

ਦਫਤਰ ਨਗਰ ਕੌਂਸਲ ਜੈਤੋ (ਫਰੀਦਕੋਟ)

ਸੇਵਾ ਵਿਖੇ

ਸੰਯੁਕਤ ਡਾਇਰੈਕਟਰ
ਪੰਜਾਬ ਸਟੇਟ ਲੀਵਲੀਹੁੱਡ ਮਿਸ਼ਨ,
ਸਥਾਨਕ ਸਰਕਾਰ ਵਿਭਾਗ ਪੰਜਾਬ,
ਚੰਡੀਗੜ੍ਹ।

ਨੰ 666

ਮਿਤੀ 21/2/24

ਵਿਸ਼ਾ:-

ਡੇ-ਨੂਲਮ ਸਕੀਮ ਦੇ ਸ਼ੈਲਟਰ ਫਾਰ ਅਰਥਨ ਹੋਮਲੈਸ ਕੰਪੋਨੈਂਟ ਅਧੀਨ ਰਾਜ ਵਿੱਚ ਬੱਟੇ ਨੂਲਮ ਅਤੇ ਨਾ-ਨੂਲਮ ਸ਼ੈਲਟਰਾਂ ਦਾ ਸੋਸਲ ਆਡਿਟ ਅਤੇ ਤੀਜੀ ਧਿਰ ਦਾ ਕੁਆਲਿਟੀ ਆਡਿਟ ਕਰਵਾਉਣ ਸਬੰਧੀ

ਹਵਾਲਾ

ਆਪ ਜੀ ਦੇ ਦਫਤਰ ਦਾ ਪੱਤਰ ਪਸ਼ੂਲਮ/ਐਸ.ਯੂ.ਐਚ/57/2022/562 ਮਿਤੀ 17/5/2023

ਉਪਰੋਕਤ ਵਿਸ਼ੇ ਸਬੰਧੀ ਬੇਨਤੀ ਕੀਤੀ ਜਾਂਦੀ ਹੈ ਕਿ ਹਵਾਲੇ ਅਧੀਨ ਪਤਰ ਰਾਹੀਂ ਮੰਗੀ ਗਈ ਸੂਚਨਾ ਨਾਲ ਨਥੀ ਨਿਰਾਧਾਰਿਤ ਪ੍ਰੋਫਾਰਮੇ ਵਿੱਚ ਤਿਆਰ ਕਰਕੇ ਆਪ ਜੀ ਦੇ ਦਫਤਰ ਨੂੰ ਸੂਚਨਾ ਅਤੇ ਅਗਲੇਰੀ ਯੋਗ ਕਾਰਵਾਈ ਹਿੱਤ ਪੇਜੀ ਜਾਂਦੀ ਹੈ

ਕਾਰਜ ਸਾਧਕ ਅਫਸਰ
ਨਗਰ ਕੌਂਸਲ ਜੈਤੋ।

Performa for Social Audit of Shelters for Urban Homeless

ANNEXURE - III

Name of ULB: <u>Mc Jaithu</u>		Name of SUH:	<u>Municipal Council Jaithu</u>
Name of Institution/Organization through which Social Audit is being conducted	<u>NAUGAWAN WELFARE Society Jaithu</u>	Address of SUH	<u>Railway Road Jaithu</u>
Date of Social Audit	<u>21/2/24</u>	Capacity:	<u>04</u>

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	<u>One Room available</u>	
ii	Adequate space for each inmate (@ 50 Sq.ft.)	Yes/No		
iii	Toilets/Bath Rooms	Yes/No ☒	<u>yes</u>	
iv	Hot water- Geyser/ Solar device	Yes/No ☒		
v	Heater	Yes/No ☒		
vi	Beds	Yes/No ☒	<u>yes - available</u>	
vii	Beddings	Yes/No	<u>ok, good conditions</u>	
viii	Blankets	Yes/No	<u>ok, Blankets are clean</u>	
ix	Lighting/Fans	Yes/No	<u>yes</u>	
x	Kitchen with vessels and Gas connectivity	Yes/No ☒	<u>no</u>	

By

xj	Piped water Supply	Yes/No	yes available	
xii	RO/Purified water facility	Yes/No	NO	
xiii	Washing Provisions	Yes/No	yes, available	
xiv	Food Arrangements	Yes/No	NO	
(B) Security Facilities				
i	CCTV camera installed	Yes/No	NO	
ii	Fire Protection measures	Yes/No	NO	
ii	Cloak room /Personal Lockers	Yes/No	yes available.	
(C) Health Facilities				
i	First aid kit is with emergency medicines	Yes/No	yes available	
ii	Periodicity of Medical check ups	Yes/No	NO	
(D) IEC Activities (Awareness)				
i	Display Board at entrance of shelter	Yes/No	yes available	
ii	Munadi/Newspaper	Yes/No	Please Specify the location	Railway Station
iii	Flex/Hoardings/Pamphlets	Yes/No	Please Specify the location	near Railway Station, Jaitu
iv	Any other, please specify		Please Specify the location	near Railway Station, Jaitu
Additional (Services/entitlements/convergences) information's if any :		Bef.		

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

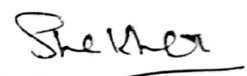
A	Documents	Report	Remarks	Suggestion/Feedback given by Staff for improvement
1	Register of inmates	yes		
2	Attendance Register	yes	Maintained.	
3	Complaints and suggestions register	yes	yes Maintained.	
B)	Work Verification of SUH Staff	Report	Remarks	Suggestion/Feedback given by Staff for improvement
	Have all the staff aware about their duty?	yes	yes all the staff aware about their duty.	
	Have all the staff received the capacity building training for O & 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:	—	—	

Befn

(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	09		

Feedback/Suggestion: -

1. Shelter Good Condition
2. well maintained.
3. all facilities are available
4. in the shelter


 Signatures with Seal of the Institution/Organization

