erforma for Social Audit of Shelters for Urban Ho

ANNERURE - III

Name of ULB:	M.c Ph	Mic Phanwaya Name of Citi.	
Name of Institution/Organization			Hadiyalad Jahafware.
through which Social Audit is being conducted	s being	Address of SUH	Hadiyabad phagwari.
Date of Social Audit	1/3/2024	મ્પ Capacity:	6
Phy	sically Verification	Physically Verification of facilities/amenities is being given in the SUIH	n in the SITH
(A) Facilities	Facility Available in SUH	Remarks	Suggestion/Feedback given by Staff for improvement
i Well ventilated rooms/dormitories	Yes/No	prop and working condition.	
ii Adequate space for each inmate (@ 50 Sq.ft.)	Yes/No	space for 2 pursur.	
iii Toilets/Bath Rooms	Yes/No	facility available	
iv Hot water- Geyser/ Solar Yes/No device		0	
v Heater	Yes/No	houseled as and when require	June
vi Beds	Yes/No		
vii Beddings	YES/No		
viii Blankets Y	Yes/No		
ix Lighting/Fans Y	Yes/No		
Kitchen with vessels and Y	Yes/No		

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Additional entitlementinformation	A.	E	3	9 5	9	0.7	-	6		=:	-		λį.	X:	XI:	۲.
Additional (Services/ entitlements/convergences) information's if any:	Any other, please specify	Flex/Hoardings/Pamphlets \	Munadi/Newspaper	ntrance	(D) IEC Activities (Awareness)	icity of Medical		(C) Health Facilities	Cloak room /Personal Lockers	-	CCTV camera installed	(B) Security Facilities	Food Arrangements	Washing Provisions	RO/Purified water facility	Piped water Supply
, va		Yes/No	Yes/No	Yes/No		Yes/No	Yes/No		Yes/Nib	Yes/No	Yes/No		Yes/No	Yes/Nb	Yes/No	Yes/No
	Please Specify the location	Please Specify the location	Please Specify the location						Ordy almino available.	analish of sond bused	Rehaving of sim required	nay jub-d	Astushan demonded			
	Station Havelity blad Chawle 867.	outside Bus stand, Railway							2							

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

Register of inmates Attendance Register Complaints and suggestions register Work Verification of SUH Staff Have all the staff aware about their duty? Have all the staff received the capacity building training for 0 & M of SUH? Is the night survey conducted in this month for identification of homeless? Yes/No If yes mention the date & number of persons identified & rescued:	Register of inmates Register of inmates Attendance Register Complaints suggestions register Work Verification of SUH Staff Have all the staff aware about their duty? Have all the staff received the capacity building training for 0 & M of SUH? Is the night survey conducted in this month for identification of borneless? Yes/No If yes mention the date & number of persons identified & rescued:	Register of immates Register of immates Register of immates Attendance Register Complaints Suggestions register Work Verification of Report SUH Staff Have all the staff aware about their duty? Have all the staff received the capacity building training for 0 & M of SUH? Is the night survey conducted in this month for identification of SUH? Is the night survey conducted in this month for identification of bornouses? Yes/No Level Department of persons identified & rescued: Remarks Remarks Remarks Remarks
Report Provided -ids- d - do- Report Repo	Report Remarks -ids- -ids- d - do- Remarks Remarks Remarks Remarks Remarks Remarks Remarks	Report Remarks -idsids- d - els- Remarks Remarks Remarks Remarks Remarks Remarks Remarks
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그 사람들은 사람들이 다른 사람들이 살아내려면 하는 것이 되었다. 그는 그들은 그는 그들은 그는 그를 보고 있다면 하는데 그를 받는데 그렇게 되었다.	Remarks	Remarks
	Suggestion/Feedback gimprovement Suggestion/Feedback improvement	Suggestion/Feedback given by Staff for improvement Suggestion/Feedback given by Staff improvement

Feedback/Suggestion: -Number of inmates at present Condition of Shelter: of Utilization of SUH Physical Verification Currently mo Innati Resite らず Report Remarks Suggestion/Feedback given by Staff for

Signatures with Seal of the Institution/Organization

Secretary 9417304666

improvement