

**MODEL FORMAT FOR MONITORING OF CHILDREN HOME UNDER (ICPS)**

Dated of visit.....

Time of visit.....

Name of the Officials inspecting the Home:

1. ...
2. ...
3. ...

**A. General Information:**

- i. Name and address of the Organisation, if NGO run:  
.....  
.....
- ii. Registration No.(Under JJ Act 2000): .....  
Date of issue : .....  
Date of expiry : .....
- iii. Complete address of the Children Home:  
.....  
.....  
.....
- iv. Name of the Officer-in-Charge:  
.....
- v. Contact No: ..... Email id:  
.....  
.....

**B. Status of Children:**

- (i) Sanction capacity of the Home: .....
- (ii) Are the children of both sexes below 10 years kept in the same home  
Yes ☐ No ☐  
If yes, number of such children as on today.....

(iii) Are the bathing and sleeping facilities maintained separately for boys and girls in the age group of 5-10 years.

Yes ☐ No ☐

(iv) Are children segregated in the age given below? Give number of children in the age group of

i. 7-11 years:

ii. 12-18 years:

iii. Are there children in the age group of 0-5 years staying there?

Yes ☐ No ☐ if yes, Give numbers:

iv. Are there children above 18 years staying there?

yes ☐ No ☐ if yes, Give numbers:

v. No. of new admission in the current month: .....

vi. No. of children who have moved out/released: .....

vii. No. of children referred by CWC during the month: .....

viii. No. of children produced before CWC during the month: .....

ix. No. of as on last day of the previous month: .....

x. No. of children with special needs: .....

xi. If yes, give details pertaining to number of children and category in table given below:

Mentally Challenged		Speech & Hearing Handicap	
Physically Challenged		Other Categories	
Visually Challenged			
Slow Learner			

xii. Interventions made for their rehabilitation: .....

.....  
 .....  
 .....  
 .....

Are the Individual care plans prepared for every child? Yes ☐ No ☐

**C. Infrastructure:**

- Building:
- Rented: ..... Owned: .....

If rented, give details of rent paid per month and copy of rent agreement: .....

.....

- Are CCTV cameras installed at the entrance Yes ☐ No ☐
- Sufficient space to accommodate the children: Yes ☐ No ☐

Space available :

No. of rooms/ dormitories	Details	
Provision of sick room / medical Unit		
Counseling room		
Recreational / activity room for Children:		
• Is there a TV set available with Cable network	Yes	No
• How often are children allowed to view TV	In the evening or any time	
• Are children playing games indoors	Yes	No
• What games are available to them	Age appropriate or not	
• Are children playing games outdoors	Yes	No
• Do they have equipments/ accessories to play	Yes	No
• Do children go for picnics/ excursions	Yes	No
• Do they have interactions with eminent personalities	Yes	No
• Is there a recreation room available to children	Yes	No
Kitchen / Dining Room	Yes	No
• Is the cooking area and pantry separate	Yes	No
• Do children get individual thalis, mugs, glasses	Yes	No
• Are cooking utensils adequate and clean	Yes	No
• Is there a fridge available for children	Yes	No
• Is there a oven available for children	Yes	No
• Is there a Gas stove available in kitchen	Yes	No
• Is there a chimney available	Yes	No

<ul style="list-style-type: none"> <li>• What is the arrangement to keep the gas cylinders</li> <li>• Adequate water supply for washing, cooking</li> <li>• Adequate drinking water available(RO)</li> <li>• Is cooking done by machine or by cook</li> </ul>	Safe / away from children or not  Yes      No Manual or mechanical Yes      No Yes      No Yes      No
Numbers of toilets & bathrooms for Children <ul style="list-style-type: none"> <li>• Flush is working</li> <li>• Taps in the wash basin are functioning</li> <li>• Is the floor slippery</li> <li>• Drains are clogged</li> <li>• Fittings for hanging clothes/ towels in place</li> <li>• Cow webs are removed</li> <li>• Door has a latch</li> <li>• Door has peep holes</li> <li>• Frequency of bath a child is allowed</li> <li>• Water is adequately available</li> <li>• Adequate numbers of buckets and mugs</li> <li>• Personal toiletries are provided</li> <li>• Is washing powder or soap given</li> <li>• Do children wash their own clothes</li> <li>• Is there a washer man available</li> <li>• Is the washing machine in functional</li> </ul>	Yes      No Yes      No Yes      No Yes      No  Yes      No Yes      No Yes      No Yes      No Once or more in a day Yes      No Yes      No Yes      No Yes      No Yes      No Yes      No Yes      No Yes      No
Open space for outdoor activities	
Class rooms	
Space for vocational Training	

### Premises

- Does the home have a child friendly indoors?      Yes      No
- How often is the sweeping. Swabbing done?      Twice a day or more
- Are the children involved in cleaning exercise during class hours?      Yes      No
- Are the facilities of coolers/ heaters available for children?      Yes      No
- Are the doors and windows maintained properly?      Yes      No
- Are the rooms and dormitories well ventilated?      Yes      No
- Is there an alternate provision for lights and fans when there is no electricity available?      Yes      No
- Are the outdoors clean, pleasant and child friendly?      Yes      No

**Clothing / Bedding / Lockers / Toiletries provided to the children:**

- |  |                      |    |
|--|----------------------|----|
| • Are the clothes provided as per size and season                            | Yes                  | No |
| • Frequency of changing undergarments  | Yes                  | No |
| • New clothes are stitched or bought   | stitched or bought   |    |
| • Are the mattresses given individually                                      | Yes                  | No |
| • Are pillows given individually   | Yes                  | No |
| • Are the mattress and pillows clean   | Yes                  | No |
| • Do children have separate cupboards  | Yes                  | No |
| • Are bed sheets and Khes available  | Yes                  | No |
| • Are blankets available in winters  | Yes                  | No |
| • Number of sets provided on arrival   | one/two/ three/ four |    |
| • Frequency of providing new clothes   | Monthly Quantity     |    |
| • Are these sets of same color or different colors?                          | Same / Different     |    |
| • Are children provided with individual lockers to keep their personal items | Yes                  | No |

Other articles provided to the children: .....

.....

.....

**D. Services provided to the children:**

- Medical facilities / Maintenance of Health Cards: .....

.....

.....

.....

.....

.....

.....

- Nutrition / Special Diet: .....

.....

.....

.....

- Provision of safe drinking water: .....

.....

- Daily Routine of Children:

Time	Activities / Schedule
Morning	
Day Time	
Afternoon	
Evening	
Late evening/ Night	

- Education (Formal Education / NFE & Life Training Programme) :

.....

.....

.....

.....

.....

.....

- Computer / Internet / Phone

- 1) Is the facility of Computer with internet available? Yes No
- 2) Is the facility functional? Yes No
- 3) Are the children allowed to use the facility? Yes No
- 4) Is the telephone for official purposes only Yes No
- 5) Are the children allowed to use telephone fixed timing/ as and when required
- 6) Is the number of childline (1098) displayed near the phone Yes No

- Counseling/ Guidance services provided : .....

.....

.....

.....

.....

- Vocational training: .....

.....

.....

.....

.....

.....

Recreational facilities: .....

.....

.....

.....

.....

Linking developed with other agencies/ departments : .....

.....

.....

.....

.....

Implementation of track the missing child programme : .....  
 Entries of children in track the missing child website : .....

.....

User ID and Password provided : .....

.....

Other programmes and activities initiated : .....

.....

.....

**E. Staff Details:**

S.N.	Name	Designation	Date of Joining	Attendance at the time of visit	Remark
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					

**F. Children's Committee / Management Committee**

- Formation of Children Committee: 

YES	NO
-----	----
  - Age wise formation of Children's Committee: 

--	--	--
  - Frequency of Children's Committee Meeting: .....
- .....



- Formation of Management Committee:

YES	NO
-----	----

- Date of constitution of Management Committee and frequency of meetings held:

.....

.....

**G. Record Maintenance:**

Staff attendance register	
Children attendance register	
Central admission register	
Individual case file with individual care plan	
Communication with CWC	
Children's suggestion book Children's suggestion box	
Medical file / medical cards	
Personal belongings register	
Management Committee- minutes register	
Children's Committee- minutes register	
Nutrition / Diet File	
Any other record maintained	

**Observations / Remarks:**

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

**Name & Signature of Monitoring Officer**

**Signature of Programme Manager / Superintendent**

**Date:**