

Performa for Social Audit of Shelters for Urban Homeless

ANNEXURE - III

Name of ULB:	Badhni Kalan	Name of SUH:	Badhni Night Shelter
Name of Institution/Organization through which Social Audit is being conducted	Arens Club Badhni Kalan	Address of SUH	Ngan Pandayal Badhni Kalan, Jopon Rd, off Gaur Shalan
Date of Social Audit	04/01/2024	Capacity:	02 Nos

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 rooms/dormitories	Yes/No		-
ii Adequate space for each inmate (at 50 Sq. ft.)	Yes/No		-
iii Toilets/Bath Rooms	Yes/No		-
iv Hot water- Geyser/ Solar device	Yes/No	Red & Gas stove are provided	-
v Heater	Yes/No		-
vi Beds	Yes/No		-
vii Beddings	Yes/No		-
viii Blankets	Yes/No		-
ix Lighting/fans	Yes/No		-
x Kitchen with vessels and Gas connectivity	Yes/No		-

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xi	Piped water Supply	Yes/No		
xii	RO/Purified water facility	Yes/No		-
xiii	Washing Provisions	Yes/No ✓		-
xiv	Food Arrangements	Yes/No ✓		-
(B) Security Facilities				
i	CCTV camera installed	Yes/No ✓		-
ii	Fire Protection measures	Yes/No ✓		-
ii	Cloak room /Personal Lockers	Yes/No ✓		-
(C) Health Facilities				
i	First aid kit is with emergency medicines	Yes/No ✓		
ii	Periodicity of Medical check ups	Yes/No ✓	According to the needs, weekly the Sanitary Bathing taken.	
(D) IEC Activities (Awareness)				
i	Display Board at entrance of shelter	Yes/No ✓		
ii	Muhadi/Newspaper	Yes/No ✓	Please Specify the location	At the local Area.
iii	Flex/Hoardings/Pamphlets	Yes/No ✓	Please Specify the location	- do -
iv	Any other, please specify	-	Please Specify the location	-
Additional (Services/ entitlements/convergences) information's if any :		u/a		

By

Mandir Bhawan
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(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 present.	—
2	Attendance Register		Yes.	—
3	Complaints and suggestions register		Common of AP	—
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	By the welfare officer & staff	—
	If yes mention the date & number of persons identified & rescued:	—	No	

Befr

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

Feedback/Suggestion: -

- 1.
- 2.
- 3.
- 4.

Signatures with Seal of the Institution/Organization


Mani Bala
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EADHNIKALAN (MOGA)