

Performa for Social Audit of Shelters for Urban Homeless

ANNEXURE - III

| | | | | | | | |
|--|--|-----------------------------------|--|----------------|--|--|--|
| Name of ULB: | | M.C. Noharianpur | | Name of SUH: | | Barab, Area I & II | |
| Name of Institution/Organization through which Social Audit is being conducted | | Rajast Vikas Parishad Noharianpur | | Address of SUH | | Inside fire brigade office Noharianpur | |
| Date of Social Audit | | 28-12-2023 | | Capacity: | | 50 + 50 = 100 | |

| Physically Verification of facilities/amenities is being given in the SUH | | | | |
|---|---|--|---------------------------|--|
| (A) Facilities | | Facility Available in SUH | Remarks | Suggestion/Feedback given by Staff for improvement |
| i | Well ventilated rooms/dormitories | Yes/No <input checked="" type="checkbox"/> | Proper Ventilation in SUH | |
| ii | Adequate space for each inmate (@ 50 Sq. ft.) | Yes/No <input checked="" type="checkbox"/> | | |
| iii | Toilets/Bath Rooms | Yes/No <input checked="" type="checkbox"/> | 4 toilets & 1 bath room | |
| iv | Hot water- Geyser/ Solar device | Yes/No <input checked="" type="checkbox"/> | | |
| v | Heater | Yes/No <input checked="" type="checkbox"/> | | |
| vi | Beds | Yes/No <input checked="" type="checkbox"/> | 12 Beds | Needs to improve more beds |
| vii | Beddings | Yes/No <input checked="" type="checkbox"/> | 12 | |
| viii | Blankets | Yes/No <input checked="" type="checkbox"/> | 12 | |
| ix | Lighting/Fans | Yes/No <input checked="" type="checkbox"/> | | |
| x | Kitchen with vessels and Gas connectivity | Yes/No <input checked="" type="checkbox"/> | | |

Bar

| | | | | |
|--|---|--|--|--|
| | Piped water Supply | Yes/No <input checked="" type="checkbox"/> | | |
| xii | RO/Purified water facility | Yes/No <input checked="" type="checkbox"/> | | |
| xiii | Washing Provisions | Yes/No <input checked="" type="checkbox"/> | | |
| xiv | Food Arrangements | Yes/No <input checked="" type="checkbox"/> | | |
| (B) Security Facilities | | | | |
| i | CCTV camera installed | Yes/No <input checked="" type="checkbox"/> | Linked with Guna Ram das Lanya Society | |
| ii | Fire Protection measures | Yes/No <input checked="" type="checkbox"/> | | |
| ii | Cloak room /Personal Lockers | Yes/No <input checked="" type="checkbox"/> | | |
| (C) Health Facilities | | | | |
| i | First aid kit is with emergency medicines | Yes/No <input checked="" type="checkbox"/> | | |
| ii | Periodicity of Medical check ups | Yes/No <input checked="" type="checkbox"/> | | |
| (D) IEC Activities (Awareness) | | | | |
| i | Display Board at entrance of shelter | Yes/No <input checked="" type="checkbox"/> | | |
| ii | Munadi/Newspaper | Yes/No <input checked="" type="checkbox"/> | Please Specify the location | |
| iii | Flex/Hoardings/Pamphlets | Yes/No <input checked="" type="checkbox"/> | Please Specify the location | Munadi done during starting of winter season Bus Stand, Railway Station |
| iv | Any other, please specify | | Please Specify the location | |
| Additional (Services/entitlements/convergences) information's if any : | | | | |

Ref

Registers as mentioned below maintained properly in the shelter? Checked - (Yes/ No) :

| A Documents | | Report | Remarks | Suggestion/Feedback given by Staff for improvement |
|-----------------------------------|--|-----------|---|--|
| 1 | Register of inmates | available | | |
| 2 | Attendance Register | available | | |
| 3 | Complaints suggestions register and | No | Need to maintain New Register Book to Care take for the suggestions from every inmates | |
| B) Work Verification of SUH Staff | | Report | Remarks | Suggestion/Feedback given by Staff for improvement |
| | Have all the staff aware about their duty? | yes | | |
| | Have all the staff received the capacity building training for O & M of SUH? | yes | | |
| | Is the night survey conducted in this month for identification of homeless? Yes/No | yes | M.C has Conducted Night Survey. But in the city No Homeless found. | |
| | If yes mention the date & number of persons identified & rescued: | | In winter season M.C Night Patroling team Patroling through at night for finding homeless | |

Beyn

| (C) Physical Verification of Utilization of SUH | | | |
|---|------------------------------|-------------------------------|--|
| 1 | Condition of Shelter: | Report | Remarks |
| 2 | Number of inmates at present | Condition of Night Shelter is | Suggestion/Feedback given by Staff for improvement |
| | | Nil | So good |

Feedback/Suggestion:-

1. Need to Purchase the bed & Bedding
2. Proper cleaning of Night Shelter is needed.
- 3.
- 4.

Bharat Vikas Parishad
 Hoshiarpur
 Signatures with 
 Representative Institution Organization