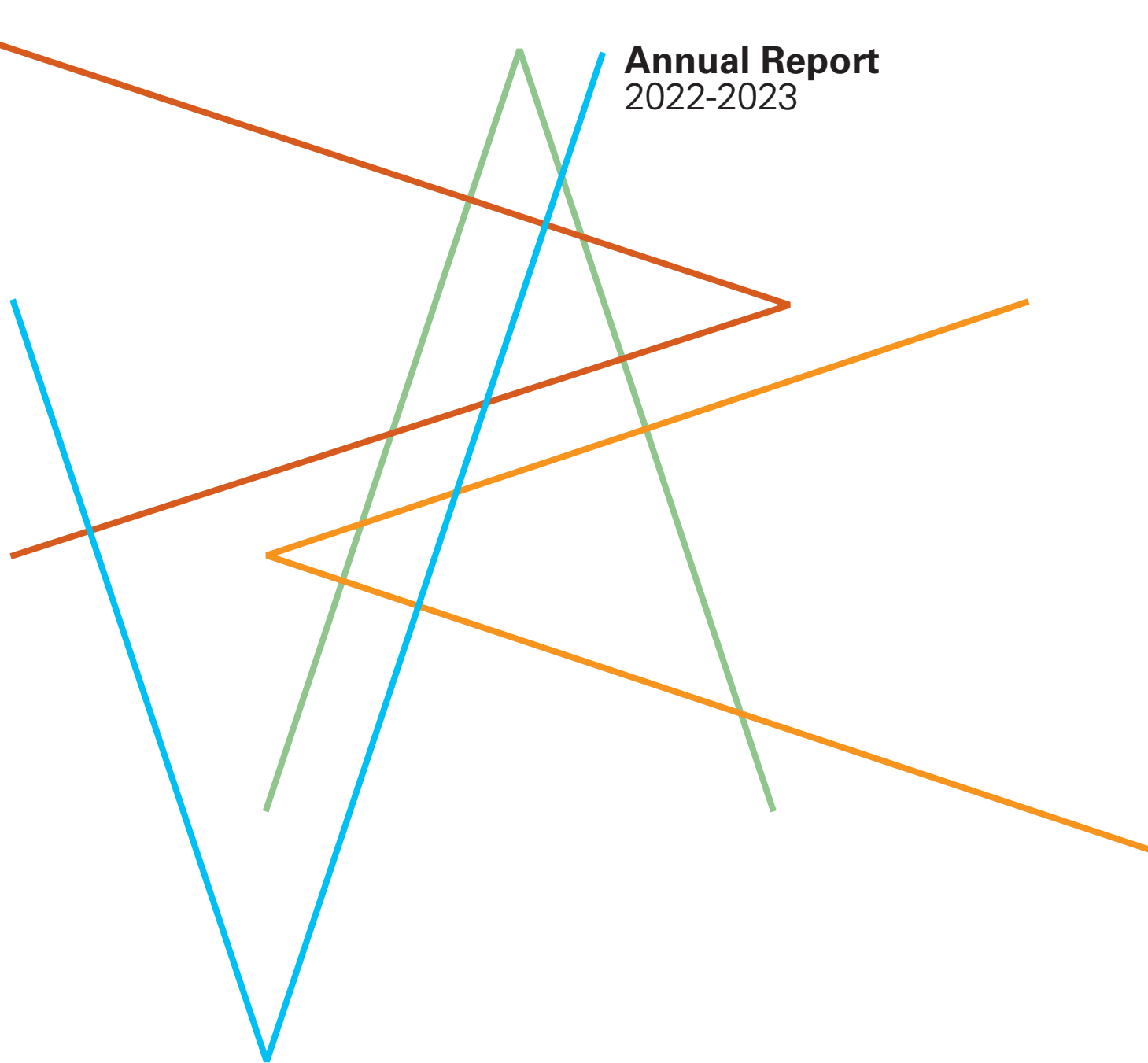


AFFORDABLE QUALITY HEALTH

Annual Report
2022-2023



ABOUT AFFORDABLE QUALITY HEALTH

Affordable Quality Health (hereinafter referred to as AQH) is not for profit section 8 company established with an objective to undertake research, implementation and knowledge transfer in health systems, including process improvement and health care delivery in India. It also carry forward knowledge, databases and academic courses in model institutions of medicine, public health, nursing, management and social sciences.

ABOUT INORDER-THE HEALTH SYSTEMS INSTITUTE

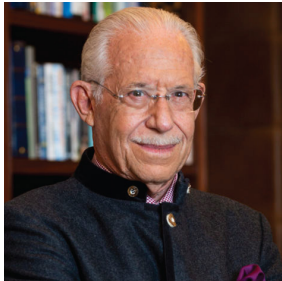
InOrder, a unit of AQH, works towards strengthening health systems through thought leadership, knowledge sharing, capacity building, and technical support so that policy makers, healthcare provider and payer systems, and the public at large are better equipped to sustain good health at lower cost.

ROLE OF INORDER IN HEALTH SYSTEMS STRENGTHENING

As a national-level think tank and training institute, InOrder, serves the country's unique set of healthcare challenges using health systems thinking, leveraging local and global expertise.

At InOrder, have adopted a people-centered health systems schema for organizing our works. We focus on each of the five subsystems of health, namely **Governance, Provider System, Payer System, Public Health System, and Health Information.**

BOARD OF DIRECTORS



Dr. William A. Haseltine

Chair,
ACCESS Health International



Dr. N. Krishna Reddy

CEO,
ACCESS Health International



Mr. Biswajeet Das Chatterjee

Vice President (Global), Finance
And Corporate Affairs,
ACCESS Health International



Mr. Lov Verma

Secretary (Retd),
Government of India



Mr. Pawan Ahluwalia

Founder & Managing
DirectorFounder & Managing
Director, Laburnum Capital

ADVISORY BOARD



Dr. K. Ranga Rama Krishnan

Chief Executive Officer for Rush
University System for Health



Dr. Vijay V. Yeldandi

Specialist in Infectious Diseases and
Clinical Professor of Medicine and Surgery
at the University of Illinois at Chicago



Dr. Dennis Streveler

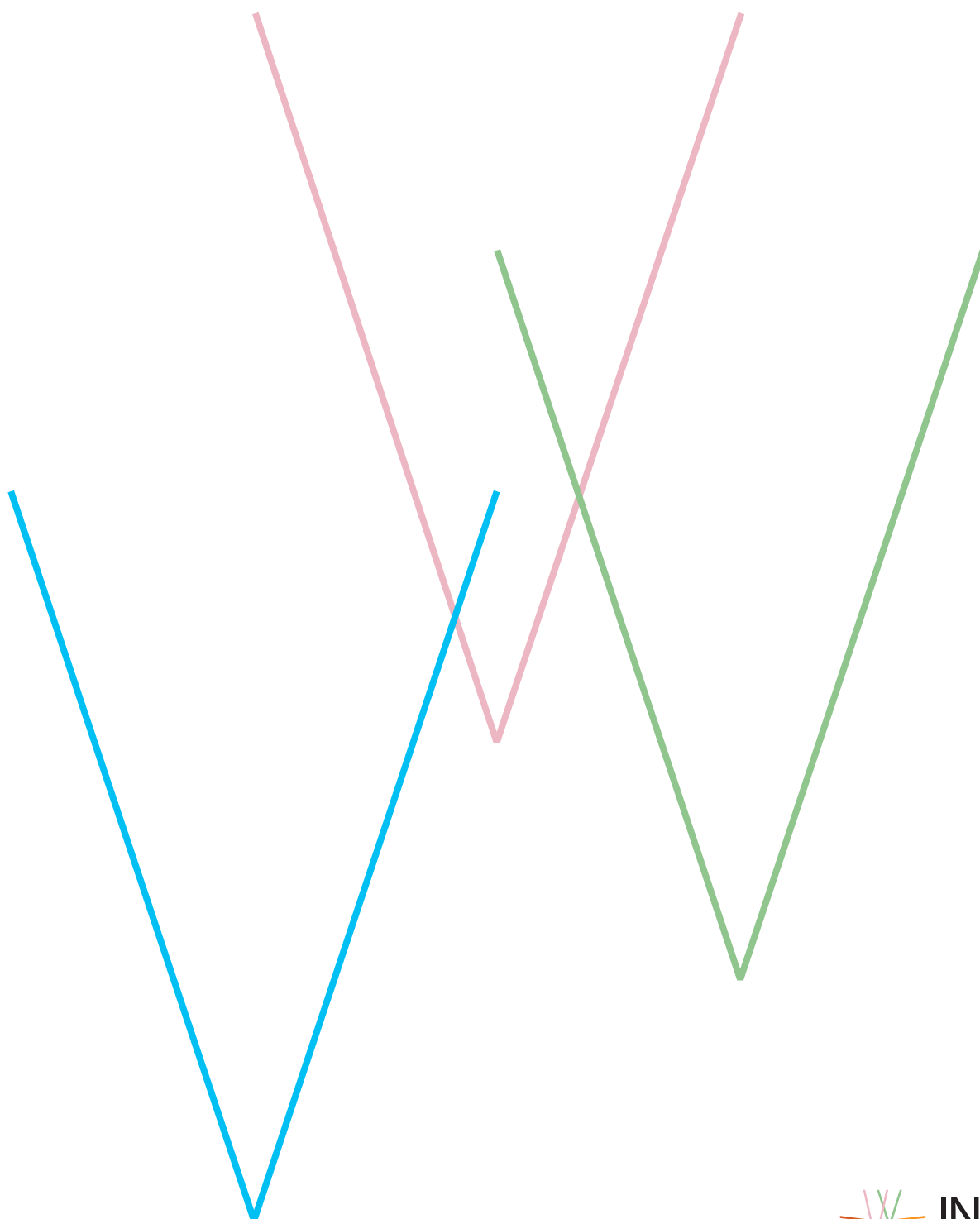
Professor of Medical Informatics
at the University of Hawaii and
Global Digital Health Expert



Dr. John C. Langenbrunner

Senior Adviser, Social Health
Insurance, Indonesia

PROJECTS IN 2022-23



1. PARTNERSHIP WITH NATIONAL HEALTH AUTHORITY

Overview

Affordable Quality Health (AQH), the organization under which InOrder operates, signed a Memorandum of Understanding (MoU) with the National Health Authority (NHA) in August 2022. This strategic partnership aims to establish collaboration in various areas including implementation research, capacity building, technical support, stakeholder advocacy, and public awareness under government initiatives such as the Ayushman Bharat Digital Mission (ABDM) and the Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY).

The NHA is the apex body responsible for implementing India's flagship public health insurance scheme, Ayushman Bharat Pradhan Mantri Jan Arogya Yojana. The NHA is tasked with designing the strategy, building the technological infrastructure, and implementing the Ayushman Bharat Digital Mission to create a National Digital Health Eco-system. The NHA coordinates with various ministries, state governments, and private sector/civil society organizations to lead the implementation of ABDM.

Partnership Activities

To co-design and implement a health literacy intervention for NCDs in two blocks of two districts in Chhattisgarh

To co-design and implement a health literacy intervention for NCDs in two blocks of two districts in Chhattisgarh

- **Knowledge Sharing and Capacity Building:**
Developing and conducting online training programs on ABDM for key health workers and administrators to build capacity and enhance the implementation of digital health initiatives.
- **Technical Support and Research:**
Conducting implementation research to support ongoing projects and provide technical assistance in the areas of health insurance and digital health infrastructure.
- **Stakeholder Advocacy and Public Awareness:**
The lack of incentives for the private sector and insufficient guidance for infrastructural compliance, particularly for smaller facilities, impede progress.
- **Staff Resistance and Skill Gaps:**
Creating and disseminating informative and educational content to raise awareness about digital health, health insurance, and healthcare services among stakeholders and the general public.

MoU Signing Ceremony

The MoU signing ceremony was attended by key figures including:

- Dr. RS Sharma, CEO, NHA
- Dr. Praveen Gedam, Additional CEO, NHA
- Dr. Kameshwar Rao, Executive Director, NHA
- Dr. Vikram Pagaria, Joint Director, NHA
- Dr. Krishna Reddy Nallamalla, Regional Director (South Asia), ACCESS Health International
- Mr. Maulik Chokshi, Deputy Country Director (Technical), ACCESS Health
- Ms. Komal Malhotra, Project Head, Digital Health, ACCESS Health



This partnership represents a significant step towards strengthening the digital health ecosystem in India and ensuring the effective implementation of critical health initiatives like ABDM and AB-PMJAY.

2. CONVENERSHIP OF GLC4HSR'S INDIA CHAPTER



Overview

InOrder, The Health Systems Institute, is leading the India country chapter of the Global Learning Collaborative for Health System Resilience (GLC4HSR). This initiative connects health systems experts, practitioners, and policymakers globally to enhance the resilience of health systems. As the convener of the India chapter, InOrder will drive the thematic learning journey within the country, contributing to the global vision of building more resilient health systems.

InOrder's Role and Mission

By joining the GLC4HSR, InOrder aims to strengthen health systems down to the district level, preparing them to withstand health crises and prevent further health shocks. InOrder's extensive network will be pivotal in recruiting renowned healthcare professionals from the region to participate in this collaborative.

Activities and Priorities

Thematic Learning Journey:

InOrder will lead the thematic learning initiatives of the GLC4HSR in India, focusing on strengthening health system resilience and capacity building.

Stakeholder Engagement:

The India chapter's priorities will be shaped through consultations with InOrder, ensuring alignment with local health system needs and challenges.

Knowledge Sharing and Collaboration:

InOrder will facilitate the sharing of best practices and innovations among GLC4HSR members, promoting collaborative efforts to enhance health system resilience.

Global Context and Collaborative Efforts

The GLC4HSR, managed by ACCESS Health International as its global techno-managerial secretariat, includes country chapters in Bangladesh and Indonesia, with over 40 members and 12 technical advisors across 15 countries. Since its launch in March 2022, the GLC4HSR has held numerous substantive learning meetings. InOrder, as an associate partner of ACCESS Health, will help shape the priorities and activities of the India chapter, contributing to the global agenda.

Post-Pandemic Significance and Future Directions

In the post-pandemic era, the importance of a global health agenda and collective action towards sustainable health systems is paramount. This partnership will enhance healthcare sector efficiency, address key challenges in research and innovation, and foster collaboration on data and digital health. Ultimately, these efforts aim to reduce the cost burden on countries for future outbreak control and build more robust health systems worldwide. The collaboration between InOrder and GLC4HSR marks a significant step towards achieving resilient health systems in India, contributing to global health security and sustainable development.

3.

RESEARCH ON CLOUD ADOPTION IN HEALTHCARE

Overview

In collaboration with Amazon Web Services (AWS), InOrder conducted a six-month research project to understand the barriers to cloud adoption in healthcare. This India-specific study covered three Indian states and extended to a comprehensive analysis across 12 countries in South Asia and the Asia Pacific regions. The research involved a literature review and interviews with 40 key stakeholders, including policymakers, government advisors, Hospital CMIOs & CIOs, and Health-IT experts at both national and regional levels. The findings were launched in December 2022 through a webinar co-hosted by AWS and ACCESS Health.

Key Findings

Barriers to Cloud Adoption

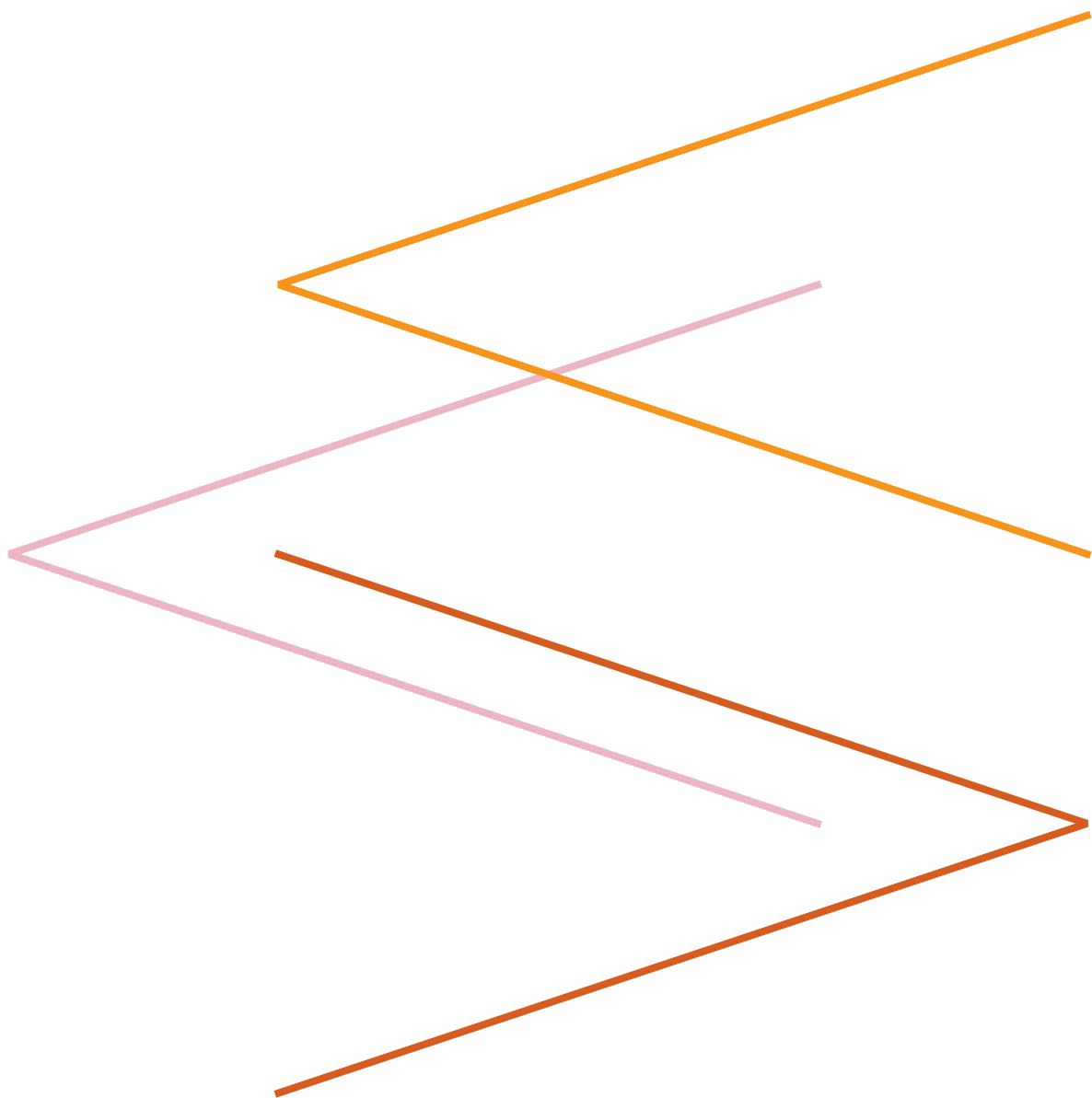
- **Government Adoption Challenges:**
Significant barriers to cloud adoption were identified within the public health systems across different regions, highlighting a need for strategic policy and infrastructural adjustments.
- **Stakeholder Insights:**
Interviews with policymakers, government advisors, and health-IT experts provided a nuanced understanding of the challenges and potential solutions for cloud integration in healthcare.

Recommendations for Overcoming Barriers

- **Cloud-First Policy:**
Countries should adopt a Cloud-First Policy for healthcare, driven by a central digital health authority to streamline and standardize cloud adoption processes.
- **Foundational ICT Ecosystem:**
Investment in creating a robust foundational ICT ecosystem is critical to support and accelerate cloud adoption in healthcare.
- **Policy Tools:**
A diverse range of policy tools should be utilized to fully realize the potential of cloud technology in the digitalization of healthcare services.
- **Health Worker Adaptation:**
Strategies to address resistance from health worker groups are essential for the integration of digital health solutions into care delivery.
- **Capacity Building:**
Prioritizing capacity building is essential to address and overcome the key barriers to cloud adoption, ensuring that stakeholders are well-equipped to implement and manage cloud-based solutions effectively.

The report emphasizes the need for continued focus on policy development, infrastructural investment, and capacity building to foster cloud adoption in healthcare. The insights from this study will guide future initiatives aimed at leveraging cloud technology to enhance healthcare delivery and efficiency across various regions.

CAPACITY BUILDING INITIATIVES IN 2022-23



1. **TASK AND INORDER PARTNERSHIP ON TRAINING HEALTHCARE PROFESSIONALS**

Overview:

The Telangana Academy for Skill and Knowledge (TASK) renewed its partnership with InOrder, under Affordable Quality Health, to enhance the skills of healthcare professionals in public health facilities across Telangana. This partnership is part of a broader initiative where TASK has collaborated with 46 organizations to launch various courses, impacting 150,000 professionals and students.



About the Program:

InOrder signed an MoU with TASK last year to implement skill enhancement training programs for support and nursing staff at government hospitals and healthcare institutions in Telangana. These training programs commenced in December 2021, and approximately 1,200 healthcare staff have been trained so far under this partnership.

TASK's Role and Objectives

TASK is a non-profit organization established by the Government of Telangana under the Department of Information Technology, Electronics & Communications. Its mission is to align government, industry, and academic institutions to provide quality human resources and services. TASK's collaboration with InOrder focuses on upskilling healthcare professionals to improve the quality of care and patient safety in public health facilities.

Training Focus Areas

The partnership aims to upskill and reskill healthcare professionals in public health facilities, particularly in districts identified by the Commissioner of Health & Family Welfare and the Mission Director of the National Health Mission. The training programs emphasize:

- **Clinical Nursing:**
Enhancing practical nursing skills and patient care techniques.
- **Nursing Management:**
Developing leadership and management skills among nursing staff.
- **Quality of Care at Point of Delivery:**
Improving service delivery and patient outcomes.
- **Infection Prevention and Control:**
Educating staff on best practices to prevent healthcare-associated infections.
- **Patient Safety:**
Implementing protocols and procedures to ensure patient safety.
- **COVID Care Management:**
Training staff on effective management and care for COVID-19 patients.

Impact and Future Goals

The training initiatives target a wide range of healthcare professionals, including nursing staff, patient care attendants, housekeeping staff, and security teams in secondary care public health facilities such as district hospitals, area hospitals, and community health centers. The project aims to train over 2,000 professionals, significantly enhancing the quality of healthcare delivery in Telangana.

2. SUCCESSFUL COMPLETION OF THE FIRST MANAGEMENT DEVELOPMENT PROGRAM ON HEALTH INSURANCE

Overview

InOrder, in collaboration with the **Administrative Staff College of India (ASCI)** and **ACCESS Health International**, successfully concluded a six-month online Management Development Program on Health Insurance. The program aimed to address knowledge gaps among professionals in health and social sectors regarding critical issues in health insurance in India.



Program Objectives

The goal of the program was to provide an overview of:

- Health Systems and Principles of Health Financing
- Landscape of Indian Health Insurance
- Implementation of Health Insurance Schemes
- Legal and Regulatory Framework in Health Insurance
- Quality Assurance and Accountability
- Use of Data and Informatics in Decision Making
- Developing Trends, Innovations, and Best Practices in Health Insurance

Participant Profile

The course received 24 nominations from organizations including public medical colleges, state health authorities, Indian Dental Association, research organizations, philanthropic organizations, and private practitioners.

Outcome and Impact

The program aimed to develop participants' understanding of health insurance industry basics, various products, government-sponsored schemes, and their integration with the health system. It sought to bridge gaps in designing, implementing, and monitoring health insurance schemes.

Valedictory Ceremony

The valedictory ceremony held on June 3, 2022, was attended by Dr. Krishna Reddy Nallamalla, Regional Director South Asia, ACCESS Health International, and Dr. Bagchi, Director General (I/C), ASCI. The event included session feedback and a group photograph to mark the closure of the course, with certificates awarded to all 24 participants.

This program facilitated collaboration among stakeholders and experts to address emerging issues in health insurance, contributing to equitable and effective healthcare services and poverty reduction.

3. SUCCESSFUL COMPLETION OF THE FIRST **MANAGEMENT DEVELOPMENT PROGRAM ON HEALTH INFORMATICS**

Overview

InOrder, in collaboration with the Administrative Staff College of India (ASCI) and ACCESS Health International, successfully concluded a six-month online Management Development Program (MDP) on Health Informatics. This program aimed to enhance participants' decision-making abilities in clinical, managerial, and business aspects through effective use of informatics and data-based medico-metrics.

Program Objectives

The Health Informatics course focused on:

- Introduction to Health Informatics
- Healthcare IT Standards
- Digital Health Mission
- Healthcare IT Applications
- Healthcare IT Implementation Challenges
- Data Science of Health Informatics & Artificial Intelligence in Healthcare

Delivery and Evaluation

The program was conducted online over weekends from December 2021 to May 2022. It utilized a Learning Management Portal for live sessions and included regular projects, assignments, presentations, case studies, and a final examination for evaluation.

Impact and Future Applications

The course aimed to equip participants with skills to address health informatics challenges, utilize data for healthcare improvements, and align with national initiatives like the National Health Policy (2017) and National Digital Health Blueprint (NDHB).

Valedictory Ceremony

The valedictory ceremony on May 27, 2022, featured addresses by Dr. Krishna Reddy Nallamalla, Regional Director South Asia, ACCESS Health International, and Dr. Nirmalya Bagchi, Director General (I/C), ASCI. Feedback collected highlighted the program's effectiveness in preparing healthcare professionals to lead in digital healthcare.

This program underscores InOrder's commitment to advancing healthcare through education and collaboration, preparing professionals to navigate complexities in health informatics and insurance management.

4.

PARTNERSHIP WITH THE GOA INSTITUTE OF MANAGEMENT FOR PUBLIC HEALTH ADVISORY COURSE

Overview

InOrder, in partnership with the Goa Institute of Management (GIM) and ACCESS Health International, has collaborated to develop a unique course on Public Health Advisory. This initiative aims to equip students of the PGDM course in Healthcare Management with comprehensive skills in public advisory, enhancing their ability to address complexities in public health systems.



Objectives and Focus

The course is designed to:

- Provide students with practical insights into public health systems and service delivery.
- Develop consultancy skills for government and social sector clients.
- Build understanding of health system pillars, data sources, and evidence-based solutions.

Collaborative Efforts

- **Course Development:**
Experts from AHI, InOrder, and GIM collaborated to draft the curriculum and evaluation model.
- **Hands-on Training:**
Small cases and practical exercises will enable students to apply advisory skills in real-world scenarios.

Duration

The course spans 2.5 months, offering an intensive learning experience for participants.

Target Segment

- **The course targets:**
Students pursuing MBA in Healthcare Management at GIM.

Modules Covered

The curriculum includes:

- **Health System Framework:**
Understanding the structure and function of public health systems.
- **Health Indicators:**
Analyzing key metrics to assess population health and service effectiveness.
- **Data Sources**
Exploring sources of health data and their relevance in decision-making.
- **Analytical Tools, Documentation, and Project Work Presentation: Hands**
Hands-on training in using analytical tools, documenting findings, and presenting project work.

Goa Institute of Management (GIM)

GIM is renowned for its commitment to transforming management education and is ranked among the top business schools in India.

Implementation and Impact

The course will be conducted by ACCESS Health and InOrder, leveraging their expertise in health systems research, technical advisory, and capacity building. It aims to prepare students to navigate the complexities of public health and contribute effectively to health advisory roles.

This partnership underscores a shared commitment to advancing public health education and enhancing advisory capabilities, contributing to the development of future leaders in healthcare management.

3.

HEALTH SYSTEMS STRENGTHENING COURSE IN PARTNERSHIP WITH ASCI

Overview

InOrder, in collaboration with the Administrative Staff College of India (ASCI), offers a specialized Health Systems Strengthening Course. This program is designed to equip students pursuing MBA in Healthcare Management with essential knowledge and skills to enhance the resilience and performance of health systems.

Program Objectives

The course aims to achieve the following objectives:

- Provide a comprehensive understanding of health systems and their components.
- Utilize the WHO Building Blocks framework to strengthen key areas such as service delivery, health workforce, health information systems, access to essential medicines, health financing, leadership/governance, health systems performance assessment, and resilience.

Duration and Timeline

Duration: 3 months

Frequency: Annual course offering

Target Segment

The course is tailored for:

- Students enrolled in MBA in Healthcare Management programs.

Modules Covered

The curriculum includes:

- **Understanding Health Systems:**
An overview of health system structures and functions.
- **Health Systems Strengthening WHO Building Blocks Framework:**
 - Service Delivery
 - Health Workforce
 - Health Information System
 - Access to Essential Medicines
 - Health Financing
 - Leadership/Governance

- Health Systems Performance Assessment
- Health Systems Resilience
- **Course Delivery and Impact**
 - Batches Completed: 3 annually
 - Collaborative Approach: ASCI's expertise in management education enhances the course's practical relevance and academic rigor.

This initiative underscores InOrder's commitment to advancing healthcare management education and preparing future leaders to navigate and improve health systems effectively. The partnership with ASCI ensures a robust learning experience that addresses current challenges and opportunities in healthcare management.

This course equips participants with the knowledge and skills necessary to contribute meaningfully to the enhancement of health systems' efficiency, effectiveness, and resilience in diverse healthcare settings.

4. FORMATION OF THE HEALTH INFORMATICS NETWORK

Overview

The Health Informatics Network (HIN), led by ACCESS Health International and InOrder, unveiled a model curriculum on Health Informatics to address the growing demand for skilled healthcare professionals adept in technology. This initiative aims to equip academic institutions with a robust framework to train future health informatics professionals.



Model Curriculum Development

- **Initiation:**
HIN convened industry and academic experts to identify skill gaps and develop a comprehensive curriculum.
- **Consultations:**
Extensive consultations across medical, technical, management, and public health domains shaped the curriculum's core and elective topics.
- **Event:**
The curriculum was launched on December 16, 2022, in New Delhi, with Dr. K. Madan Gopal, Senior Consultant, NITI Aayog, and esteemed HIN members present.

Key Features

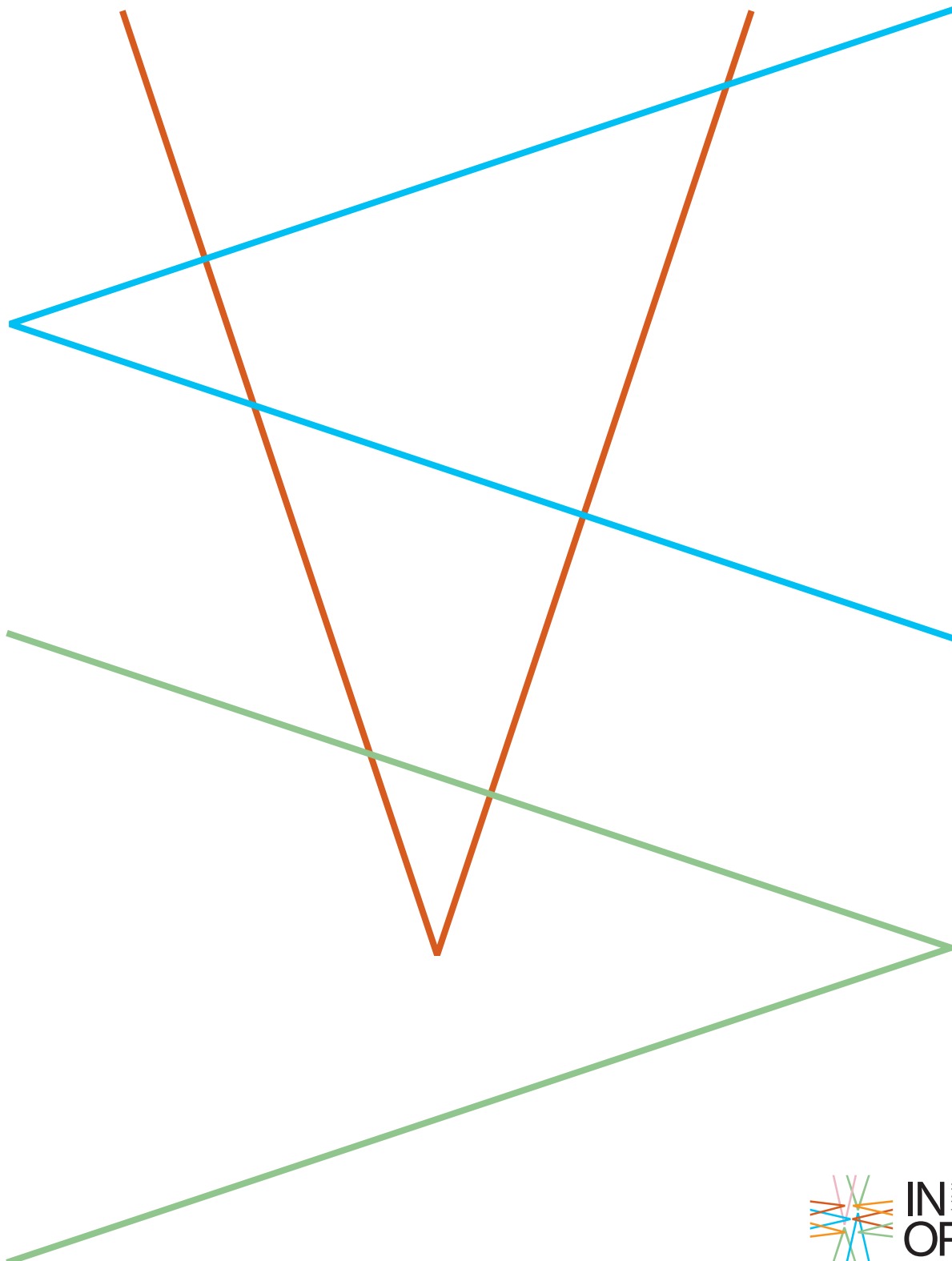
- **Content:**
Covers medical terminologies, artificial intelligence, data analytics, and more.
- **Application:**
Designed to enhance healthcare, technology, and management skills of students.
- **Impact:**
Provides a tailored educational resource for institutions preparing health informatics professionals.

Stakeholder Engagement

- **Participants:**
Engaged leading experts from academia and industry to ensure curriculum relevance and applicability.
- **Outreach:**
Aims to support academic institutions in meeting the evolving demands of healthcare technology.

The model curriculum by HIN signifies a collaborative effort to bridge the skills gap in health informatics, supporting the transformation of healthcare through enhanced technology integration. This initiative sets a precedent for fostering skilled professionals capable of driving innovation in healthcare informatics nationally.

FINANCIAL STATEMENTS FOR 2022-23



An Institute under Affordable Quality Health

INDEPENDENT AUDITORS REPORT

To THE MEMBERS OF
M/s Affordable Quality Health

Opinion

We have audited the accompanying financial statements of **Affordable Quality Health** ("the Company") which comprises the Balance Sheet as at March 31, 2023, the Statement of Profit and Loss and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies and other explanatory information. In our opinion and to the best of our information and according to the explanations given to us, the aforesaid financial statements give the information required by the Act in the manner so required and give a true and fair view in conformity with the accounting principles generally accepted in India, of the state of affairs of the Company as at March 31, 2023, and loss, and cash flows for the year ended on that date.

Basis for Opinion

We conducted our audit in accordance with the Standards on Auditing (SAs) specified under section 143(10) of the Companies Act, 2013. Our responsibilities under those Standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the Company in accordance with the Code of Ethics issued by the Institute of Chartered Accountants of India together with the ethical requirements that are relevant to our audit of the financial statements under the provisions of the Companies Act, 2013 and the Rules there under, and we have fulfilled our other ethical responsibilities in accordance with these requirements and the Code of Ethics. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Information other than the financial statements and auditors' report thereon

The Company's Board of Directors is responsible for the preparation of the other information. The other information comprises the information included in the Board's Report including Annexures to Board's Report, Business Responsibility Report but does not include the financial statements and our auditor's report thereon.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the standalone financial statements or our knowledge obtained during the course of our audit or otherwise appears to be materially misstated.



If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibility of Management for the Financial Statements

The Company's Board of Directors is responsible for the matters stated in section 134(5) of the Companies Act, 2013 ("the Act") with respect to the preparation of these financial statements that give a true and fair view of the financial position, financial performance, (changes in equity) and cash flows of the Company in accordance with the accounting principles generally accepted in India, including the accounting Standards specified under section 133 of the Act. This responsibility also includes maintenance of adequate accounting records in accordance with the provisions of the Act for safeguarding of the assets of the Company and for preventing and detecting frauds and other irregularities; selection and application of appropriate implementation and maintenance of accounting policies; making judgments and estimates that are reasonable and prudent; and design, implementation and maintenance of adequate internal financial controls, that were operating effectively for ensuring the accuracy and completeness of the accounting records, relevant to the preparation and presentation of the financial statement that give a true and fair view and are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Company or to cease operations, or has no realistic alternative but to do so.

The Board of Directors are also responsible for overseeing the company's financial reporting process

Auditor's Responsibility for the Audit of Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with SAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with SAs, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.



- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances. Under section 143(3)(i) of the Companies Act, 2013, we are also responsible for expressing our opinion on whether the company has adequate internal financial controls system in place and the operating effectiveness of such controls
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Company to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

Materiality is the magnitude of misstatements in the financial statements that, individually or in aggregate, marks it probable that the economic decisions of a reasonably knowledgeable user of the financial statements may be influenced. We consider quantitative materiality and qualitative factors in (i) planning the scope of our audit work and in evaluating the results of our work; and (ii) to evaluate the effect of any identified misstatements in the financial statements.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

We also provide those charged with governance with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards. From the matters communicated with those charged with governance, we determine those matters that were of most significance in the audit of the financial statements of the current period and are therefore the key audit matters. We describe these matters in our auditor's report unless law or regulation precludes public disclosure about the matter or when, in extremely rare circumstances, we determine that a matter should not be communicated in our report because the adverse consequences of doing so would reasonably be expected to outweigh the public interest benefits of such communication.

Report on Other Legal and Regulatory Requirements



The Companies (Auditor's Report) Order, 2020 ("the Order"), issued by the Central Government of India in terms of sub-section (11) of section 143 of the Companies Act, 2013, is not applicable to the Company for the time being.

As required by Section 143(3) of the Act, we report that:

We have sought and obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purposes of our audit.

- a. In our opinion, proper books of account as required by law have been kept by the Company so far as it appears from our examination of those books.
- b. The Balance Sheet, the Statement of Profit and Loss, and the Cash Flow Statement dealt with by this Report are in agreement with the books of account.
- c. In our opinion, the aforesaid standalone financial statements comply with the Accounting Standards specified under Section 133 of the Act, read with Rule 7 of the Companies (Accounts) Rules, 2014.
- d. On the basis of the written representations received from the directors as on 31st March, 2023 taken on record by the Board of Directors, none of the directors is disqualified as on 31st March, 2023 from being appointed as a director in terms of Section 164 (2) of the Act.
- e. The Company has been exempted from the requirements of its auditor reporting on whether the company has adequate internal financial controls system in place and the operating effectiveness of such controls (clause (i) of Section 143(3) of the Act); and
- f. With respect to the other matters to be included in the Auditor's Report in accordance with Rule 11 of the Companies (Audit and Auditors) Rules, 2014, in our opinion and to the best of our information and according to the explanations given to us:
 - i. The Company does not have any pending litigations which would impact its financial position.
 - ii. The Company did not have any long-term contracts including derivative contracts for which there were any material foreseeable losses.
 - iii. There were no amounts which were required to be transferred to the Investor Education and Protection Fund by the Company.
 - iv. (a) The management has represented that, to the best of its knowledge and belief, no funds have been advanced or loaned or invested (either from borrowed funds or share premium or any other sources or kind of funds) by the company to or in any other person(s) or entity(ies), including foreign entities ("Intermediaries"), with the understanding, whether recorded in writing or otherwise, that the Intermediary shall, whether, directly or indirectly lend or invest in other persons or entities identified in any manner whatsoever by or on behalf of the company ("Ultimate Beneficiaries") or provide any guarantee, security or the like on behalf of the Ultimate Beneficiaries;



(b) The management has represented, that, to the best of it's knowledge and belief, no funds have been received by the company from any person(s) or entity(ies), including foreign entities ("Funding Parties"), with the understanding, whether recorded in writing or otherwise, that the company shall, whether, directly or indirectly, lend or invest in other persons or entities identified in any manner whatsoever by or on behalf of the Funding Party ("Ultimate Beneficiaries") or provide any guarantee, security or the like on behalf of the Ultimate Beneficiaries; and

(c) Based on audit procedures which we considered reasonable and appropriate in the circumstances, nothing has come to their notice that has caused them to believe that the representations under sub-clause (i) and (ii) contain any material mis-statement.

- g. Proviso to Rule 3(1) of the Companies (Accounts) Rules, 2014 for maintaining books of accounts using accounting software which has a feature of recording audit trail (edit log) facility is applicable to the Company with effect from April 1, 2023, and accordingly, reporting under Rule 11(g) of Companies (Audit and Auditors) Rules, 2014 is not applicable for the financial year ended March 31, 2023.
- h. The company has not declared or paid any dividend during the year.
- i. With respect to the matter to be included in the Auditors' Report under Section 197(16) of the Act, in our opinion and according to the information and explanations given to us, the limit prescribed by section 197 for maximum permissible managerial remuneration is not applicable to a private limited company.

Date: 29-09-2023
Place: Hyderabad

For S.V. Rao Associates
Chartered Accountants
FIRN. 003152S

Sirisha Sarvopalli

Partner

Mem No.222522

UDIN: 23222522BGYCJI4326



AFFORDABLE QUALITY HEALTH
Balance Sheet as at 31st March 2023

(Amounts in Rs. Lakhs)			
Particulars	Notes	As at 31st March 2023	As at 31st March, 2022
		<i>Amount in Rs.</i>	<i>Amount in Rs.</i>
ASSETS			
Non-Current Assets			
Fixed Assets	2.00	1.17	1.77
Differed Tax Assets (Net)	2.01	-	-
		1.17	1.77
Current Assets			
Cash and Cash Equivalents	2.02	3.18	9.69
Other Current Assets	2.03	13.84	16.53
		17.01	26.22
Total Assets		18.19	27.99
EQUITY AND LIABILITIES			
Corpus Fund			
Share Capital	2.04	2.0	2.00
Excess of Income over Expenditure/(Expenditure over Income)	2.05	-50.91	-21.55
		-48.91	-19.55
Non Current Liabilities			
Loan From Director	2.06	66.69	42.49
		66.69	42.49
Current liabilities			
Trade Payables	2.07	0.40	5.05
		0.40	5.05
Total Equity and Liabilities		18.19	27.99

Notes to Accounts and
Significant Accounting Policies

As per our report of even date attached
For and on behalf of
S V Rao & Associates
Chartered Accountants
Firm Registration No.


Sirisha Sarvepalli

Partner
M.No. 222522

UDIN:
Place : Hyderabad
Date : 29.04.2023



For and on behalf of the Board of Directors



Dr. Krishna Reddy Nallamalla
Director
(DIN-910584)



Biswajeet Das
Chatterjee
Director
(DIN-199378)



AFFORDABLE QUALITY HEALTH

Income & Expenditure Account for the period ended 31st March 2023

(Amount in Rs. Lakhs)

Particulars	Notes	As at 31st March 2023	As at 31st March, 2022
		Amount in Rs.	Amount in Rs.
Revenue			
Donation & Other Income	2.08	60.48	45.33
Total Revenue (I)		60.48	45.33
Expenses			
Employee Benefits Expense	2.09	0.64	14.18
Depreciation	2.00	1.18	0.39
Other Expenses	2.10	88.09	71.81
Total Expenses (II)		89.91	86.37
Excess of Income over Expenditure before Tax		(29.43)	(41.04)
Tax Expense			
Current Tax		-	-
Previous Year Taxes		0.08	-
Mat Credit Utilized/(Created)		-	-
Deferred Tax Asset Created/(Written Back)		-	-
Excess of Income over Expenditure for the year		(29.35)	(41.04)
Number Of Equity Shares		0.02	0.02
Earnings Per Equity Share (Epes)			
Basic		(1,467.67)	(2,052.14)
Diluted		(1,467.67)	(2,052.14)

Notes to Accounts and
Significant Accounting Policies

As per our report of even date attached

For and on behalf of

S V Rao & Associates

Chartered Accountants

Firm Registration No.



Sirisha Sarvepalli

Partner

M.No. 222522

UDIN:

Place : Hyderabad

Date : 29-09-2023



For and on behalf of the Board of Directors



Dr. Krishna Reddy
Nallamalla

Director

(DIN-910584)



Biswajeet Das Chatterjee

Director

(DIN-199378)



AFFORDABLE QUALITY HEALTH

Cash Flow Statement for the year ended 31st March 2023

(Amount in Rs. Lakhs)

	Particulars	As at 31st March 2023	As at 31st March, 2022
		Amount in Rs.	Amount in Rs.
A)	CASH FLOW FROM OPERATING ACTIVITIES		
	Net Profit Before Tax & Extra Ordinary Items	-29.43	-41.64
	Adjustment For -		
	Add:- Depreciation	1.18	0.39
	Less:- Interest Income	-	-
	Operating Profit Before Working Capital Changes	-28.25	-40.66
	Movements In Working Capital		
	(Decrease) / Increase In Trade Payables	-4.65	3.98
	(Increase)/Decrease In Receivables	-	-
	(Increase) /Decrease In Other Current Assets	2.68	-16.35
	(Increase) /Decrease In Long Term Loans & Advances	-	-
	(Decrease) / Increase In Short Term Provisions	-	-
	(Increase) /Decrease In Other Non-Current Assets	-	-
	Less:-Direct Taxes Paid	0.08	-
	Net Cash From Operating Activities (A)	-1.89	-12.36
B)	CASH FLOW FROM INVESTMENT ACTIVITIES		
	Purchase of Fixed Assets including CWIP	-0.58	-2.15
	Net Cash From In Investing Activities (B)	-0.58	-2.15
C)	CASH FLOW FROM FINANCING ACTIVITIES		
	Proceeds From Short Term Loans		
	Proceeds From /(Repayments Of) Long Term Loans	24.20	42.49
	Proceeds From /(Repayments Of) Short Term Loans	-	-
	Net Cash From Financing Activities (C)	24.20	42.49
D)	Net Increase/(Decrease) In Cash & Cash Equivalents (A+B+C)	-6.52	-12.68
	Opening Cash and Cash Equivalent	9.69	22.38
	Closing Cash and Cash Equivalent	3.18	9.69
	Increase/(Decrease) in Cash & Cash Equivalents	-6.52	-12.68

The cash flow is prepared under indirect method as set out in Accounting Standard-3

As per our report of even date attached

For and on behalf of

S V Rao & Associates

Chartered Accountants

Firm Registration No.


Sirisha Sarvepalli

Partner

M.No. 222522

UDIN:

Place : Hyderabad

Date : 29-09-2023



For and on behalf of the Board of Directors


Dr. Krishna Reddy
Nallamalla
Director
(DIN-910584)


Bidwajeet Das
Chatterjee
Director
(DIN-199378)



AFFORDABLE QUALITY HEALTH

Notes Forming Part of the Financial Statements for the year ended 31st March 2023

(Amount in Rs. Lakhs)

EQUITY AND LIABILITIES	As at 31st March, 2023	As at 31st March, 2022
	(Amount in Rs.)	(Amount in Rs.)
Note 2.04: SHAREHOLDERS' FUNDS		
SHARE CAPITAL		
AUTHORISED		
2,000 Equity Shares of Rs. 10/- each	2.00	2.00
ISSUED, SUBSCRIBED & PAID UP		
2,000 Equity Shares of Rs. 10/- each	2.00	2.00

a) Reconciliation of the shares outstanding

Equity Shares	31st March 2023		31st March, 2022	
	Number	(Amount in Rs.)	Number	(Amount in Rs.)
Authorized				
Opening balance at the beginning of the year	0.02	2.00	0.02	2.00
Addition during the year	-	-	-	-
Closing balance at the end of the year	0.02	2.00	0.02	2.00
Issued, subscribed and fully paid up				
Opening balance at the beginning of the year	0.02	2.00	0.02	2.00
Addition during the year	-	-	-	-
Closing balance at the end of the year	0.02	2.00	0.02	2.00

b) Terms/Rights attached to Equity Shares

The Company has only one class of equity shares having a par value of Rs. 100/- per share. Each holder of equity shares is entitled to one vote per share.

The Company is not required to declare / pay dividend as per the Memorandum of Association and the Article of Association.

c) Shares held by each shareholder holding more than 5% shares

Name of shareholder	31st March 2023		31st March, 2022	
	No. of Shares	% Shares	No. of Shares	% Shares
Equity shares of Rs.10/- each fully paid up				
Jatinder Rana Malhotra	-	0%	-	0%
Pavan Ahluwalia	666	33%	666	33%
Dr. Krishna Reddy Nallamalla	667	33%	667	33%
Bhawant Das Chatterjee	667	33%	667	33%

c) Share holding of Promoters

Name of shareholder	31st March 2023			31st March, 2022		
	No. of Shares	% Shares	% of Change during the Year	No. of Shares	% Shares	% of Change during the Year
Equity shares of Rs.10/- each fully paid up						
Pavan Ahluwalia	666	33%		666	33%	
Pavan Ahluwalia	667	33%		667	33%	
Dr. Krishna Reddy Nallamalla	667	33%		667	33%	

AFFORDABLE QUALITY HEALTH

Notes to the Financial Statements for the period ended 31st March 2023

(Amount in Rs. Lakhs)

Notes	Particulars	As at 31st March 2023	As at 31st March, 2022
		(Amount in Rs.)	(Amount in Rs.)
2.01	NON-CURRENT ASSETS		
	Deferred Tax Assets	-	-
		-	-
	CURRENT ASSETS		
2.02	Cash And Cash Equivalents		
	Balances With Banks		
	- In Current Accounts	3.16	9.61
	- In Cash	0.017	0.08
		3.178	9.69
2.03	Other Current Assets		
	Sundry Debtors	8.85	15.04
	TDS on GST	0.46	-
	TDS Recoverable	3.29	1.48
	GST Credit	1.21	-
	Advance for Expenses	0.03	-
		13.84	16.53
2.05	EXCESS OF INCOME OVER EXPENDITURE		
	Surplus/(Deficit) in Income & Expenditure*	-50.91	-21.55
	Total Reserves and Surplus	-50.91	-21.55
	*Surplus/(Deficit) in Income & Expenditure		
	Opening balance	-21.55	19.49
	Add: Excess of Income over Expenditure	-29.35	-41.04
	Less: MAT Credit	-	-
	Closing balance	-50.91	-21.55
2.06	NON CURRENT LIABILITIES		
	Loan From Director	66.69	42.49
		66.69	42.49
2.07	CURRENT LIABILITIES		
	Trade Payables		
	Audit Fees Payable	0.23	0.50
	TDS Payable	-	0.89
	GST Payable	-	2.40
	Provision for Tax	-	-
	Sundry Creditors	0.16	0.66
	Other Payables	0.01	0.59
		0.40	5.05

AFFORDABLE QUALITY HEALTH

Notes to the Financial Statements for the period ended 31st March 2023

Notes	Particulars	(Amount in Rs. Lakhs)	
		As at 31st March 2023	As at 31st March, 2022
		Amount in Rs.	Amount in Rs.
2.08	Revenue from Operations		
	Donations	25.97	22.93
	Consultancy Fees	29.05	17.40
	CSR Donation Received	5.00	5.00
		60.02	45.33
2.08	Other Income		
	Interest on Income Tax Refund	0.09	-
	Other Income	0.37	-
		0.45	-
2.09	Employee Benefits Expense		
	Salaries & Honorarium	-	13.95
	Medical Insurance	0.64	0.23
		0.64	14.18
2.10	Other Expenses		
	Rent	2.04	0.36
	Payment to Auditors	-	-
	-Statutory Audit Fees	0.25	0.25
	Late Fees for Payment of Tax	-	0.19
	Consultancy Fees	65.74	57.78
	Bank Charges	-	0.00
	Interest on Loan	-	0.35
	Hosting Expenses	0.69	0.43
	Registration fees	-	0.27
	Incentive Expenses	1.04	-
	Insurance Expenses for Worker	7.88	-
	Meeting Expenses	0.01	-
	Printing Expenses	0.07	-
	Repair & Maintenance	0.04	-
	Sponsorship Expenses	1.00	-
	Workshop Expenses	0.02	-
	Medicines Purchases	-	0.52
	Business Promotion Expenses	1.34	-
	Conference Expenses	0.09	-
	Conveyance Expenses	0.09	-
	FCRA Application Fees	0.05	-
	Hotel Expenses	0.43	-
	Design Charges	-	0.34
	Cab Hiring Expenses	0.73	0.66
	Business Development Expenses	0.61	1.20
	Subscription Expenses	-	0.12
	GST Expense	1.03	0.06
	Membership Expenses	-	0.12
	Professional Fees	2.00	1.18
	ROC Filing Fees	0.03	0.06
	Local Travel & Meal	0.69	0.01
	Round Off	0.00	0.00
	Office Expenses	0.02	0.19
	Postage and Courier Charges	-	-
	Telephone & Internet expenses	0.36	0.08
	Website Development Expenses	1.83	7.68
		88.09	71.81

AFFORDABLE QUALITY HEALTH

Financial Statements

Notes to Financial Statements for the year ended 31 March 2023

(All amounts are in Indian Rupees, except share data and unless otherwise stated)

Trade Payables- Aging Analysis

Particulars	Outstanding for following periods from due date of Payment				
	Less than 1 year	1-2 years	2-3 years	More than 3 years	Total
(i) MSME	-	-	-	-	-
(ii) Others	0.40	-	-	-	0.40
(iii) Disputed dues - MSME	-	-	-	-	-
(iv) Disputed dues - Others	-	-	-	-	-

Trade Receivables- Aging Analysis

Particulars	Outstanding for following periods from due date of Payment					Total
	Less than 6 months	6 months -1 year	1-2 years	2-3 years	More than 3 years	
(i) Undisputed Trade receivables - considered good	-	8.54	-	-	-	8.54
(ii) Undisputed Trade Receivables - which have significant increase in credit risk	-	-	-	-	-	-
(iii) Undisputed Trade Receivables - credit impaired	-	-	-	-	-	-
(iv) Disputed Trade Receivables - considered good	-	-	-	-	-	-
(v) Disputed Trade Receivables - which have significant increase in credit risk	-	-	-	-	-	-
(vi) Disputed Trade Receivables - credit impaired	-	-	-	-	-	-

Additional Regulatory Information as per Paragraph (V) of Sch.III Part-I (Division B) :-

1.9 Additional regulatory information under the above mentioned paragraph is applicable only to clause (v) and clause (xv) regarding the Loans and Advances and Ratio Analysis respectively, the details of which are furnished hereunder.

The other clauses para (i), (ii), (iii), (iv), (vi), (vii), (viii), (ix), (x), (xi), (xii), (xiii), (xiv), (xvi), of the said paragraph are not applicable to the Company for the time being since such circumstances are not prevailing.

Clause (v) Loans & Advances

Type of Borrower	Amount of loan or advance in the nature of loan outstanding	Percentage to the total loans and advance in the nature of loans
Promoter	-	-
Directors	66,69,000.00	100%
KMPs	-	-
Related Parties	-	-
TOTAL	66,69,000.00	100%

RATIOS

The following are the analytical ratios for the year ended 31st March 2023 and 31st March 2022

Particulars	Numerator	Denominator	31st March 2023	31st March 2022	Variance
Current Ratio	Current Assets	Current Liabilities	42.35	5.19	715.79% ^a
Debt Equity Ratio	Total Debt	Share Holder Equity	(1.36)	(2.17)	-57.20% ^b
Debt Service Coverage Ratio	Earnings available for Debt Service	Debt Service	-	-	-
Return on Equity	Net Profit after Taxes	Average Share Holders equity	0.86	(42.39)	-503.12% ^c
Inventories Turnover Ratio	Cost of Goods Sold	Average Inventory	-	-	-
Trade Receivables Turnover Ratio	Net Credit Sales	Average Trade Receivables	-	-	-
Trade Payable Turnover Ratio	Net Credit Purchases	Average Trade Payables	-	-	-
Net Capital Turnover Ratio	Net Sales	Working Capital	3.62	2.34	66.74% ^d
Net Profit Ratio	Net Profit	Net Sales	(0.49)	(0.91)	-45.91% ^e
Return on Capital Employed	Earnings before interest & tax	Capital Employed	(2.05)	(3.10)	-33.96% ^f
Return on Investment Ratio	Income from Investments	Average Market value of investments	-	-	-

a. Current ratio improved due to a diminish in advance from customers in current liabilities which is beyond the decrease in current assets.

b. Debt Equity ratio deteriorated due to increase in loans taken from Directors.

c. Return on Equity ratio deteriorated due to decrease in total equity.

d. Net Capital Turnover ratio has improved due to rise in revenue.

e. Net Profit ratio has deteriorated significantly due to increase in expenses.

f. Return on Capital employed has deteriorated significantly due to decrease in current assets.

AFFORDABLE QUALITY HEALTH

Financial Statements

Notes to Financial Statements for the year ended 31 March 2023

(All amounts are in Indian Rupees, except share data and unless otherwise stated)

1.12

-4

Other Statutory Information:

- i. The Company do not have any Benami property and neither any proceedings have been initiated or is pending against the Company for holding any Benami property.
- ii. The Company do not have any transactions with companies struck off.
- iii. The Company do not have any charges or satisfaction which is yet to be registered with ROC beyond the statutory period.
- iv. The Company has not been declared a wilful defaulter by any bank or financial institution or any other lender during the current period.
- v. The Company have not advanced or loaned or invested funds to any other person(s) or entity(ies), including foreign entities (Intermediaries) with the understanding that the Intermediary shall:
 - a. directly or indirectly lend or invest in other persons or entities identified in any manner whatsoever by or on behalf of the company (Ultimate Beneficiaries) or
 - b. provide any guarantee, security or the like to or on behalf of the Ultimate Beneficiaries.
- vi. The Company has not received any fund from any person(s) or entity(ies), including foreign entities (Funding Party) with the understanding (whether recorded in writing or otherwise) that the Company shall:
 - a. directly or indirectly lend or invest in other persons or entities identified in any manner whatsoever by or on behalf of the Funding Party (Ultimate Beneficiaries) or
 - b. provide any guarantee, security or the like on behalf of the Ultimate Beneficiaries.
- vii. The loan has been utilized for the purpose for which it was obtained and no short term funds have been used for long term purpose.
- viii. The Company has not traded or invested in Crypto currency or Virtual Currency during the financial year.

As per our report of even date attached.

NOTE -1.01:

Forming Part of Balance Sheet and Profit and Loss Account

Significant accounting policies and notes to accounts for the year ended 31st March, 2023.

A. SIGNIFICANT ACCOUNTING POLICIES

1. **Basis of Accounting:** The financial statements have been prepared in accordance with Indian Generally Accepted Accounting Principles. IGAAP comprises mandatory accounting standards as prescribed under section 133 of Companies Act, 2013 (the act) read with Rule 7 of Companies (Accounts) Rules, 2014.
2. **Revenue Recognition:** The Company follows mercantile system of accounting where the income and expenditure are recognized on accrual basis.
3. **Property, Plant and Equipment:** Property, Plant and Equipment are stated at cost, net of recoverable CENVAT/ Value added Tax, rebates, less accumulated depreciation and impairment loss, if any. The cost of assets comprises its purchase price, borrowing cost, and any cost directly attributed to bringing the asset to its working condition for intended use, net changes on foreign exchange contracts and adjusted arising from exchange rate variations attributable to the assets. fixed Assets which are not ready for intended use are shown as Capital Working-in-Progress.
4. **Depreciation:** Depreciation is calculated on WDV method as per the useful life of the assets specified in Schedule II of the Companies Act, 2013.
5. **Foreign currency transactions:** The transactions in foreign currency are accounted for at the exchange rate prevailing at the date of transaction. Exchange differences arising on foreign currency transactions settled during the year are recognized in the statement of Profit and loss account.
6. **Provision for Income tax:** Provision for Income tax has been made as per the provisions of the Income Tax Act, 1961.
7. **Deferred Tax** on timing differences between book profit and tax profit is accounted for using the tax rates enacted as on the Balance Sheet date to the extent there is reasonable certainty that they would be realized.
8. **Contingent Liabilities:** Unrecognized contingent liabilities are disclosed in the Notes of Accounts.

B. NOTES TO ACCOUNTS

1. The financial statements have been prepared under the historical cost convention in accordance with the Generally Accepted Accounting Principle and the provisions of the Companies Act, 2013 as adopted consistently by the Company.
2. The Company is taken registration under Section 80G and Section 12AA of the Income Tax Act 1961 as Charitable Trust or institution.
3. Contingent Liabilities: Nil
4. Method of Accounting: The Company follows mercantile system of accounting where the income and expenditure are recognized on accrual basis.
5. Related party Disclosures as required by AS-18:

Names of the related parties and description of relationship:

Holding Company	Nil
Key Management Personnel	Krishna Reddy Nallamala Biswajeet Das Chatterji

a) Transactions during the year ended March 31, 2023 (Amount: Lakhs)

Transactions	Key managerial personnel	Enterprise Exercise Significant Influence
Loans received	24.20 (42.92)	- (-)
Loans repaid	- (-)	- (-)

b) Balances Outstanding as at 31st March, 2023 (Amount in Lakhs)

Transactions	Key Management Personnel	Enterprise Exercise Significant Influence
Unsecured Loans taken	66.69 (42.49)	- (-)
Loans given	- (-)	- (-)

Previous figures are shown in ()

6. As of 31st March, 2023, the company has no outstanding dues to small scale industrial undertakings.

7. Managing director's Remuneration.

Current Year: Nil

Previous Year: Nil

8. (i) Provision for Income tax has been made during the year based on the MAT provisions.

(ii) In compliance with Accounting Standard "AS-22 Accounting for Taxes on Income" issued by the Institute of Chartered Accountants of India, the company has reversed Rs.67,708/- towards deferred tax asset during the financial year 2019-20 and Deferred Tax details the details are as under.

S No	Particulars	Year ended 31.03.2023	Year ended 31.03.2022
a)	Deferred Tax asset in respect of losses	Nil	Nil
b)	Deferred tax liability in respect of depreciation on fixed assets	Nil	Nil
c)	Total Deferred Tax Asset (a-b)	Nil	Nil

9. Payment to Auditors:

Particulars	Year ended 31.03.2023	Year ended 31.03.2022
Audit Fee	25,000	25,000

10. The Company is a small and medium size company (SMC) as defined in the General Instructions in respect of accounting standards notified under the Companies Act, 2013. Accordingly, the company has complied with the Accounting Standards as applicable to a small and medium sized company.

11. Figures of the previous year have been rearranged or regrouped to make them comparable with that of current year.

As per our Report of Even Date
For S.V.Rao Associates
Chartered Accountants
FR No: 003152S


Sirisha Savepalli

Partner
Mem. No. 222522
Place: Hyderabad
Date: 29.09.2023

For and on behalf of the Board of Directors of
Affordable Quality Health


Dr. Krishna Reddy
Nallamalla
Director
DIN:910584


Biswajeet Das
Chatterjee
Director
DIN:199378



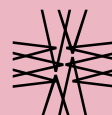
AFFORDABLE QUALITY HEALTH

103, Surabhi Enclave
Door No: 8-2-316/SE/103
Banjara Hills, Hyderabad 500 034
Telangana, India

admin@inorder.in

Annual Report
2022-2023

An Institute under
Affordable Quality Health



IN Strengthening
Systems,
to Secure Health
ORDER

THE HEALTH SYSTEMS INSTITUTE