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# ਨਗਰ ਕੌਂਸਲ ਸ਼੍ਰੀ ਮਕਤਸਰ ਸਾਹਿਬ

## MUNICIPAL COUNCIL, SRI MUKTSAR SAHIB

ਸੇਵਾ ਵਿਖੇ,

ਸੰਯੁਕਤ ਡਾਇਰੈਕਟਰ,
ਪੰਜਾਬ ਸਟੇਟ ਲਾਈਵਲੀ ਹੁੱਡ ਮਿਸ਼ਨ,
ਸਥਾਨਕ ਸਰਕਾਰ ਵਿਭਾਗ ਪੰਜਾਬ,
ਚੰਡੀਗੜ੍ਹ।

ਨੰ 2282 ਮਿਤੀ 01/06/23

ਵਿਸ਼ਾ:- ਡੇ-ਨੂਲਮ ਸਕੀਮ ਦੇ ਸੈਲਟਰ ਫਾਰ ਅਰਬਨ ਹੋਮਲੈਸ ਕੰਪੋਨੈਂਟ ਅਧੀਨ ਰਾਜ ਵਿੱਚ ਬਣੇ ਨੂਲਮ ਅਤੇ ਨਾਨ-ਨੂਲਮ ਸੈਲਟਰਾ ਦਾ ਸੋਸ਼ਲ ਆਡਿਟ ਅਤੇ ਤੀਜੀ ਧਿਰ ਦਾ ਕੁਆਲਿਟੀ ਆਡਿਟ ਕਰਵਾਉਣ ਸਬੰਧੀ।

ਹਵਾਲਾ:- ਆਪ ਜੀ ਦੇ ਦਫਤਰ ਦੇ ਪੱਤਰ ਨੰ. ਪਸੂਲਮ/SUH/57/2022/562 ਮਿਤੀ 17/05/2023 ਦੇ ਸਬੰਧ ਵਿੱਚ।

ਉਪਰੋਕਤ ਵਿਸੇ ਅਤੇ ਹਵਾਲੇ ਅਧੀਨ ਪੱਤਰ ਦੇ ਸਬੰਧ ਵਿੱਚ ਆਪ ਜੀ ਵੱਲੋਂ ਮੰਗੀ ਗਈ ਰਿਪੋਰਟ ਨਾਲ ਨੱਥੀ ਪ੍ਰੋਫਾਰਮੇ ਵਿੱਚ ਭਰ ਕੇ ਆਪ ਜੀ ਦੀ ਸੇਵਾ ਵਿੱਚ ਭੇਜੀ ਜਾਦੀ ਹੈ ਜੀ।

ਕਾਰਜ ਸਾਧਕ ਅਫਸਰ,
ਨਗਰ ਕੌਂਸਲ, ਸ੍ਰੀ ਮੁਕਤਸਰ ਸਾਹਿਬ।

ANNEXURE - III

## Performa for Social Audit of Shelters for Urban Homeless

| | | | |
|---|---|---|---|
| Name of ULB: Sri Muktsar Sahib | | Name of SUH: | Shelter For urban homeless |
| Name of Institution/Organization through which Social Audit is being conducted | Sri Muktsar Sahib Edu. Welfare Society. | Address of SUH | Goniana Road Sri Muktsar Sahib |
| Date of Social Audit | 30-05-2023 | Capacity: | 40 |

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 | Yes, rooms are well ventilated | |
| ii | Adequate space for each inmate (@ 50 Sq.ft.) | Yes/No | Yes | |
| iii | Toilets/Bath Rooms | Yes/No | Yes, all are clean | |
| iv | Hot water- Geyser/ Solar device | Yes/No | Yes, available | |
| v | Heater | Yes/No | Yes, available. | |
| vi | Beds | Yes/No | OK, Good condition | |
| vii | Beddings | Yes/No | OK. | |
| viii | Blankets | Yes/No | Blankets are clean. | |
| ix | Lighting/Fans | Yes/No | Good | |
| x | Kitchen with vessels and Gas connectivity | Yes/No | Yes, vessels & Gas connectivity available | |

| | | | | |
|---|---|---|---|---|
| xi | Piped water Supply | Yes/No | Yes, available | |
| xii | RO/Purified water facility | Yes/No | Yes, RO water ferility available | |
| xiii | Washing Provisions | Yes/No | Yes, available | |
| xiv | Food Arrangements | Yes/No | Yes, avalable | |
| | **(B) Security Facilities** | | | |
| i | CCTV camera installed | Yes/No | Yes, installed. | |
| ii | Fire Protection measures | Yes/No | Yes, available. | |
| ii | Cloak room /Personal Lockers | Yes/No | Yes, available | |
| | **(C) Health Facilities** | | | |
| i | First aid kit is with emergency medicines | Yes/No | Yes, First aid kis is maintained. | |
| ii | Periodicity of Medical check ups | Yes/No | Yes, available - | |
| | **(D) IEC Activities (Awareness)** | | | |
| i | Display Board at entrance of shelter | Yes/No | Yes, available. | |
| ii | Munadi/Newspaper | Yes/No | Please Specify the location . | In city Public Places, Bus Stand, Railway Station, MC offa. |
| iii | Flex/Hoardings/Pamphlets | Yes/No | Please Specify the location | |
| iv | Any other, please specify | - | Please Specify the location | - |
| Additional (Services/ entitlements/convergences) information's if any : | | — | | |

(E) 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 | Yes | Yes, well maintained | |
| 2 | Attendance Register | Yes | Yes, maintained | |
| 3 | Complaints and suggestions register | Yes | Yes, maintained | |
| **B)** | **Work Verification of SUH Staff** | **Report** | **Remarks** | **Suggestion/Feedback given by Staff for improvement** |
| | Have all the staff aware about their duty? | Yes | Yes, all the staff aware about their duties. | |
| | Have all the staff received the capacity building training for 0 & M of SUH? | ~~No~~ | No training conducted | |
| | Is the night survey conducted in this month for identification of homeless? Yes/No | Yes | December January | |
| | If yes mention the date & number of persons identified & rescued: | — | — | |

| (C) | Physical Verification of Utilization of SUH | Report | Remarks | Suggestion/Feedback given by Staff for improvement |
|---|---|---|---|---|
| 1 | Condition of Shelter: | well maintained | Good condition | |
| 2 | Number of inmates at present | 4 | — | |

Feedback/Suggestion: -

1. Shelter's condition is good &
2. well maintained
3. all facilities are available
4. in the shelter.

Signatures with Seal of the Institution/Organization

President
Sankalp Educational Welfare Society
(Regd.) Sri Muktsar Sahib

ANNEXURE - III

## Performa for Social Audit of Shelters for Urban Homeless

| | | | |
|---|---|---|---|
| Name of ULB: | Bariwala | Name of SUH: | Shelter for Urban Homeless |
| Name of Institution/Organization through which Social Audit is being conducted | Sanbaep Edu.welfare Society | Address of SUH | Baba Moda Ji Di Samadh, Bariwala |
| Date of Social Audit | 29/05/2023 | Capacity: | 1 |

| 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 | YES | Yes, room is clean | |
| ii | Adequate space for each inmate (@ 50 Sq.ft.) | ✓ Yes/No | YES | YES | |
| iii | Toilets/Bath Rooms | Yes/No | YES | YES, all are clean | |
| iv | Hot water- Geyser/ Solar device | Yes/No | YES | Yes, available. | |
| v | Heater | Yes/No | YES | Yes, available | |
| vi | Beds | Yes/No | YES | Yes, OK. | |
| vii | Beddings | Yes/No | YES | OK | |
| viii | Blankets | Yes/No | YES | Yes, Blankets are clean | |
| ix | Lighting/Fans | Yes/No | YES | Good | |
| x | Kitchen with vessels and Gas connectivity | Yes/No | YES | YES, it clean and all facilities available | |

| | | | | |
|---|---|---|---|---|
| xi | Piped water Supply | Yes/No YES | YES, available. | |
| xii | RO/Purified water facility | Yes/No YES | Yes, RO water available. | |
| xiii | Washing Provisions | Yes/No YES | Yes, available. | |
| xiv | Food Arrangements | Yes/No YES | Yes, available | |
| | **(B) Security Facilities** | | | |
| i | CCTV camera installed | Yes/No NO | NO CCTV cameras Installed. | CCTV cameras should be installed for safety. |
| ii | Fire Protection measures | Yes/No Yes | available. | |
| ii | Cloak room /Personal Lockers | Yes/No NO | No Lockers available. | There should be Lockers onaluminah for the storage of belongings of the army people. |
| | **(C) Health Facilities** | | | |
| i | First aid kit is with emergency medicines | Yes/No YES | Yes, first aid kit available with proper medicine. | |
| ii | Periodicity of Medical check ups | Yes/No | Not availability | |
| | **(D) IEC Activities (Awareness)** | | | |
| i | Display Board at entrance of shelter | Yes/No Yes | Yes. available. | |
| ii | Munadi/Newspaper | Yes/No | Please Specify the location | in the town, Public Places. |
| iii | Flex/Hoardings/Pamphlets | Yes/No YES | Please Specify the location | Near Bus stand, Railway Station, MC office. |
| iv | Any other, please specify | — | Please Specify the location | — |
| Additional (Services/ entitlements/convergences) information's if any : | | | | |

(E) 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 | YES | Yes, maintained | |
| 2 | Attendance Register | YES | Yes, maintained | |
| 3 | Complaints and suggestions register | Yes | Yes, maintained | |
| B) | **Work Verification of SUH Staff** | **Report** | **Remarks** | **Suggestion/Feedback given by Staff for improvement** |
| | Have all the staff aware about their duty? | Yes. | Yes, all the staff aware about their duties. | |
| | Have all the staff received the capacity building training for 0 & M of SUH? | NO | No training given to the SUH Staff. | |
| | Is the night survey conducted in this month for identification of homeless? Yes/No | NO | NO | |
| | If yes mention the date & number of persons identified & rescued: | — | — | |

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| (C) | Physical Verification of Utilization of SUH | Report | Remarks | Suggestion/Feedback given by Staff for improvement |
|---|---|---|---|---|
| 1 | Condition of Shelter: | Good | Shelter's condition is good. | |
| 2 | Number of inmates at present | - | | |

Feedback/Suggestion: -

1. Shelter's condition is good. It provides
2. all the facilities. But CCTV cameras
3. should be installed for the
4. Security.

Signatures with Seal of the Institution/Organization

President
Sankalp Educational Welfare Society
(Regd.) Sri Muktsar Sahib

ANNEXURE - III

## Performa for Social Audit of Shelters for Urban Homeless

| | | | |
|---|---|---|---|
| Name of ULB: | Malout | Name of SUH: | Shelter for Urban Homeless. |
| Name of Institution/Organization through which Social Audit is being conducted | Arogya Jeevan Organisation Mukatsar | Address of SUH | Fire Brigade. |
| Date of Social Audit | 29/05/2023 | Capacity: | 4 |

| 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 YES | Yes, room is well ventilated | |
| ii | Adequate space for each inmate (@ 50 Sq.ft.) | Yes/No Yes | Yes | |
| iii | Toilets/Bath Rooms | Yes/No YES | Yes all are clean | |
| iv | Hot water- Geyser/ Solar device | Yes/No YES | Yes, available | |
| v | Heater | Yes/No YES | Yes, available | |
| vi | Beds | Yes/No YES | Good Condition | |
| vii | Beddings | Yes/No YES | . clean Bedding | |
| viii | Blankets | Yes/No YES | Yes, clean | |
| ix | Lighting/Fans | Yes/No YES | Good | |
| x | Kitchen with vessels and Gas connectivity | Yes/No NO | No kitchen available | — |

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| | | | | |
|---|---|---|---|---|
| xi | Piped water Supply | Yes/No YES | YES available | |
| xii | RO/Purified water facility | Yes/No YES | Yes, available | |
| xiii | Washing Provisions | Yes/No NO | Not availability | |
| xiv | Food Arrangements | Yes/No NO | Not availability | |
| | **(B) Security Facilities** | | | |
| i | CCTV camera installed | Yes/No NO | NO CCTV Cameras installed | CCTV Cameras Should be installed for Security. |
| ii | Fire Protection measures | Yes/No YES | Yes, availabl | |
| ii | Cloak room /Personal Lockers | Yes/No NO | No Lockers & Cupboards available. | |
| | **(C) Health Facilities** | | | |
| i | First aid kit is with emergency medicines | Yes/No YES | Yes, well maintened last | |
| ii | Periodicity of Medical check ups | Yes/No NO | Not availability | |
| | **(D) IEC Activities (Awareness)** | | | |
| i | Display Board at entrance of shelter | Yes/No YES | Yes available. | — |
| ii | Munadi/Newspaper | Yes/No YES | Please Specify the location | Public Places. |
| iii | Flex/Hoardings/Pamphlets | Yes/No YES | Please Specify the location | Near Railway Station, Bus Stand, MC office. |
| iv | Any other, please specify | — | Please Specify the location | — |
| Additional (Services/ entitlements/convergences) information's if any : | | | | |

**(E) 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 | Yes | Maintained | - |
| 2 | Attendance Register | Yes | Maintained | - |
| 3 | Complaints and suggestions register | Yes | Maintained | - |
| **B)** | **Work Verification of SUH Staff** | **Report** | **Remarks** | **Suggestion/Feedback given by Staff for improvement** |
| | Have all the staff aware about their duty? | YES | all the staff are aware about SUH duties. | |
| | Have all the staff received the capacity building training for 0 & M of SUH? | NO | NO training conducted | |
| | Is the night survey conducted in this month for identification of homeless? Yes/No | NO | - | |
| | If yes mention the date & number of persons identified & rescued: | - | - | |

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| (C) | Physical Verification of Utilization of SUH | Report | Remarks | Suggestion/Feedback given by Staff for improvement |
|---|---|---|---|---|
| 1 | Condition of Shelter: | Good Condition | — | |
| 2 | Number of inmates at present | 0 | — | |

Feedback/Suggestion: -

1. Shelter's condition is good.
2. But CCTV camera's, Lockers
3. are not available for
4. Proper safety.

President
Arogya Jeevan (A Health Care
Organization) Regd.
Sri Muktsar Sahib-152026

Signatures with Seal of the Institution/Organization

ANNEXURE - III

## Performa for Social Audit of Shelters for Urban Homeless

| | | | |
|---|---|---|---|
| Name of ULB: Gidderbahera | | Name of SUH: | Shelter For urban Homeless |
| Name of Institution/Organization through which Social Audit is being conducted | Rahat foundation | Address of SUH | Fire Brigade |
| Date of Social Audit | 29/05/2023 | Capacity: | 10. |

| 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 Yes | yes, Ramfaclity very good | | |
| ii | Adequate space for each inmate (@ 50 Sq.ft.) | Yes/No | yes | | |
| iii | Toilets/Bath Rooms | Yes/No | yes all clean | | |
| iv | Hot water- Geyser/ Solar device | Yes/No | yes, available | | |
| v | Heater | Yes/No | yes, available | | |
| vi | Beds | Yes/No | Good | | |
| vii | Beddings | Yes/No | clean bedings | | |
| viii | Blankets | Yes/No | Clean Blankets | | |
| ix | Lighting/Fans | Yes/No | Good Lighting | | |
| x | Kitchen with vessels and Gas connectivity | Yes/No | Kitchen available | - | |

| | | | | |
|---|---|---|---|---|
| xi | Piped water Supply | Yes/No yes | available | |
| xii | RO/Purified water facility | Yes/No yes | available | |
| xiii | Washing Provisions | Yes/No No | Not available | |
| xiv | Food Arrangements | Yes/No NO | Not available | |
| | **(B) Security Facilities** | | | |
| i | CCTV camera installed | Yes/No NO | CCTV camera not available | |
| ii | Fire Protection measures | Yes/No yes | yes, available | |
| ii | Cloak room /Personal Lockers | Yes/No NO | NO cloack room available | |
| | **(C) Health Facilities** | | | |
| i | First aid kit is with emergency medicines | Yes/No | yes, Firstaid kit available | |
| ii | Periodicity of Medical check ups | Yes/No NO | Not available | |
| | **(D) IEC Activities (Awareness)** | | | |
| i | Display Board at entrance of shelter | Yes/No | yes available | |
| ii | Munadi/Newspaper | Yes/No yes | Please Specify the location | public place, Inside city. |
| iii | Flex/Hoardings/Pamphlets | Yes/No yes | Please Specify the location | |
| iv | Any other, please specify | - | Please Specify the location | |
| Additional (Services/ entitlements/convergences) information's if any :- | | | | |

(E) 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 | yes | Maintained | |
| 2 | Attendance Register | yes | Maintained | |
| 3 | Complaints and suggestions register | yes | Maintained | |
| B) | **Work Verification of SUH Staff** | Report | Remarks | Suggestion/Feedback given by Staff for improvement |
| | Have all the staff aware about their duty? | yes | all the staff are aware about SUH duties | |
| | Have all the staff received the capacity building training for O & M of SUH? | NO | No training conduction | |
| | Is the night survey conducted in this month for identification of homeless? Yes/No | NO | — | |
| | If yes mention the date & number of persons identified & rescued: | — | — | |

| (C) | Physical Verification of Utilization of SUH | Report | Remarks | Suggestion/Feedback given by Staff for improvement |
|---|---|---|---|---|
| 1 | Condition of Shelter: | Good | — | |
| 2 | Number of inmates at present | 0 | — | |

Feedback/Suggestion: -

1. Shelters condition is good
2. Lockers / cupBoards are not available.
3. C.C. TV camars not installed.
4. These facilities are mandatory for Safety

Signatures with Seal of the Institution Organization

President
Rahat Foundation
Regd. No.4971
Gidderbaha-152101