



## DAR-UL-AMAN MINIMUM STANDARDS

MINIMUM STANDARD	REQUIRED CHARACTERISTICS	MEANS OF VERIFICATION (MoV)
<b>SECURITY – PROTECTION OF RESIDENTS’ SAFETY</b>		
<i>All residents should be sheltered in buildings that provide them adequate protection from inside and outside threats</i>		
<b>A. Premises conditions</b>		
1. Type of building	Government or rented	Physical infrastructure/building of DUA
2. If rented building, state if there is an existing plan for a governmental one.	For rented building: land should be allocated and building under construction to achieve this standards.	Letters for land identification by IC/DOSW/Concerned line department. Visit of the building, letters sent by IC to building department.
3. DUA is located within 10 km of police station, hospital and Court.	DUA should be accessible to emergency response of police and medical services i.e. 1122 and 15 routs.	Distance from nearest police station, hospital and Court should be less than 10 km.
4. Sufficient number of bedrooms is accessible as compared to DUA capacity.	For governmental buildings, all bedrooms are being used. For rented buildings, no. of beds that can fit compared to capacity. <sup>1</sup>	Physical check/Count
5. Sufficient number of bathroom and washrooms are accessible as compared to DUA capacity.	1 bathroom for 4-8 residents <sup>2</sup> . All bathrooms are in use.	Physical check/Count
6. Boundary walls are more than 2 meters high from the outside.	All boundary walls need to be more than 2 meters to achieve this standard. For rented building: if roofs or terraces are joint with neighbor, security fence should be installed.	Physical check: Measure the walls from outside the premises For rented building, all the correspondence with the land lord to install the fence
7. Security wires (or broken glass) are present on boundary walls.		Check of wire/broken glass all over the outside wall
8. Rungs (iron bars) are fixed at outside or inside windows.		Check of all windows
9. The main entrance gate is locked.	Lock and key should be available.	Check if the working locker is available. Check that the keys of the main gate are with the guard/chowkidar/IC/assistants.
10. Residential area is separated from staff area and can be locked.	A door, a locker and a key should be available.	Gate/main door separating the residential area. Keys should be available with guards/chowkidar/IC/assistants.
<b>B. Security management</b>		
11. Police patrols in the area of the DUA every day.	Every day	Contact numbers of District Police Office Letter sent by IC to police station for patrolling or minutes of telephonic calls Police patrolling schedules Register signed by Police guards during patrolling or signature on visitors’ register Ask guards
12. Lady Warden or any other female arrangement by District Government or any DUA female staff is present after working hours inside DUAs and has keys of residential area.	Lady Warden or any other female who is present after working hours is properly orientated regarding security measures for DUA residents.	Notification or office order of lady warden + Job Description. Visitors’ register (in case of female arrangement by district government) Attendance sheet (in case of any DUA female staff) Physical check.
13. DUA opening and closing hours for staff are respected.	SWD official working hours. Entry or attendance or visitors’ registers should have a column mentioning timings.	Attendance and entry register (filled by staff members and, at the end of the day, counter-signature of IC) or visitors’ register (filled by guard at the main gate)
14. DUA visiting hours for visitors are respected.	No visit should be permitted before or after official hours.	Hours as per Court timings. Visitors register + ask residents.
15. Police guard / armed guard or Chowkidar is present at the main gate.	Security guard or chowkidar should stand at the main gate inside the premises.  IC should ensure that security guard or chowkidar participates in proper mock/drill exercises led by IC ( <b>biannually</b> for permanent Security guard or chowkidar and <b>need based</b> for new and temporary Security guard or chowkidar). These exercises can be conducted in collaboration with DPO/security agency/1122.  Rotation scheme for police/ security/ armed guard or chowkidar is in place.	Letter or telephonic call minutes to police for allocating police guard Schedule of guards Direct observation Check that, during the time of visit, there is always a guard or chowkidar standing inside premises at the gate. Check the joining date, schedule and report of recent mock/drill exercises.
16. Control of each visitor and staff, officials/officers, political representatives: Identity check and body check at DUA entrance.	Security guards are provided with metal detectors in working condition.	Ask the procedure for visitors to the guards. Visitors’ register should include NIC card number and address + phone number + relationship with resident + signature. Check that all documents/papers for visits are classified in IC’s

<sup>1</sup> Accommodation area should be average 5 square meters per person, according to international understanding of required accommodation area per person.

<sup>2</sup> In emergency settings, Sphere Standard recommends one bathroom for maximum 20 persons.

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	ID card should be asked, name should be written on the visitors register with ID card number, address, purpose of the visit, relationship with the resident, signature. They should ask IC if the visitor should enter and if the person is visiting a resident, she should give her free consent.  Body check procedure should be in place and bags should be checked – need a procedure for women visiting DUA who have to be body checked.	office and correspond to the visitors' register. + Written procedure/instructions issued by DG office. Interview with guards/Chowkidar
17. Consent given by resident to meet her visitors.	Procedure needs to be followed.	Consent forms signed by residents for each visits. Visitors' register. <b>Comments:</b> cross check the 2 means of verification
18. Men (visitors, staff, officials/officers, political representatives) are systematically escorted by a female inside the residential area.		Interview with residents <b>Comments:</b> "systematically" means each and every time.
19. Close liaison with the nearest police station, especially to update them about possible incidents and/or threats.	Need based meeting Minutes of the meeting should be signed by both IC and police representative	Minutes of meetings OR written requests in form of letters by IC with police officers or minutes of phone calls with police. Or minutes of meeting with Advisory Committee if one member is police officer. Minutes of phone calls
20. Emergency contacts list in place in Urdu and English (police, fire brigade, hospitals...).	In IC room, DUA staff office, clinical/service provider room and entrance of Admin block.	Emergency contact list should be updated and in IC room and staff room and residential area. <b>Comments:</b> check the date of last update of the emergency list
21. First aid box is accessible to staff (day and night).	Accessible by DUA staff at all times	Register of first aid box (in/out) Check location of first aid box: in DUA staff room.
22. DUA staff and IC are trained/refreshed on first aid.	Need refresher every 6 month	Cross check list of participants with staff list, photos, reports, in order to make sure that all staff has actually participated to the training. Refresher once every 6 months.
23. DUA staff or IC provides session on first aid to residents once a month.	Once in a month	Activity form/number of residents attended session or pictures.
24. Fire extinguishers are in place and working (within law).	Maintenance with in every six months	<b>Comments:</b> "within law" means: Number of fire extinguishers depending on size of DUA (IC has to check with Rescue 1122), expiration date/sign of needle, and state of the extinguisher (full, half full, empty). If they are not available (under refill or repair) see the procedure / letter/receipts with the IC
25. DUA staff is trained on using fire extinguisher and immediate response to fire.	Need refresher every six months	1122 training report (date) if available 1122 training list of participants Interview with staff on the use of fire extinguisher. Photographs in hard or soft + visitor's register.
26. Emergency exit approved by Rescue 1122 is present in building	DUA IC and staff should be trained on it.	Physical check of emergency exit. Letter or certificate of emergency exit approval by 1122
27. Emergency exit plan is visible and displayed in floor plan. DUA staff and residents are trained and aware of the emergency exit plan (to be displayed and available in English and Urdu).	DUA IC and staff should be trained on it. Residents should be aware of it.	Physical check of emergency plan in Urdu: in staff room and residential area. Interviews with staff & residents Written procedure <b>Comments:</b> check if everybody knows the procedures of the emergency plan i.e. What to do, where to go, who is responsible of gathering residents etc.
28. A drill (mock exercise) is conducted by staff or IC for residents once a month on how to deal in emergency situation.	According to the 1122 guidelines	Pictures. List of participants to the drill.
29. Police security (preferably lady constable) is provided for transfer of residents (court cases mandatory and referred cases/ direct cases upon request and need).	Systematic: For the court cases followed all the defined procedures. For direct cases followed all the required procedures.	Register/documents forwarded by IC to concerned authorities i.e. Judicial Magistrate/police department and their response.
30. IC checks if all residents are there and cross checks the attendance sheet with admission and discharge forms.	Every day / every morning	Attendance sheet, admission and discharge forms, signatures of IC <b>Comments:</b> Cross checking should be done once a month.
31. The building is in safe condition with specific focus on children.	Preventive measures should be taken to ensure safe electrical installation/ building stairs/ kitchen access.	Physical check of electrical installations, sharp elements, etc.
<b>PROTECTION OF RESIDENTS' WELLBEING</b>		
<b>A. Access and availability of food</b>		
<i>All residents should have access to proper food and nutritional supplements according to their needs and in line with SWD menu and resource</i>		
32. 3 meals per resident per day		Accounting books, Donation register, Check of storage room, Interviews with residents & staff, Stock register of food items.
33. Implementation of SWD balanced diet menu	As per DUA guidelines 2250 Kcal per day	Interviews with residents Menu in Urdu, diet schedule displayed in residential area and admin block. Cross check food stock and food issuance register
<b>B. Access and availability of clean water</b>		
34. Each resident has access to 6 liters of clean water per day.	6 liters per day	Capacity of liters of the water tank as compared to capacity of residents. Interviews of residents <b>Comments:</b> Any usage of water: cooking, washing, drinking, etc.
35. Water filter(s) in place, working, and accessible any time for drinking water.		Direct observation: one filter for each water tap. Direct observation: new filters in the storage room. Accounting books (to see when filters were last bought to check that they are changed regularly).

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36. Water filter(s) are cleaned weekly.	Every week	Physical check Schedule of cleaning
37. Water filter(s) cartridges are changed every three months.	Every three months	Schedule for cleaning cartridge Physical check of the cartridge + accounting books
38. Water tanks are cleaned twice a year.	Twice a year	Physical check of tank Schedule on water tank
39. Water cooler in place and working (electric water cooler or plastic cooler)	5 liters	Check of water cooler <b>Comments:</b> Not applicable in winter
<b>C. Hygienic conditions of residents' facilities and services</b>		
<i>All residents should be accommodated in shelter homes that have proper hygienic conditions in place and should have freely access to</i>		
40. Rooms are properly ventilated.	Minimum one functional fan or ventilator per room	Physical check (one working ventilator in each room or one window or one exhaust fan)
41. Proper bedding is provided to each resident.	One bed, two bed sheets, one pillow, one pillow case and one blanket per resident capacity inside DUA bedroom.	Physical check
42. Bathroom, washroom, kitchen, bedrooms, clinical room are cleaned everyday with cleaning products.	Every day by a sweeper (male/female) otherwise by residents Cleaning products: disinfectants, bleach, etc.	Number of cleaning products Schedule of cleaner, Accounting books, Physical check of the cleanliness
43. Specific trashes can/dustbin in the kitchen and washroom.		Physical check
44. Bed sheets, pillow cases, blankets are changed and cleaned regularly.	Change of bed sheet + pillow cover once a week Cleaning of blankets every six months / putting in sun once in a week in winter	<b>Comments:</b> bed sheets and pillow cases on weekly basis and for each admission. Blankets: every 6 months. Cleaning Products, Cleaning Schedule, Physical Check
45. Availability of free of cost cleaning/hygiene products (hygiene kits) for residents.	Need-based provision of hygiene kits: soap, toothpaste, tooth brush, comb, towel and sanitary napkins, women hygiene products and washing powder.	Physical check of storage room Register of stocked items Register of issuance to residents (signed or thumb impression by residents) Interview with residents
46. All residents who do not have clothing at admission are provided with clothing's by DUA.	Systematic at each admission: 1 shalwar kameez, 1 dupatta, and 1 pair of shoes suitable for the climate and adequate to keep the resident in good health.	Physical check of storage room Register of stocked items Register of issuance to residents (signed or thumb impression by residents) Interview with residents
47. Waste inside and outside DUA is removed on regular basis.	Every day (inside) Every 2 days (outside)	Physical check
<b>MEDICAL, LEGAL AND PSYCHO-SOCIAL SERVICES</b>		
<b>A. Medical</b>		
48. Each Resident (women/children) receives a medical consultation inside DUA or to district hospital within two weeks of admission.	Within two weeks of admission, all residents should undergo a medical check up  Residents with a disability, psychiatric problems and specific epidemics should be referred to appropriate institutions within 3 days of admission/detection.	Medical Register/ Admission and discharge form
49. Specific nutritional supplement for pregnant women as prescribed by doctor.	Pregnant and breastfeeding women should receive supplements of iron and folic acid + calcium supplement (based on indication of doctor and preferably in first trimester)	Register of medicines (calcium, iron & folic acid) Check internal pharmacy (calcium, iron & folic acid) Preferably should be given by doctor. <b>Comments:</b> check how often tablets have been provided to pregnant women
50. Children under 6 months to 5 years are getting milk supplement/nutritional supplement if necessary as prescribed by doctor.	For a baby less than 6 months, exclusive breastfeeding is the healthiest way to feed him. Babies who are exclusively breastfed (mother has enough milk) receive no pre-lactates, water, teas or complementary foods.	Interviews with residents <b>Comments:</b> check that residents have the knowledge that child less than 6 months should receive only breastfeeding milk if possible. If mother cannot breastfeed or not enough: adapted milk supplement should be prescribed by doctor.
	For children of the age above 6 months to 5 years, milk/specific nutritional supplement is provided.	Register of medicines Check internal pharmacy (nutritional supplements) Registers admissions/discharge form for children. Preferably prescribed by doctor for nutritional supplement. If mother cannot breastfeed or not enough: milk supplement to be provided. Accounting books, storage. <b>Comments:</b> check how often they are used and cross check with registers/admissions discharge form for children.
51. Volunteer doctors visit DUA at least once a week.	Once a week	Volunteers' register, visit sheet
52. A comfortable and well equipped private room is allocated for medical consultation.	Systematic (this room could be shared with the other disciplines if no facilities available, confidentiality must be respected)	Physical check Respect of check list of medical room (check list to be cross checked with inventory register/list in case all equipment is not in the medical room).
53. Medicines prescribed by doctor are available for residents in DUAs pharmacies.	Systematic	Medicines/ stock management register Updated stock list of pharmacy Prescription, bills
54. Pregnant women receive antenatal and postnatal consultation (PNC) by a doctor or as prescribed by doctor.	Systematic For ANC of normal pregnancy 3 visits to Dr. every 3 months, PNC 1 visit is necessary within two weeks after delivery.	Register of referred patients Medical reports <b>Comments:</b> cross check register for residents and the Number of women referred for those who are pregnant.
55. Pregnant women are systematically referred to hospital/clinic for delivery.	Systematic Referral is carried out (especially in	Register of referred patients Reports from hospitals

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	the absence of IC) by a trained focal person at appropriate time(when labor pain starts)& delivery is conducted in a hospital	<b>Comments:</b> "systematic" means each resident who is going to give birth has to go to hospital/clinic.
56. Residents (women and children) are systematically referred to hospital in case of emergency AS per emergency protocol.	Systematic	Emergency protocol Register of referred patients Reports from hospitals
57. All children under 5 years old are vaccinated (Diphtheria, Tetanus, Peruses, polio, tuberculosis) as per national IPA program.	Systematic If there is a child under 5 years old, IC has to refer him to doctor.	Vaccination records (individual file) Visitors' register (vaccinator), doctor's referral to vaccinators
58. Epidemics are immediately detected, treated and referred if necessary (diarrheal diseases, measles, peruses, scabies).	Systematic Volunteer Doctor informs immediately the IC & SWD Directorate in writing Volunteer Doctor arranges the treatment of cases either at DUA or at hospital within 2 days from diagnosis	Epidemics Reports from doctors comments
59. Any suspected case of communicable disease (TB, HBV, HCV, STD, HIV/AIDS) is immediately detected, treated and when needed referred.	Systematic Any resident showing symptoms of any CD is treated and referred to hospital within one week of diagnosis Suspected cases are encouraged for early diagnosis (HIV/AIDS)	Reports from doctors, Pharmacy Register, Register of referred patients
60. Children are treated with anti- parasite.	Systematic For children from 2-5 years old, systematically treated every 6 months. All treatment given is preferably prescribed by doctor.	Medicines distribution lists Inventory of medicines available in DUA pharmacy
61. Health awareness sessions are organized for residents and DUA staff.	Once a month (for residents) Every 3 months (for DUA staff)	Volunteers' register, Teachers' register, Health assessment register
<b>B. Psychological</b>		
62. Comfortable and well equipped private room for the counseling session is in place to maintain confidentiality.	Systematic (this room could be shared with the other disciplines if no facilities available, confidentiality must be respected)	Physical check. <ul style="list-style-type: none"> <li>See check list of Basic item.</li> <li>Locker available in service provider.</li> <li>Blank printed Service forms (Psychological profiles) available etc.</li> </ul> Manuals by SWD-Punjab are available in service room.
63. Volunteer psychologists visit DUA twice a month.	At least twice a month	Volunteers' register, Visitors' register, visit sheet. Volunteer Management Strategy <sup>3</sup> Manuals by SWD-Punjab are available in service room.
64. Women receive individual counseling) consultation as per counseling protocol.	Within the 1 <sup>st</sup> two weeks of admission	Volunteers' register, Visitors' register, consultation forms. Check maintenance of filled service form 'A2' without going through the form itself
65. Group counseling sessions are organized for residents as per counseling protocol.	Twice a month	Volunteers' register, Visitors' register, group session form. Reports of psychologists + Check maintenance of psychological profile (service form B) without going through the file itself. DUA monthly report with summary (in numbers) of assessments, nature of assessments.
66. Awareness sessions for DUA staff on psycho-education are conducted every 2 months.	Every 2 months	Volunteers' register, Visitors' register, Reports of psychologists, attendance sheet, Awareness sessions materials/ forms Service form B DUA monthly report
67. Residents who suffer from psychiatric diseases are referred to mental health practitioners.	Systematic	<ul style="list-style-type: none"> <li>Referral Forms release of Information Consent Form 'A4' filled</li> <li>Referral form 'C' for referral filled by psychologist and recommended by DUA In-charge</li> </ul>
<b>C. Legal</b>		
68. Comfortable, well equipped and private room for the counseling session is in place to maintain confidentiality.	Systematic (this room could be shared with the other disciplines if no facilities available, confidentiality must be respected)	Physical check Check list
69. Volunteer lawyers visit DUA twice a month.	At least twice a month	Volunteers' register Visitors' register
70. Group legal awareness sessions are organized once a month for residents as per legal manual.	At least Once in a month <b>Comments:</b> focus group discussion with residents	Volunteers' register, Visitors' register Reports of lawyers, Awareness sessions forms (clearly mentioning the topics of the sessions).
71. Sensitization sessions for DUA staff (legal issues) at least every 3 months.	Every 3 months	Volunteers' register, Visitors' book Reports of lawyers, Awareness sessions materials/forms, GBV session by IC
72. DUA arrange residents' transfers to the court for hearing, case solving and follow-up.	Systematic	Movements register, court order/consent form, Legal aid form, Reports of lawyers <b>Comments:</b> only admin expense charged i.e. photocopies etc.
73. Residents are getting consultation and counseling by a lawyer for their cases within two weeks of admission.	Within first two weeks of admission and/or upon needs	Volunteers' register, Visitors' register reports of lawyers, individual counseling session <b>Comments:</b> Only admin expense charged i.e. photocopies etc.
74. IC has meeting with pool of lawyers at least every two months	Every 2 months Clear agenda is drafted	Minutes of meeting Reports of ICs
75. IC sends the list of 10 lawyers to her respective Bar association for nomination, every 12 months.	Before expiry of pool of lawyers process is followed List comprises active volunteer lawyers who are committed to deliver legal services	Copy of nomination letter and nomination list sent to Bar Association by IC Copy of nomination letter/list on Bar Association's letter head with its stamp received from Bar Association

<sup>3</sup> Once Volunteer Management Strategy is validated by SWD, it will be applicable.

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76. IC sends the list of nominated pool of lawyers to SWD for notification every 12 months.	SWD's approval is in writing IC does follow up of notification by SWD.	Copy of letter of request for notification by IC along with approved nomination list of respective Bar association Copy of approved letter and list of notified lawyers for the year by SWD
<b>D. Social</b>		
77. Well equipped classroom is in place inside DUA.	Systematic (this room could be shared with the other disciplines if no facilities available, confidentiality must be respected)	Physical Check <ul style="list-style-type: none"> <li>Basic pedagogical material i.e. books, note books, white/blackboard, pens</li> <li>Syllabus break up displayed</li> <li>Time table/ schedule of classes displayed</li> <li>For quality improvement 'Class room progress assessment template' filled at least once in two months.</li> </ul>
78. A leisure room with TV, books, and games for residents (women & children) is available and in use at all times.	Systematic (if space is available)	Physical Check Interview with the residents
79. Religious classes are conducted by DUA teachers.	Twice a week	Physical Check, Activity Reports Teaching material & Schedule of classes <ul style="list-style-type: none"> <li>Attendance Register for Non Formal Education &amp; Religious classes</li> <li>Time table/ schedule of classes displayed for cross check with time table</li> <li>Syllabus break up</li> </ul>
80. Occupational activities are organized by DUA teachers or training institutes as Sanatzar or any other for residents.	Twice a week	Physical Check, Activity Reports Outputs of activities, Schedule of classes <ul style="list-style-type: none"> <li>Attendance Register for occupational training activities</li> <li>Time table/ schedule of classes displayed for cross check with time table</li> <li>Syllabus breakup</li> <li>Sewing machines in use</li> <li>Raw Material available</li> </ul>
81. Literacy classes for residents are organized by DUA teacher.	Twice a week	Physical Check, Activity Reports, Teaching plans Exercise books of students <ul style="list-style-type: none"> <li>Attendance Register for Non Formal Education &amp; Religious classes</li> <li>Time table/ schedule of classes displayed for cross check with time table</li> <li>Syllabus break up</li> </ul>
82. Socio-educative activities are organized by DUA teachers, psychologists or mothers for children as per children's manual.	Twice a week	Schedule of classes and activity time for children (incl. after 3pm) Activity Reports Teaching plans Exercise books of students <ul style="list-style-type: none"> <li>Attendance Register for Non Formal Education &amp; Religious classes</li> <li>Availability of children Activity Manual (English&amp; Urdu version)</li> <li>Time table/ schedule of classes displayed for cross check with time table</li> <li>Books &amp; material donated by MDM for children</li> </ul>
83. All residents are provided with information and skills for income generating activities, and availability of jobs outside DUAs.	Skills for capacity building are provided daily by DUAs handicraft teachers and, at least once a week, information about jobs and skills development opportunities.	Contents and schedule of classes, attendance register List of skills development institutions/organizations displayed and update every three months.
84. Events with residents and DUA staff are organized on regular basis.	On the announced public/ international	Schedule of classes & Activity Reports. Event participation list/pictures/MPR. <ul style="list-style-type: none"> <li>Participation registers for DUA residents for event participation'.</li> <li>For verification cross check with monthly report submitted to DUA In-charge for the month</li> <li>Event report</li> </ul> <b>Comments:</b> at least twice a year.
85. Children have access to a safe indoor/outdoor playground at all times.		Schedule of person responsible to supervise Physical check of games in use Interview with children
<b>DOCUMENTATION AND RECORDS KEEPING</b>		
<b>A. Residents records</b>		
86. Residents' personal records are stored and locked.		Physical check
87. Residents have access to personal files including services files.	Upon official request from residents and handover of a copy at the time of discharge (services files) – trainings. Residents should be aware of this right in classrooms.	Interview with residents
88. Inventories of residents personal belongings in place.	All belongings are restituted to residents at discharge.	Physical check of the record One register for inventories + mention in the personal file: Cross checking the two means of verifications.
89. Residents sign (or print with their thumb) admission and discharge form.	Record of admission and discharge forms are available and kept under lock.	Physical check
90. Medical, legal, psychological records are maintained and locked.		Physical check of records/files.
91. Free consent is given by resident before discharge.	Residents should sign the form or print them with their finger. To ensure that, trainings and FU are needed.	Agreement forms
92. All information/awareness material displayed in residential are in Urdu.		Physical check. Comments: schedules, emergency exit plan, menu, SOPs, volunteers list, etc.
93. All data collection tools are in use on regular (daily, weekly and monthly) basis.		Resident statistics, admission and discharge form, visit sheet, health and hygiene forms.

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<b>B. Documentation</b>		
94. DUA guidelines and Minimum Standards are available in IC and service room.	In IC office <u>and</u> DUA staff office	Physical check 2 copies should be available in DUA.
95. Medical, legal, psychological and psychosocial manuals, books, protocols and service forms, are available.	In the clinical room <u>and</u> IC office	Physical check of services forms, manuals, books, protocols etc... and ensure the access to volunteers.
96. Inventories of DUA equipment and furniture are done once a year	In IC office	Inventories/stock register. Stamped inventory list.
97. Donations inventories and record of issuance of donated items are in place	In IC office	Donation register, Stocks register, Register of Distribution of donation to residents
98. Each service providers fills visit sheets.	In IC office	Physical check
99. Financial documents (BM-26 and BM-29, cash book and contingency register) of past 6 months are in place.	In IC office	Physical check of accounting books, Invoices, Payment vouchers
100. Advisory Committee is notified.		Notification letter
101. Advisory Committee meets once a month.	In IC office	Files, agenda and attendance sheet Minutes of meetings signed by participants