Standard Evaluation Sheet for Evaluation of the Technical Bids of the Workbly

(F) There is a 100 miles	The same of the sa	CA Firms) at State & Dis Remarks	Max. Mindes	Marks Obtained
	Criteria No. of partners – FCA/ACA		10	
	Years of experience-		1()	
	Pariner A + Partner B +	¥+		
	Partner C + Partner D +			1
Strategy Strategy				
The section was assumed.	Years of Partners association with the firm		(1)	
	Partner A + Partner B + Partner D +	<i>I</i> =		1
	V. C 4 C		A SECTION OF THE PARTY OF THE P	
and the second	No. of Staff -			
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		10	The second secon
	i. Qualified	The second secon		
Let againg to a description of the second of the	ii. Semi Qualified		2	
	iii. Others	and the contracting of the contr		
	III). Othors			and the grade of the second se
),	Nature of experience	and the supplier standard and an individual community of the standard standard and extended the standard standa		
<i>)</i> .	(giving Turno) or/Project Cost/	La de la companya de		
THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TW	Years of experience of the	iii ,₂, °	easy continues	
	entities/projec.s audited)	The state of the s	Agent Commence Systems of Equation (Commence of the Commence o	and the second s
	i. RCH audit		- Mary Spiracone	
	ji. Govi, Social Sector	de la company de	15	1
	Audit		Manager in the Control of the Contro	
	Audit	2 /13		The second secon
	iii. Other Social Sector	Constitution of the consti	10	
	Audit			
			product of the second production of the second seco	The second secon
5.	No. of Branches		1 ()	
7.	Total turnover of the		10	
	firm in last three years	33	and the second s	
	The second secon	Total	100	and the same of th

4. Total marks given by all the the maximum marks. Signature with

Name of the Member:

· date:

Expression of Interest for short listing Chartered Accountant Firms for the monthly concurrent Audit of the accounts of the State Health and Family Welfare Society

Status	of the F	irm	Partnership	Sole Pro	oprietorship _	The same same
1.	(a) Nan	ne of t	he firm (in Capital letters)			
	(b) Add	ress o	f the Head Office	Face services	and the second s	
	(Plea	ise als	o give telephone no.			.4.5.43
	and	e-ma	il address)			
	(c) PAN	No.	of the firm			
		_	ation No	_ Region Nan	ne	
	Region	Code	No	<u> </u>	*	
3.	(a)	Date o	of constitution of the firm:			
		e Part	ince when the firms has a ners/Sole Proprietor of the ars of Continuous association	e firm as on 1°		Number of
	No		firm		FCA	ACA
	(a)	-	s than one year			
	(b)		ar or more but less than 5			
	(c)	1	ar or more but less than 10			7-2
	(d)	1	rear or more but less than	15 years		
The State of	(e)	15 y	rear or more			
4. 5. 6.	Nun Nun Nun	nber o nber o nber o	e copy of Firm's Constitution f Part time Partners if any f Full time Chartered According f audit staff employed full Audit Clerks	, as on 01.01.2 ountants as on	2016	on 01.01.2016)
	(b) Ot	her A	udit Staff (with knowledge	e of book		

keeping and accountancy)

Places & locations):

7. Number of Branches if any (Please mention

Other Professional Staff (Please specify)

8. Whether the firm has conducted statutory / internal audit in institutions/societies under Kerala Health Services Department and if so provide complete details (attach separate sheet if space is insufficient)

9. Whether the firm is implementing quality control

Policies and procedures designed to ensure

Yes/No

That all audit are conducted in accordance with

Statements on Standard Auditing Practices.

(If yes, a brief note on the procedure adopted is to be enclosed)

10. 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 percent status)

11. Total Turnover of the firm during the last two years

(The latest Income Tax Return duly acknowledged by IT department should be enclosed)

12. Please indicate below any specific conditions that is essential for you to be agreeable to take up the work:

a.

b.

c.

Undertaking

I/We do hereby declare that the above mentioned informations are true & correct and I / We also undertake to abide by the terms & condition of the contract and would make compliance of terms laid-down in the contract if executed by us with the State Health and Family Welfare Society.

Date:

Place:

Signature of Proprietor/ Sole Partner



Expression of Interest for short listing Chartered Accountant Firms for the monthly concurrent Audit of the accounts of the State Health and Family Welfare Society & District Health and Family Welfare Societies

Financial Bid

- a. I / we are agreeable to concurrent monthly audit of the State Health and Family Welfare Society, Trivandrum, at a fees of Rsper month, which is inclusive of cost of travel.
- b. I understand that TDS will be deducted at source.
- c. I understand that service tax at applicable rates, will be extra.
- d. Other financial terms are:
 - a.
 - b.
 - C.
 - d.

Date:

Place:

Signature of Proprietor/ Sole Partner

CONCURRENT AUDIT

Concurrent audit is a systematic examination of financial transactions on a 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. It is an ongoing appraisal of the financial health of an entity to determine whether the financial management arrangements (including internal control mechanisms) are effectively working and identify areas of improvement to enhance efficiency.

Independent Chartered Accountant/Cost Accountant firms are needed to be appointed at District Level to undertake periodical audits and report on vital parameters which would depict the true picture of financial and accounting health of the program.

Objective

The key objectives of the concurrent Audit include:

- 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 assess & improve overall internal control systems
- To ensure & report Action Taken by the concerned institutions on the previous audit observations.

Frequency

 Concurrent Audit will be carried out on a "monthly basis" at District level and half yearly basis at institution level.

Coverage

- The accounts of District office of NHM will be audited on a monthly basis and the
 District Concurrent Auditor should ensure that all the Disease Control Programmes and
 Non Communicable Disease Control Programmes are covered.
- The District Concurrent Auditor should ensure that all the institutions in the district are covered half yearly.
- The audit plan should include all PHCs/ CHCs, sub-centres and WHSNCs located within the blocks, so that all PHCs/CHCs will be audited two times a year and Sub Centres/ WHSNCs will be audited once after 100% utilisation of funds received or at the end of the year. The audit has to include accounts maintained under National Disease Control Programmes (wherever applicable) like IDSP, NVBDCP, NLEP, NBCP, NCD etc.

Key Timelines

The key timelines which need to be adhered to are summarized below:

Activity		
Carrying out concurrent audit of DHS	Timeline Monthly	
Submission of Audit Report by Auditor to DHS	20 th of the next month	
Submission of soft copy of district audit report to the Director (Finance) at state level along with ATR	20 th of the next month	
Submission of Diania o	25 th of the next month	
Carrying out concurrent audit of linstitutions	Half yearly	
Submission of Audit Report by 2	5 th of the next month	
submission of soft copy of audit 2 eport to the Director (Finance) at cate level	5 th of the next month	
ubmission of audit reports of 30 stitutions to the SHS) th of the next month	

Production of relevant documents for Audit

The District Health Society along with CHCs/ PHCs and other RCH Programme implementing agencies shall be under obligation to provide the following: o Books of Accounts

- o Prescribed Registers
- o Stock Book, Fixed Asset Register
- o Files regarding purchases of all types of goods/ items
- o Files of Construction works
- o Any other document requested by auditor in support/ reference of the above.

Contents of Monthly Audit Report of DHS

Concurrent Audit Report of a "District Health Society" should contain the following financial statements and documents:

- Duly filled in Checklist provided in the guidelines
- Financial statements as prescribed
 - o Audited Monthly FMR
 - o FMR Reconciliation statement
 - o Audited Trial Balance
 - o Audited Receipts & Payments A/c
 - o Audited Income & Expenditure A/c
 - o Balance Sheet
 - o Audited Statement of Expenditure
 - o Bank Reconciliation Statement
 - o List of advances
 - o Observations and Recommendations of the auditor

The audit report of Institutions should contain the following statements.

- 1. Audited Receipts & Payments A/c
- 2. Audited SOE of wards
- 3. Observations and Recommendations of the auditor
- 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.
- The audit report should also cover qualitative issues emerging from the audit other than the financial statements.

General Instructions

- 1. As per the reports submitted by the statutory auditors, it is noted that accounting in Tally at District level is going on even after completion of Concurrent audit which is not at all expected. It is instructed that all books of accounts should close before starting Concurrent audit. Also there is no use of Concurrent audit which submit report to DHS after completion of Statutory Audit which ultimately delay DHS to comply the pending issues notified by Concurrent auditor & submission of final audited UC to central govt.
 - 2. Concurrent Auditor should see that the DHS is complying with the statutory requirements like TDS Challan and return filing and see that the Traces penalty is nil. Form 16/16A to be issued in time and also confirm PF& PT return compliance.
 - 3. DHS are requested to prepare & certify from Concurrent Auditor the Financial statements from Tally and in Appendix-A format both and present after approved by DPM. Also