure would be deemed to be considered as technically qualified to undertake the job.

• Financial bids of only technically qualified firms would be opened by the committee and audit should be awarded on the basis of Quality cum cost based selection(QCBS) process, 70% weightage would be given to the Technical Evaluation and 30% weightage would be given to the financial bid.

• CA/CMA Firms shall have to depute one dedicated team consisting of at least one Qualified Chartered Accountant/Qualified CMA and at least one Semi Qualified Chartered Accountant/Assistant/Trainees of CMA for successful completion of Concurrent audit as per the requirement of RFP.

• The bids will be opened by the District Audit Committee as per Date and time mentioned above in the presence of the authorized representatives of the bidders. The representatives attending the bid opening proceedings must bring an authorization letter from the bidders.

Important note: (1) Distrcit Health Society (SHS) reserves the right to accept or reject any proposal without giving any explanation after taking approval from State Audit Committee and State Health Society, Haryana can change the evaluation criteria as per its requirements in the interest of the organization.

(2)If the required constitution of the team is not deployed or Audit is not performed as per guidelines of RFP, the state may take appropriate action as it deems fit (including blacklisting of the firm) against the firm, keeping the Ministry informed.

• If the lowest financial bidder does not agree to undertake the audit work within the prescribed audit fee or the audit committee deems it unfit for any reason (reasons to be recorded in writing), the job may be awarded to the next eligible bidder if the firm agrees to undertake the job. However, the work may only be awarded to a technically qualified bidder (the firms which are above the base minimum figure of the technical evaluation)



• The firm or any partners of the firm should not be black listed by any PSUs or Government. Company or any other organization in respect of any assignment or behavior. [Self attested affidavit on Rs.100/- stamp paper to be given in this regard by the authorized person of the firm].

• The final appointment will be done only after obtaining the concurrence of State Audit Committee and Director Finance in the prescribed format.

• Chartered Accountant Firms and Cost Accountant firms are eligible for participating in tender.

#### Technical & Financial Proposal will consist:

- i. Letter of Transmittal ( *Form T-1*) format attached below
- ii. Details of the Firm along with Details of Partners (*Form T-2 attached at Appendix H*)
- iii. Financial Bid (*Form F-1*) attached below

## Section 13: DISTRICT WISE DETAIL OF HEALTH INSTITUTIONS UNDER NHM, HARYANA

Detail attached at Appendix D

## Section 14: RESPONSIBILITIES OF DISTRICT HEALTH SOCIETIES

• Compliance of Audit Observations



The members of District Audit Committee shall be responsible for compliance of audit observations made in the audit report within the limit prescribed.

• Timely Closure of Books of Accounts

District Health Societies' finance personnel need to ensure timely closure of books of accounts. All the relevant records belong to the section of content of Audit Report should be prepared and kept ready. This will facilitate in commencing audit quickly.

• Production of relevant documents for Audit

DHS along with CHCs/PHCs and other RCH Programme implementing agencies shall be under obligation to provide the following:

- Books of Accounts
- Prescribed registers
- Files regarding purchase of all types of goods/items
- Files of Construction works
- Any other document requested by auditor in support/ reference of the above. The responsibility for the same shall lie with District Audit Committee at the District level.

## SECTION 15: FACILITATION OF THE AUDIT

The following arrangements need to be made for the auditors by the District Audit Committee:

• To provide proper space for sitting during conduct of audit.



- To provide requisite explanations & documents on the queries raised by the auditor during audit.
- To provide auditors with ATRs on previous audit observations without any delay.
- To arrange payments to the auditor on Quarterly basis after fulfillment of conditions as mentioned in section 13.

#### SECTION 16: SOME IMPORTANT ISSUES

- In case of districts/ blocks visited during the audit, the audit report should contain a separate checklist for each unit covered and respective observations should also be included.
- The audit report should also cover qualitative issues emerging from the audit other than the financial statements.
- The District Audit Committee Shall meet atleast 6 times in a year ( i.e. once every 2 months) for follow up on the observations made by the auditor.

## **SECTION 17: MONITORING & EVALUATION**

- In order to ensure follow up of observations at the CHC/PHC/SDH/DH level, discussion on the audit observation and the way forward should be carried out during the monthly meeting convened by the CMO held at the district in the presence of District accounts Manager.
- In order to effectively handle the audit observations, they should be classified as 'material' and 'non- material' based on their impact. Observations related to system deficiency should also be separately noted for system improvements.



## SECTION 18: TECHNICAL EVALUATION & SELECTION METHODOLOGY

Attached at Appendix F

## <u>SECTION 19: MONTHLY FINANCIAL REPORTING AT</u> <u>DISTRICT LEVEL</u>

Attached at Appendix A

## SECTION 20: PENALTY CLAUSE

- a. The State Audit Committee/ District Audit Committee may impose penalty up to 10% of the respective month audit fee, if monthly / quarterly concurrent audit report is not submitted by the concurrent auditor in stipulated period.
- b. In case concurrent auditor at District Level fails to complete the work as per RFP/TOR or instructions given by the District Audit Committee or latter on if any major point/ serious irregularities pointed out by the Statutory Auditor/ Divisional / State level Audit Team which the concurrent auditor expected to report in their report, then State Audit Committee on suomotu or on recommendation received from the District Audit Committee may decide to black list the firm for the audit of National Health Mission work for three years.



Form T-1

#### Letter of Transmittal

To, The Civil Surgeon District Health Society( as applicable)

Dear Sir/Madam,

We, the undersigned, offer to provide the audit services for District Health Society (as applicable) in accordance with your Request for Proposal dated [*Insert Date*]. We are hereby submitting our Proposal, having details about the firm and proposed audit fees.

We hereby declare that all the information and statements made in this Proposal are true and accept that any misinterpretation contained in it may lead to our disqualification.

The Fees quoted by us is valid for 1 Year from date of award of work oder. We confirm that this proposal will remain binding upon us and may be accepted by you at any time before the expiry date.

Prices have been arrived independently without consultation, communication, agreement or understanding (for the purpose of restricting competition) with any competitor.

We agree to bear all costs incurred by us in connection with the preparation and submission of the proposal and to bear any further pre-contract costs.

#### We understand that State Health Society, Haryana is not bound to accept the lowest or any proposal or to give any reason for award, or for the rejection of any proposal.

I confirm that I have authority of [Insert Name of the C.A. /CMA Firm] to submit the proposal and to negotiate on its behalf.

Yours faithfully,

( )



#### APPENDIX-A (FINANCIAL REPORTING FOR COMMUNICABLE DISEASE)

## Monthly Fund Status of RNTCP Grant

Figures in Rs.

S.no	Name of District	Opening Balance as on 1/4/18 including interest up to 31/3/19( as per the audited balance sheet)	Fund received during 2018-19( up to the end of reporting month)	Interest earned ( from 1/4/18 till the end of reporting month)	Total Fund available with Districts during 2018-19( till the end of reporting month	Expenditure incurred during 2018-19( till the end of reporting month)	Closing balance as on the last date of reporting month
		1	2	3	4=1+2+3	5	6=4-5
1	Ambala				0		0
2	Bhiwani				0		0
3	Faridabad				0		0
4	Fatehabd				0		0
5	Gurgaon				0		0
6	Hissar				0		0
7	Jind				0		0
8	Jhajjar				0		0
9	Karnal				0		0
10	Kaithal				0		0
11	Kurukshetra				0		0
12	Mewat				0		0
13	Narnaul				0		0
14	Palwal				0		0
15	Panchkula				0		0
16	Panipat				0		0
17	Rohtak				0		0
18	Rewari				0		0
19	Sirsa				0		0
20	Sonepat				0		0
21	Yamunanager				0		0
	Total	0	0	0	0	0	0



## Monthly Fund Status of NLEP Grant

		Figures in Rs.							
S.n o	Name of District	Opening Balance as on 1/4/18 including interest up to 31/3/19( as per the audited balance sheet)	Fund received during 2018-19( up to the end of reporting month)	Interest earned ( from 1/4/18 till the end of reporting month)	Total Fund available with Districts during 2018- 19( till the end of reporting month	Expendit ure incurred during 2018-19( till the end of reporting month)	Closing balance as on the last date of reporting month		
		1	2	3	4=1+2+3	5	6=4-5		
1	Ambala				0		0		
2	Bhiwani				0		0		
3	Faridabad				0		0		
4	Fatehabd				0		0		
5	Gurgaon				0		0		
6	Hissar				0		0		
7	Jind				0		0		
8	Jhajjar				0		0		
9	Karnal				0		0		
10	Kaithal				0		0		
11	Kurukshetra				0		0		
12	Mewat				0		0		
13	Narnaul				0		0		
14	Palwal				0		0		
15	Panchkula				0		0		
16	Panipat				0		0		
17	Rohtak				0		0		
18	Rewari				0		0		
19	Sirsa				0		0		
20	Sonepat Yamunanag				0		0		
21	er				0		0		
	Total	0	0	0	0	0	0		



## Monthly Fund Status of IDSP Grant

		Figures in Rs.								
S.no	Name of District	Opening Balance as on 1/4/18 including interest up to 31/3/19( as per the audited balance sheet)	Fund received during 2018- 19( up to the end of reporting month)	Interest earned ( from 1/4/18 till the end of reporting month)	Total Fund available with Districts during 2018- 19( till the end of reporting month	Expenditure incurred during 2018- 19( till the end of reporting month)	Closing balance as on the last date of reporting month			
		1	2	3	4=1+2+3	5	6=4-5			
1	Ambala				0		0			
2	Bhiwani				0		0			
3	Faridabad				0		0			
4	Fatehabd				0		0			
5	Gurgaon				0		0			
6	Hissar				0		0			
7	Jind				0		0			
8	Jhajjar				0		0			
9	Karnal				0		0			
10	Kaithal				0		0			
11	Kurukshetra				0		0			
12	Mewat				0		0			
13	Narnaul				0		0			
14	Palwal				0		0			
15	Panchkula				0		0			
16	Panipat				0		0			
17	Rohtak				0		0			
18	Rewari				0		0			
19	Sirsa				0		0			
20	Sonepat				0		0			
21	Yamunanag er				0		0			
	Total	0	0	0	0	0	0			



## Monthly Fund Status of NVBDCP Grant

S.no	Name of District	Opening Balance as on 1/4/18 including interest up to 31/3/19( as per the audited balance sheet)	Fund received during 2018-19( up to the end of reporting month)	Interest earned ( from 1/4/18 till the end of reporting month)	Total Fund available with Districts during 2018-19( till the end of reporting month	Expenditure incurred during 2018-19( till the end of reporting month)	Closing balance as on the last date of reporting month
		1	2	3	4=1+2+3	5	6=4-5
1	Ambala				0		0
2	Bhiwani				0		0
3	Faridabad				0		0
4	Fatehabd				0		0
5	Gurgaon				0		0
6	Hissar				0		0
7	Jind				0		0
8	Jhajjar				0		0
9	Karnal				0		0
10	Kaithal				0		0
11	Kurukshetra				0		0
12	Mewat				0		0
13	Narnaul				0		0
14	Palwal				0		0
15	Panchkula				0		0
16	Panipat				0		0
17	Rohtak				0		0
18	Rewari				0		0
19	Sirsa				0		0
20	Sonepat				0		0
21	Yamunanager				0		0
	Total	0	0	0	0	0	0

Figures in Rs.



#### APPENDIX-A (FINA NCIAL REPORTING FOR NON- COMMUNICABLE DISEASE)

## Monthly Fund Status of NPCDCS Grant

		Figures in Rs.						
S.no	Name of District	Opening Balance as on 1/4/18 including interest up to 31/3/19( as per the audited balance sheet)	Fund received during 2018-19( up to the end of reporting month)	Interest earned ( from 1/4/18 till the end of reporting month)	Total Fund available with Districts during 2018-19( till the end of reporting month	Expenditure incurred during 2018-19( till the end of reporting month)	Closing balance as on the last date of reporting month	
		1	2	3	4=1+2+3	5	6=4-5	
1	Ambala				0		0	
2	Bhiwani				0		0	
3	Faridabad				0		0	
4	Fatehabd				0		0	
5	Gurgaon				0		0	
6	Hissar				0		0	
7	Jind				0		0	
8	Jhajjar				0		0	
9	Karnal				0		0	
10	Kaithal				0		0	
11	Kurukshetra				0		0	
12	Mewat				0		0	
13	Narnaul				0		0	
14	Palwal				0		0	
15	Panchkula				0		0	
16	Panipat				0		0	
17	Rohtak				0		0	
18	Rewari				0		0	
19	Sirsa				0		0	
20	Sonepat				0		0	
21	Yamunanager				0		0	
	Total	0	0	0	0	0	0	



## Monthly Fund Status of NPHCE Grant

S.no	Name of District	Opening Balance as on 1/4/18 including interest up to 31/3/19( as per the audited balance sheet)	Fund received during 2018- 19( up to the end of reporting month)	Interest earned ( from 1/4/18 till the end of reporting month)	Total Fund available with Districts during 2018-19 ( till the end of reporting month	Expenditure incurred during 2018-19 ( till the end of reporting month)	Closing balance as on the last date of reporting month
		1	2	3	4=1+2+3	5	6=4-5
1	Ambala				0		0
2	Bhiwani				0		0
3	Faridabad				0		0
4	Fatehabd				0		0
5	Gurgaon				0		0
6 7	Hissar				0		0
/ 8	Jind				0		0
<u> </u>	Jhajjar Karnal				0		0
10	Kaithal				0		0
10	Kurukshetra				0		0
11	Mewat				0		0
13	Narnaul				0		0
14	Palwal				0		0
15	Panchkula				0		0
16	Panipat				0		0
17	Rohtak				0		0
18	Rewari				0		0
19	Sirsa				0		0
20	Sonepat				0		0
21	Yamunanager				0		0
	Total	0	0	0	0	0	0

Figures in Rs.



## Monthly Fund Status of NPCB Grant

S.no	Name of District	Opening Balance as on 1/4/18 including interest up to 31/3/19 ( as per the audited balance sheet)	Fund received during 2018-19( up to the end of reporting month)	Interest earned ( from 1/4/18 till the end of reporting month)	Total Fund available with Districts during 2018-19 ( till the end of reporting month	Expenditure incurred during 2018-19 ( till the end of reporting month)	Closing balance as on the last date of reporting month
		1	2	3	4=1+2+3	5	6=4-5
1	Ambala				0		0
2	Bhiwani				0		0
3	Faridabad				0		0
4	Fatehabd				0		0
5	Gurgaon				0		0
6	Hissar				0		0
7	Jind				0		0
8	Jhajjar				0		0
9	Karnal				0		0
10	Kaithal				0		0
11	Kurukshetra				0		0
12	Mewat				0		0
13	Narnaul				0		0
14	Palwal				0		0
15	Panchkula				0		0
16	Panipat				0		0
17	Rohtak				0		0
18	Rewari				0		0
19	Sirsa				0		0
20	Sonepat				0		0
21	Yamunanager				0		0
	Total	0	0	0	0	0	0

Figures in Rs.



## Monthly Fund Status of Mental Health

		-		Figures	s in Rs.		
S.no	Name of District	Opening Balance as on 1/4/18 including interest up to 31/3/19 ( as per the audited balance sheet)	Fund received during 2018-19 ( up to the end of reporting month)	Interest earned ( from 1/4/18 till the end of reporting month)	Total Fund available with Districts during 2018-19( till the end of reporting month	Expenditure incurred during 2018-19( till the end of reporting month)	Closing balance as on the last date of reporting month
		1	2	3	4=1+2+3	5	6=4-5
1	Ambala				0		0
2	Bhiwani				0		0
3	Faridabad				0		0
4	Fatehabd				0		0
5	Gurgaon				0		0
6	Hissar				0		0
7	Jind				0		0
8	Jhajjar				0		0
9	Karnal				0		0
10	Kaithal				0		0
11	Kurukshetra				0		0
12	Mewat				0		0
13	Narnaul				0		0
14	Palwal				0		0
15	Panchkula				0		0
16	Panipat				0		0
17	Rohtak				0		0
18	Rewari				0		0
19	Sirsa				0		0
20	Sonepat				0		0
21	Yamunanager				0		0
	Total	0	0	0	0	0	0



### APPENDIX-A (FINA NCIAL REPORTING FOR NON- NHM FUNDS)

### Monthly fund status of ASHA, ANM State budget

(figures in lacs)

						in lacs)					
SR. NO.	DISTRICT S NAME	Openi ng Balan ce as on 01.04. 2018 includ ing intere st up to 31.3.2 019( as per Audit ed balan ce sheet of 2017- 18)	Funds released by the State Health Society exclusivel y for the payment to ASHAs/A NMs out of State Budget( from 1.4.2018 till the end of reporting month)	Interest earned on ASHA/ ANM funds( from 1.4.201 8 till the end of reporti ng month)	Total availa bity of funds with DHS for paym ent to ASH A, ANM s out of State Budg et	Monthly fixed honorari um to ASHA( X1)	Mont hly adde d incen tives to ASH As( X2)	Incent ives to ASHA for facilita ting institu ional deliver ies( X3)	Pay ment to AN Ms( out of State Budg et) (X4)	Total Expend iture on ASHA/ ANM State Budget (from 1.4.201 8 till the end of reporti ng month)	Closing balance as on the last date of reportin g month availabl e with Districts for making payment to ASHAs/ ANMs out of State Budget
		1	2	3	4=1+ 2+3	5	6	7	8	9=5+6+ 7+8	10=4-9
1	AMBALA				0.00					0.00	0.00
2	BIHWANI				0.00					0.00	0.00
3	FARIDAB AD				0.00					0.00	0.00
4	FATEHAB AD				0.00					0.00	0.00
5	GURGAO N				0.00					0.00	0.00
6	HISAR				0.00					0.00	0.00
7	JHAJJAR				0.00					0.00	0.00
8	JIND				0.00					0.00	0.00
9	KAITHAL				0.00					0.00	0.00
10	KARNAL KURUkest				0.00					0.00	0.00
11	ra				0.00					0.00	0.00
12	MEWAT				0.00					0.00	0.00
13	NARNAU L				0.00					0.00	0.00
14	PLWAL				0.00					0.00	0.00
15	PANHKU LA				0.00					0.00	0.00
15		I	I	1	0.00	l		L	L	0.00	0.00



16	PANIPAT			0.00					0.00	0.00
17	REWARI			0.00					0.00	0.00
18	ROHTAK			0.00					0.00	0.00
19	SIRSA			0.00					0.00	0.00
20	SONIPAT			0.00					0.00	0.00
21	YAMUNA NAGAR			0.00					0.00	0.00
	TOTAL	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

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### Monthly Fund Status of Districts for IMR Grant

Rs) S.N Name of Openin Funds Funds Funds Interest earned Total Expenditu Closin 0. District Transfer by transfe used by in IMR Bank funds e incurred g g Balance State r by the Account( from available for imr balanc 1.4.2018 till the as on exclusively the Districts with activities e as on for IMR 01.04.2 Distric out of end of District during the 018 **Grant( from** 2018-19( ts out common reporting for IMR last 1.4.2018 till includi of pools month) Activities( from day of 1.4.2018 ng the end of comm grant for as on the reporti reporting last date till the interest making on ng payment of end of month up to month) pools 31.3.20 bank for IMR reporting reporting availa 19( as Activities month) month) accoun ble ( **i.e** with per t to Audite payment Distric IMR d Bank made by t balance Accou Districts under sheet of out of IMR nt( 2015from Common Grant 16) 1.4.201 pool 8 till bank the account for IMR end of activities) reporti ng (from 1.4.2018 month till the ) end of reporting month) 1 2 3 4 5 6=1+2+3+ 7 8=6-7 4+5 0.00 0.00 1 Ambala 2 Bhiwani 0.00 0.00 3 Faridabad 0.00 0.00 4 Fatehabd 0.00 0.00 5 Gurgaon 0.00 0.00 Hissar 6 0.00 0.00 7 Jind 0.00 0.00 8 Jhajjar 0.00 0.00 9 Karnal 0.00 0.00 10 Kaithal 0.00 0.00 Kurukshet 11 0.00 0.00 ra 12 Mewat 0.00 0.00 13 0.00 0.00 Narnaul 14 Palwal 0.00 0.00 15 Panchkula 0.00 0.00

(Figure in



16	Panipat						0.00		0.00
17	Rohtak						0.00		0.00
18	Rewari						0.00		0.00
19	Sirsa						0.00		0.00
20	Sonepat						0.00		0.00
21	Yamunan ager						0.00		0.00
	Total	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

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### RS) S.N Name of Funds Funds Funds Interest Total Expendit Closing Openin 0. District Transfer by transfer used by earned in the funds balance ue g Balanc State by the the Construction available incurred as on the e as on exclusively Districts Districts worker Bank with for last date 01.04.2 for out of out of Accounts( District Construc of 018 Constructio common common from 1.4.2018 for tion reporting includi n worker pools pools till the end of Construc worker month **Grant( from** grant for ng bank reporting tion during available 1.4.2018 till worker 2018-19( interest making month) with account the end of Activities District up to payment from to 31.3.20 reporting Construc ( on the 1.4.2018 under for 19( as month) tion Construc last day till the Construc worker tion end of tion per of worker Audite Bank worker reporting reporting d Account( Activities month month) Funds balanc from ( **i.e** before e sheet 1.4.2018 payment expenditu of till the made by re) 2017end of Districts 18) reporting out of month) Common pool bank account for Construc tion worker Activities )( from 1.4.16 till the end of reporting month) 1 2 3 5 6=1+2+3 7 8=6-7 4 +4+5 1 Ambala 0.00 0.00 2 Bhiwani 0.00 0.00 3 Faridabad 0.00 0.00 4 0.00 Fatehabd 0.00 5 Gurgaon 0.00 0.00 6 Hissar 0.00 0.00 7 Jind 0.00 0.00 8 0.00 0.00 Jhajjar 9 Karnal 0.00 0.00 10 0.00 0.00 Kaithal

### Monthly Fund Status of Districts for Construction worker Grant

(Figure in

0.00

0.00



	Total	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
21	Yamunan ager						0.00		0.00
20	Sonepat						0.00		0.00
19	Sirsa						0.00		0.00
18	Rewari						0.00		0.00
17	Rohtak						0.00		0.00
16	Panipat						0.00		0.00
15	Panchkul a						0.00		0.00
14	Palwal						0.00		0.00
13	Narnaul						0.00		0.00
12	Mewat						0.00		0.00

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### Monthly Fund Status of District for HUDA Grant

	1	1 -		I		[	(Figure in Rs	
S.N O.	Name of District	Opening Balance as on 01.04.20 18 includin g interest up to 31.3.201 9( as per Audited balance sheet of 2017-18)	Funds Tranfer by State exclusively for HUDA Grant during 2018- 19( from 1/4/18 till the end of reporting month)	Funds used by the Districts out of common pools grant for making payment for HUDA Grant Activities ( i.e payment made by Districts out of Common pool bank account for HUDA Grant Activities ) ( from 1/4/18 till the end of reporting month)	Interest earned in the HUDA Grant Bank Accounts( from 1/4/18 till the end of reporting month)	Total funds available with District for HUDA Grant Activities	Expenditue incurred for HUDA Grant Activities during 2018- 19( up to the end of reporting month)	Closing balance as on the last date of reporti ng month availabl e with District under HUDA Grant
		1	2	3	4	5=1+2+3+4	6	7=5-6
1	Ambala					0.00		0.00
2	Bhiwani					0.00		0.00
3	Faridabad					0.00		0.00
4	Fatehabd					0.00		0.00
5	Gurgaon					0.00		0.00
6	Hissar					0.00		0.00
7	Jind					0.00		0.00
8	Jhajjar					0.00		0.00
9	Karnal					0.00		0.00
10	Kaithal Kurukshetr					0.00		0.00
11	a					0.00		0.00
12	Mewat					0.00		0.00
13	Narnaul					0.00		0.00



21	er Total	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	Yamunanag							
20	Sonepat					0.00		0.00
19	Sirsa					0.00		0.00
18	Rewari					0.00		0.00
17	Rohtak					0.00		0.00
16	Panipat					0.00		0.00
15	Panchkula					0.00		0.00
14	Palwal					0.00		0.00

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### Monthly Fund Status of Districts for PWD Grant

							(Figure in Rs)	
S.N O.	Name of District	Opening Balance as on 01.04.20 18 includin g interest up to 31.3.201 9( as per Audited balance sheet of 2017-18)	Funds Tranfer by State exclusively for PWD Activities during 2018- 19( from 1/4/2018 till the end of reporting month)	Funds used by the Districts out of common pools grant for making payment for PWD Grant Activities (i.e payment made by Districts out of Common pool bank account for PWD Grant Activities )( from 1/4/18 till the end of reporting	Interest earned in the PWD Grant Bank Accounts( from 1/4/18 till the end of reporting month)	Total funds available with District for PWD Grant Activities	Expenditue incurred for PWD Grant Activities during 2018- 19( till the end of reporting month)	Closing balance as on the last date of reporti ng month availabl e with District under PWD Grant
		1	2	month) 3	4	5=1+2+3+4	6	7=5-6
1	Ambala					0.00		0.00
2	Bhiwani					0.00		0.00
3	Faridabad					0.00		0.00
4	Fatehabd					0.00		0.00
5	Gurgaon					0.00		0.00
6	Hissar					0.00		0.00
7	Jind					0.00		0.00
8	Jhajjar					0.00		0.00
9	Karnal					0.00		0.00
10	Kaithal					0.00		0.00
11	Kurukshetr a					0.00		0.00
12	Mewat					0.00		0.00
13	Narnaul					0.00		0.00
14	Palwal					0.00		0.00



15	Panchkula					0.00		0.00
16	Panipat					0.00		0.00
17	Rohtak					0.00		0.00
18	Rewari					0.00		0.00
19	Sirsa					0.00		0.00
20	Sonepat					0.00		0.00
21	Yamunanag er					0.00		0.00
	Total	0.00	0.00	0.00	0.00	0.00	0.00	0.00

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### APPENDIX-A (FINANCIAL REPORTING FOR PART –A,B,C,POLIO & NUHM)

Monthly Fund Status of Districts for RCH, Mission & Routine immunization activities

a		0										<b>.</b>	<b>NT</b> .			<b>a</b> .
S.	Nam	Ope	Fu	Fu	Fun	Fu	Fun	Fu	Fun	Fund	Fund	Interest	Net	Total	Expe	Closi
N	e of	nin	nds	nds	ds	nds	ds	nds	ds	s	s	credited in	Fund	fund	nditu	ng
0.	Distr	g	rele	tra	use	tra	use	tra	use	trans	used	the bank	availabl	s 	re	balan
	ict	Bal	ase	nsf	d	nsf	d	nsf	d	fer	by	accounts of	e with	avail	incur	ce as
		anc	d	er	by	er	by	er	by	by	the	A, B and C(	Districts	able	red	on
		e as	by	by	the	by	the	by	the	the	Distr	Districts,CH	for	with	by	the
		on	Sta	the	Dist	the	Dist	the	Dist	Distr	icts	C/DH/SDH/P	RCH,	Distr	Distr	last
		01.0	te	Dis	rict	Dis	rict	Dis	rict	icts	out	HC/SC	Mission	ict	icts	day
		4.20	to	tric	s	tric	s	tric	s	out	of	level)( from	and	for	for	of
		18	Dis	ts	out	ts	out	ts	out	of	com	1.4.2018 till	routine	RCH	RCH	repor
		incl	tric	out	of	out	of	out	of	com	mon	the end of	immuniz	, 	, 	ting
		udi	ts	of	com	of	com	of	com	mon	pools	reporting	ation	Missi	Missi	mont
		ng	und	со	mo	со	mo	со	mo	pools	grant	month)	activities	on	on	h araila
		inte	er	mm	n	mm	n	mm	n	to	for		( i. e for	and	and	availa
		rest	Со	on	pool	on	pool	on	pool	Cons	maki		Part A,	Rout	routi	ble
		up	mm	poo	S	poo	S	poo	S	truct	ng		B and C	ine	ne	with
		to	on	ls	gra	ls	gra	ls han	gra	ion	pay		Activitie	imm	imm	Distri
		31.3 .201	poo	to NU	nt	to Pul	nt	ban	nt for	work	ment for		s) ( till the end	unza	unza tion	ct under
		.201 9(	l( fro	H	for ma	se	for ma	k acc	for ma	er Bank	Cons		the end of	tion Activ	activi	under RCH,
		as	m	M	kin	se Poli	kin	oun	kin	acco	truct		reportin	ities(	ties(	Missi
		as per	1.4.	ban	g	ron O	g	t to	g	unts(	ion		g	i.e	i.e	on
		Aud	201	k	g pay	Ba	g pay	IM	g pay	from	work		g month)	for	for	and
		ited	8	асс	pay men	nk	pay men	R	pay men	1.4.2	er		montil)	Part	Part	Routi
		bala	o till	oun	t	acc	t	Ва	t	1.4.2 018	Activ			A, B	A, B	ne
		nce	the	ts(	t for	oun	t for	nk Da	for	till	ities(			A, B and	A, B and	immu
		shee	end	fro	NU	ts(	Puls	Acc	IM	the	i.e			C	C	nizati
		t of	of	m	HM	fro	e	oun	R	end	pay			Activ	Activ	on( i.e
		201	rep	1.4.	( i.e	m	poli	t(	Acti	of	ment			ities)	ities)	for
		7-	orti	201	pay	1.4.	0(	fro	vitie	repo	made			(till	(	Part
		18)	ng	8	men	201	i.e	m	s(	rting	by			the	from	A, B
		10)	mo	till	t	8	pay	1.4.	i.e	mont	Distr			end	1.4.2	and C
			nth	the	ma	till	men	201	pay	h)	icts			of	018	Activi
			)	end	de	the	t	8	men	ш)	out			repo	till	ties)
			,	of	by	end	ma	till	t		of			rting	the	(105)
				rep	Dist	of	de	the	ma		Com			mont	end	
				orti	rict	rep	by	end	de		mon			h)	of	
				ng	s	orti	Dist	of	by		pool				repo	
				mo	out	ng	rict	rep	Dist		bank				ritng	
				nth	of	mo	s	orti	rict		acco				mont	
				)	Co	nth	out	ng	s		unt				h)	
				<i>,</i>	mm	)	of	mo	out		for				,	
					on	,	Со	nth	of		Cons					
					pool		mm	)	Со		truct					
					ban		on	-	mm		ion					
					k		pool		on		work					
					acc		ban		pool		er					
					oun		k		ban		activi					
					t		acc		k		ties)(					
					for		oun		acc		from					
					NU		t		oun		1.4.2					
					HM		for		t		018					
					acti		Puls		for		till					
					vitie		e		IM		the					
					s)(		poli		R		end					
					fro		0		acti		of					
					m		acti		vitie		repo					
					1.4.		vitie		<b>s</b> )(		rting					
					201		s)(		fro		mont					
					8		fro		m		h)					
					till		m		1.4.							
					the		1.4.		201							
					end		201		8							
					of		8		till							
					rep		till		the					l		



	सादीय महास्था निप्			1	-	-			1	1		r				
					orti ng mo nth)		the end of rep orti ng mo nth)		end of rep orti ng mo nth)							
		1	2	3	4	5	6	7	8	9	10	11	12=2+11	13=1 +12	14	15=13 -14
													(3+4+5+ 6+7+8+9 +10)			
1	0												0.00	0.00		0.00
2	Bhiw ani												0.00	0.00		0.00
3	Farid abad												0.00	0.00		0.00
4	Fateh abd												0.00	0.00		0.00
5	Gurg aon												0.00	0.00		0.00
6	Hissa r												0.00	0.00		0.00
7	Jind												0.00	0.00		0.00
8	Jhajja r												0.00	0.00		0.00
9	Karn al												0.00	0.00		0.00
10	al Kaith al												0.00	0.00		0.00
	Kuru		1													
11	ra Kshet												0.00	0.00		0.00
12	Mew at												0.00	0.00		0.00
13	Narn aul												0.00	0.00		0.00
14	Palw al												0.00	0.00		0.00
15	Panc hkula												0.00	0.00		0.00
16	Panip at												0.00	0.00		0.00
17	Roht ak												0.00	0.00		0.00
18	Rewa ri												0.00	0.00		0.00
19	Sirsa												0.00	0.00		0.00
20	Sone pat												0.00	0.00		0.00

	HEALTA														
	Yam														
	unan					1									
21	ager											0.00	0.00		0.00
			0.0	0.0		0.0		0.0							
	Total	0.00	0	0	0.00	0	0.00	0	0.00	0.00	0.00	0.00	0.00	0.00	0.00



### Monthly Fund Status of Districts for NUHM Grant

			-				(Figure in Rs	
S.N O.	Name of District	Opening Balance as on 01.04.20 18 includin g interest up to 31.3.201 9( as per Audited balance sheet of 2017-18)	Funds transfer by the Districts out of common pools bank account to NUHM Bank Account( up to reporting month i.e from 1.4.2018 to the end of reporting month)	Funds used by the Districts out of common pools grant for making payment for NUHM Activities ( i.e payment made by Districts out of Common pool bank account for NUHM Activities ) (from 1.4.2018 till the end of reportin	Interest earned in the NUHM Bank Accounts( from 1.4.2018 till the end of reporting month)	Total funds available with District for NUHM Activities( up to reporting month)	Expenditue incurred for NUHM Activities during 2018- 19( from 1.4.2018 till the end of reporting month)	Closing balance at the end of reporti ng month for NUHM funds
		1	2	g month) 3	4	5=1+2+3+4	6	7=5-6
1	Ambala					0.00		0.00
2	Bhiwani					0.00		0.00
3	Faridabad					0.00		0.00
4	Fatehabd					0.00		0.00
5	Gurgaon					0.00		0.00
6	Hissar					0.00		0.00
7	Jind					0.00		0.00
8	Jhajjar					0.00		0.00
9	Karnal					0.00		0.00
10	Kaithal					0.00		0.00
11	Kurukshetr a					0.00		0.00
12	Mewat					0.00		0.00
13	Narnaul					0.00		0.00
14	Palwal					0.00		0.00



15	Panchkula					0.00		0.00
16	Panipat					0.00		0.00
17	Rohtak					0.00		0.00
18	Rewari					0.00		0.00
19	Sirsa					0.00		0.00
20	Sonepat					0.00		0.00
21	Yamunanag er					0.00		0.00
	Total	0.00	0.00	0.00	0.00	0.00	0.00	0.00

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Dy Civil Surgeon

Civil surgeon Verified by the Concurrent Auditors



### Monthly Fund Status of District for Pulse Polio

S.N O.	Name of District	Openin g Balance as on 01.04.2 018 includi ng interest up to 31.3.20 19( as per Audite d balance sheet of 2017- 18)	Funds transfer by the State to Districts exclusively for Pulse polio Activities( from 1/4/2018 till the end of reporting month)	Funds transfe r by the Distric ts out of comm on pools bank accoun t to Pulse Polio Bank Accou nt( from 1/4/201 8 till the end of reporti ng month )	Funds used by the Districts out of common pools grant for making payment for Pulse polio Activities( i.e payment made by Districts out of Common pool bank account for Pulse polio Activities) (from 1/4/2018 till the end of reporting	Interest earned in the Pulse polio Bank Accounts( from 1/4/2018 till the end of reporting month)	Total funds available with District for Pulse polio Activities( as on last date of reporting month before expenditur e)	(Figure in Rs) Expendit ue incurred for Pulse polio Activities during 2018-19( till the end of reporting month)	Closin g balanc e as on the last date of reporti ng month availa ble with Distric t under Pulse polio
		1	2	3	month) 4	5	6=1+2+3+4 +5	7	8=6-7
1	Ambala						0.00		0.00
2	Bhiwani						0.00		0.00
3	Faridabad						0.00		0.00
4	Fatehabad						0.00		0.00
5	Gurgaon						0.00		0.00
6	Hissar						0.00		0.00
7	Jind						0.00		0.00
8	Jhajjar						0.00		0.00
9	Karnal						0.00		0.00
10	Kaithal						0.00		0.00
11	Kurukshet ra						0.00		0.00
11	Mewat						0.00		0.00
13	Narnaul						0.00		0.00
14	Palwal						0.00		0.00



15	Panchkula						0.00		0.00
16	Panipat						0.00		0.00
17	Rohtak						0.00		0.00
18	Rewari						0.00		0.00
19	Sirsa						0.00		0.00
20	Sonepat						0.00		0.00
21	Yamunan ager						0.00		0.00
	Total	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

DAM

Dy Civil Surgeon Civil surgeon Verified by the Concurrent Auditors



## Appendix B: Quarterly Executive Summary report of DHS

### (To be submitted to FMG wing of State Haryana by the District Audit Committee, District Health & Family Welfare Society.)

Name of District:

For the Quarter ended.....

## Question no 1 to 4 related with Coverage of Audit

Question no 1: Whether monthly Concurrent Audit has been taken?

Question no 2: Mentioned the name of SKS where field visit made by the Concurrent Auditors during this quarter ?

Question no 3: Mentioned the number of SKS where filed visit not made by Auditors.

Question no 4: Mentioned the list of SKS where mandatory books of Accounts not maintained as per the MoHFW, Guidelines and where no audit has been done in the previous year.

## Question no 5 to 9 related with Books of Accounts:

Question no 5: Name of DHS/CHC/DH and SDH where books of Accounts not maintained in Tally ERP 9 Customized software.

Question no 6: Name of Health Institution (DHS/CHCs/PHCs/DH/SDH/FRUs) where Manual Cash book is not being maintained.

Question no 7: Name of Health Institution (DHS/CHCs/PHCs/DH/SDH/FRUs) where BRS is not maintained on monthly basis.

Question no 8: Name of Health Institutions( DHS/CHCs/PHCs/DH/SDH/FRUS) where ledger is not maintained properly.

Question no 9: Name and number of Health Institutions( DHS/CHCs/PHCs/SDH/DH/FRUs) where trail balance is not maintained on monthly basis.

# **Questions no 10 to 13 related with Reporting requirement & guidelines**

Question no 10: Name of Health Institutions ( CHCs/PHCs/SDH/DH/FRUs) that have not submitted the monthly financial reports.

Question no 11: Whether audit report has been submitted by the concurrent auditor within the prescribed time limit, if no then mentioned the extent of delay along with reasons.

Question no.12: Provide CHC/PHC list of Advances which are outstanding for more than a year. Question no. 13: Whether delegation of Administrative & Financial powers have been taken place as per the instruction of State Health Society?

## Question no 14 related with District Level Audit Committee

Question no 14: Mentioned the number of meeting held by District level audit Committee during the current financial year.





### **ANNEXURE Executive Summary**

(To be submitted to FMG, MoHFW, GoI by the State Programme Management Support Unit, State Health Society)

Name of the District\_\_\_

For the Quarter (due dates: 31<sup>st</sup> July/31<sup>st</sup> Oct/31<sup>st</sup> January/30<sup>th</sup> April)/ Year <u>Note: Based on the three monthly reports, this report has to be submitted along with the</u> <u>Quarterly Financial Monitoring Report</u>

### Part:-A District level issues:

### Coverage

- **1.** Name of the Districts where monthly concurrent audit has not taken place. (specify the reason)
- **2.** Number of districts where all the blocks have not been covered at least once in the course of audit. (indicate the numbers in each district)
- **3.** Number of blocks (district wise)where the peripheral units have not been visited.
- **4.** Number of Rogi Kalyan Saminites (distrct wise) where last annual audit has not been done.

### **Book of Accounts**

- **5.** Name of the Districts where books of accounts are computerized. Provide a district wise breakup of health facilities for the same.
- 6. Name of the Districts where Cash Books are not being maintained/closed on a daily basis. Provide a district wise breakup of health facilities for the same.
- 7. Name of the Districts where bank reconciliations is not being done on a monthly basis Provide a district wise breakup of health facilities for the same.

### Reporting

**8.** Name of the Districts which have not submitted the Statement of Fund Position in the last three months.



- **9.** Name of districts that have not submitted their concurrent audit reports on time. Also mention the extent of delay.
- **10.** Name of the Districts which have not submitted FMRs/SOEs in the last three months.
- **11.** Name of the Districts where the SOEs/FMRs are not being submitted in prescribed format.
- **12.** Whether the SOE/FMR submitted by the districts includes the SOE from all the Blocks/CHC/PHC etc. on regular basis and on the basis of the Books of Accounts only? Report the exceptions to the same.
- **13.** Provide a list of advances and total amount involved District- wise which are outstanding for more than a year. Mention the follow up action taken for the same.

### **Audit Committee**

**14.** Number of districts where audit committee has not been constituted/ is not meeting at regular intervals (Indicate names).

### Others

- **15.** Number of Districts where unification of finance and accounting processes has not taken place as per GOI guidelines.
- **16.** Number of districts where posts of District Accounts Manager has been vacant for more than 3 months.
- Number of Districts where Delegation of Administrative and Financial powers have not taken place as per GOI guidelines (circulated vide D.O. No 118/RCH-Fin 2006-07 dated 1<sup>st</sup> may, 2007)

### Part-B: Pending issues:

Whether the issues raised in the last Quarterly Executive Summary have been addressed? List down the details of major pending issues.

CONCURRENT AUDITOR, DISTRICT HEALTH & FAMILY WELFARE SOCIETY DISTRICT ACCOUNTS MANAGER DISTRICT HEALTH & FAMILY WELFARE SOCIETY



## APPENDIX-D Detail of Health Institution Under NHM

Sr. No.	Name of District Health Welfare	Name of DAM/AA	Phone Number of	Number of CHC	Number of DH	Number of SDH	Number of PHC
	Society		Dam/AA	01 0110	01 2 11	01 02 11	
1	District Health & Family Welfare Society , Ambala	Mr. Kunal	7027822049	5	1	2	16
2	District Health & Family Welfare Society , Bhiwani	Mrs. Tina Singla	7027817639	10	2	3	34
3	District Health & Family Welfare Society , Faridabad	Mr. Sandeep Jain	9654218152	2	1	1	12
4	District Health & Family Welfare Society, Fathehabad	Mr. Arun Bansal	7027819680	5	1	1	18
5	District Health & Family Welfare Society, Gurgaon	Mr. Sandeep	9654230570	3	2	2	10
6	District Health & Family Welfare Society , Hissar	Mr. Parmod Saini	7027830285	8	1	2	27
7	District Health & Family Welfare Society , Jhajjar	Mr. Virender Goyal	7027813707	6	1	2	22
8	District Health & Family Welfare Society , Jind	Mr. Hemant	7027812056	7	1	1	21
9	District Health & Family Welfare Society , Kaithal	Mrs. Reena	7027828330	6	1	0	17
10	District Health & Family Welfare Society , Karnal	Mr. Ranbeer	7027825897	6	1	1	19



11	District Health & Family Welfare Society , Kurukshetra	Mr. Dinesh Saini	7027824418	5	1	0	16
12	District Health & Family Welfare Society , Narnaoul	Ms. Khushboo Garg	7027841746	7	1	1	18
13	District Health & Family Welfare Society , Mewat	Mr. Rishi Raj	7027838984	3	1	0	15
14	District Health & Family Welfare Society , Palwal	Mr. Jatinder	7027840457	7	1	2	13
15	District Health & Family Welfare Society , Panipat	Mrs. Yogita	7027826979	4	1	0	16
16	District Health & Family Welfare Society , Panchkula	Mr. Manoj Bansal	8558897643	2	1	0	8
17	District Health & Family Welfare Society , Rewari	Mrs. Radha	7027810788	5	1	1	13
18	District Health & Family Welfare Society , Rohtak	Mr. Ajay Dhingra	7027816596	7	1	0	16
19	District Health & Family Welfare Society , Sirsa	Mr. Anshu Munjal	7027831551	8	2	0	21
20	District Health & Family Welfare Society, Sonipat	Ms. Tanisha	7015010266	6	1	1	29
21	District Health & Family Welfare Society, Yamunanagar	Mrs. Sunita	7027823369	7	1	1	12
	Total			119	24	21	373



Appendix F: Technical Evaluation and Selection Methodology											
S.no	Particulars	Notes	Maximum Marks	Marks Obtained							
1	No of Partners- FCA/ACA/FCMA/ACMA	1	10								
2	Year of experience( Partner A+ Partner B+ Partner C and more)	2	10								
3	No of Staff (Qualified CA/Semi Qualified/Other Clerical Staff)	3	10								
4	Nature of Experience (RCH,NRHM,NHM Audit/Government social Sector Audit/ Other Social Sector Audits/NGOs)	4	20								
5	Branches in Districts	5	10								
6	Total Turnover of the firm for previous three years i.e 2015-16, 2016-17 & 2017-18)	6	10								
	Total		70								

## Note: All the relevant documents must be attached with the Technical Proposal so that Audit committee may analysis the proposal



Notes:

- 3 marks for each FCA/FCMA partner and 2 marks for each ACA/ACMA Partner, subject to maximum of 10 marks. In case of Sole Proprietorship – 3 marks in case of FCA/FCMA and 2 marks in case of ACA/ACMA.
- 1 marks for each 1 completed year experience of each partner with maximum 5 marks for each partner, subject to overall limit of 10 marks for all partners. In case of sole proprietorship 1 marks for each 1 completed year experience, subject to maximum 5 marks.
- 3. i) 3 marks for each Qualified CA/CMA.ii) 2 marks for each Semi Qualified CA/CMA .
  - iii)1 marks for each Other clerical Staff subject to maximum 10 marks.
- RCH,NRHM,NHM Audit/Government Social Sector Audit/ Other Social Sector Audits/NGOs - 5 marks for each Complete audit subject to maximum 20 Marks.
- 5. (a) In case of Concurrent audit of District Health Society: 10 marks for CA/CMA Firm having Head Office/Branch in the District where Audit is to be conducted.
- 6. (b) In case of Concurrent audit of State Health Society: 10 marks for CA/CMA Firm having Head Office/Branch in the Tricity( Panchkula, Mohali and Chandigarh).
- 7. 2 Marks for each 2 Lakh of Average Turnover for previous three years i.e. FY 2015-16, 2016-17 and 2017-18 (Any fractions of 2 lakhs will be ignored), subject to maximum of 10 marks. For Example: Raj & Associates having turnover for the previous three Financial as follow:-

```
2015-16- 4.00 Lakh
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```
2016-17- 6.00 Lakh
```

2017-18- 7.00 Lakh

The Average Turnover of Raj & Associates is 4+5+6 = 5.66 Lakh



Turnover	Marks Alloted
2 lakh	2 marks
2 lakh	2 marks
1.66 lakh	NIL (any fractions of 2 lakh will be
	ignored)
Total- 5.66 lakh	Total Marks-4

Then, marks allotted to Raj & Associates is as follow:

### **Important notes:**

- 1. The base minimum figures/threshold will be 60% and CA firms scoring above the base minimum figure would be deemed to be considered as technically qualified to undertake the job.
- 2. Financial bids of only technically qualified firms would be opened by the committee and audit should be awarded on the basis of Quality cum cost based selection (QCBS) process, 70% weightage would be given to the Technical Evaluation and 30% weightage would be given to the financial bid.
- 3. All the relevant documents must be attached with the proposal so that the Audit committees can analysis the proposal of Firms.



	Appendixe- G(Yes/No )													
S r. N o	Name of SHS/ DHS/ GH / SDH / CHC / PHC	CA SH BO OK	LED GER	TRIA L BAL ANC E	B R S	STOC K REGI STER	FIXE D ASSE TS REGI STER	ADVA NCE REGI STER	CHE QUE ISSUE REGI STER	SKS MEE TING REGI STER	Miscell aneous Registe r	Fun d Reci ved Regi ster	Sala ry Regi ster	Is entri es are comp leted in Tally Softw are up to repor ting mont h ?



## Appendix:H

Expression of Interest for short listing of Chartered Accountant Firms/Cost & Management Accountant Firms for the audit of accounts of State Health Societies and District Health Societies on Monthly basis.

Status of Firm	Partnership	Sole Proprietorship	
1. (a) Name of the Firm (in Ca	apital Letters)		
(b) Address of the Head Of	ffice		
(With Telephone no. & e	e-mail address)		
(c) PAN of the Firm			
2.ICAI/CMA Registration No.	· <u>-</u>	Region Name	
Region Code			
3. Date of constitution of the	firm:		
Note: Please attach the copy Cost Accountant of India as o		certificate issued by ICAI	/Institute of
4. Number of Full time Charte 2018		January	
Number of audit staff employ	/ed full time with the firm		
Articles/Audit Clerks/Traine	es		
Other Audit Staff (With know Tally)	<pre>rledge of book keeping &amp; a</pre>	accountancy &	
Other Clarical Staff (Please S	pecify)		



Turnover of the firm during past three years

2015-16 \_\_\_\_\_

2016-17\_\_\_\_\_

2017-18\_\_\_\_\_

(Please provide copy of ITR and Profit and loss Statement duly verified for the relevant Financial Year.)

Number of Branches if any (Please mention Places & Locations)

Whether the firm engaged in any internal Or External (RCH,NRHM,NHM Audit/Government social Sector Audit/ Other Social Sector Audits/NGOs)? Yes/No

(If yes, then please provide detail with documentary evidence)

Whether there are any court/arbitration/any other

legal case against the firm?

Yes/No

(If yes, give a brief note of the case indicating

its present status)



## Undertaking

I/We do hereby declare that the above mentioned information are true & correct and I/We also undertake to aid the terms & conditions of the contract and would make the compliance of term laid down in the contract if executed by us with the State Health Society (NHM)/District Health & Family welfare Society.

Date:

Signature of Partner/

Place:

Sole Proprietor with stamp



Form -F-1

PARTICULARS	TOTAL AMOUNT(In Rupees)
AUDIT FEES Audit Fees (Including Cost of TA/DA)	Both in Numeric and in Words
	Rs
GST	
Total Fees (1+2)	0
	(Rupees
	—
	)

