

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	Lions Club Badhni Kalan	Address of SUH	Ngan Pandhayan Badhni Kalan, Depon Rd, OPP Chaukalan
Date of Social Audit	04/01/2024	Capacity:	02 Beds

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	-
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 present
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	-

Signature

Manoj Bhasara
 LIONS CLUB
 BADHNI KALAN (MO)

xii	Piped water Supply	Yes/No		
xiii	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 till 5pm. Badhni Kalan.	
(D) IEC Activities (Awareness)				
i	Display Board at entrance of shelter	Yes/No		
ii	Munadi/Newspaper	Yes/No	Please Specify the location	At the local Area.
iii	Flex/Handings/Pamphlets	Yes/No	Please Specify the location	At the local Area.
iv	Any other, please specify		Please Specify the location	
Additional entitlements/convergences (Services/information's if any :				
w/a				

Mount Blazer
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BADHNI KALAN (MOG)

(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 NP	-
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 Member of SUH & Staff	-
	If yes mention the date & number of persons identified & rescued:	-	No	-

Ref

(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

Mouj Bhaee
LIONS CLUB
RADHNIKALAN (MOGA)