

% DE SATISFACCION :84%

											III TRIMESTRE		II TRIMESTRE	
		CM	URG	PYM	ODON	LABO	FARM	HOSP	FACT	VAC	TOTAL	%	TOTAL	%
El tiempo que tuvo que esperar para ser atendido?	muy bueno	0%	0%	0%	4%	0%	0%	0%	0%	0%	1	0%	1	0%
	Bueno	93%	77%	78%	89%	95%	83%	86%	78%	96%	291	86%	259	89%
	Regular	7%	23%	22%	11%	7%	18%	14%	22%	4%	47	14%	32	11%
	malo	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
	muy malo	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
el trato que usted percibio del personal que lo atendio?	muy bueno	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
	Bueno	93%	69%	97%	61%	95%	88%	86%	83%	89%	291	86%	246	83%
	Regular	7%	31%	3%	29%	5%	10%	14%	17%	11%	42	12%	40	16%
	malo	0%	0%	0%	11%	0%	0%	0%	0%	0%	3	1%	3	1%
	muy malo	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
La comprension de la informacion brindada por parte del personal que lo atendio?	muy bueno	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
	Bueno	95%	85%	100%	89%	95%	93%	86%	93%	96%	313	93%	267	91%
	Regular	5%	15%	0%	11%	7%	8%	14%	7%	4%	25	7%	25	9%
	malo	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
	muy malo	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
Las condiciones de privacidad para su atencion?	Excelent	0%	0%	0%	0%	0%	25%	0%	0%	0%	10	3%	3	1%
	Bueno	91%	77%	100%	68%	95%	70%	90%	91%	93%	294	87%	252	86%
	Regular	9%	23%	0%	25%	7%	5%	10%	9%	7%	32	9%	37	13%
	malo	0%	0%	0%	7%	0%	0%	0%	0%	0%	2	1%	2	1%
	muy malo	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
La discrecion y confidencialidad del personal?	muy bueno	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
	Bueno	98%	85%	94%	71%	100%	90%	86%	89%	93%	308	91%	268	92%
	Regular	2%	15%	6%	29%	2%	10%	14%	11%	7%	30	9%	24	8%
	malo	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%

	muy malo	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
La comodidad de las instalaciones?	muy bueno	0%	0%	9%	0%	0%	0%	0%	0%	0%	3	1%	0	0%
	Bueno	84%	59%	78%	86%	95%	88%	86%	85%	85%	279	83%	246	84%
	Regular	16%	41%	13%	14%	7%	13%	14%	15%	15%	55	16%	46	16%
	malo	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
	muy malo	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
la limpieza le parecio adecuada?	muy bueno	51%	31%	53%	64%	19%	55%	43%	41%	85%	162	48%	137	47%
	Bueno	42%	62%	44%	36%	79%	45%	57%	57%	15%	165	49%	145	50%
	Regular	0%	0%	0%	0%	5%	0%	0%	0%	0%	2	1%	2	1%
	malo	7%	8%	3%	0%	0%	0%	0%	2%	0%	9	3%	8	3%
	muy malo	79%	77%	41%	100%	0%	0%	86%	0%	0%	136	40%	130	45%
como calificaria su satisfaccion global, con respecto a los servicios recibidos a traves del hospital ?	muy bueno	21%	23%	0%	0%	0%	0%	14%	0%	0%	27	8%	13	4%
	Bueno	0%	0%	59%	0%	102%	100%	0%	100%	100%	175	52%	147	50%
	Regular	86%	85%	34%	96%	0%	0%	86%	0%	0%	141	42%	131	45%
	malo	14%	15%	0%	4%	0%	30%	14%	0%	0%	32	9%	12	4%
	muy malo	0%	0%	66%	0%	102%	70%	0%	100%	100%	165	49%	147	50%
recomendaria a sus familiares y amigos el hospital?	definitivamente Si	42%	38%	19%	0%	93%	0%	71%	0%	0%	105	31%	86	29%
	probablemente Si	12%	0%	0%	0%	10%	0%	0%	0%	0%	12	4%	5	2%
	definitivamente No	47%	62%	81%	100%	0%	100%	29%	100%	100%	221	66%	199	68%
	Probablement e No	65%	77%	19%	71%	0%	73%	86%	0%	100%	172	51%	138	47%
el profesional que lo atendio hoy, lo examino?	si	16%	13%	0%	11%	0%	28%	14%	0%	0%	31	9%	31	11%
	No	26%	8%	81%	18%	102%	0%	0%	100%	0%	134	40%	123	42%
	N/A	0%	0%	0%	25%	0%	0%	86%	0%	0%	25	7%	16	5%
le hablaron claramente sobre su condicion de salud?	Si	0%	0%	0%	4%	0%	30%	14%	0%	0%	16	5%	2	1%
	NO	100%	100%	100%	71%	102%	70%	0%	100%	100%	297	88%	274	94%
	N/A	0%	0%	0%	21%	0%	33%	71%	57%	0%	60	18%	14	5%
si le ordenaron o le relizaron exámenes le fueron explicados?	Si	0%	0%	0%	0%	0%	30%	0%	0%	0%	12	4%	0	0%
	NO	100%	100%	100%	79%	102%	38%	29%	43%	100%	266	79%	279	96%
	N/A	0%	0%	0%	21%	0%	0%	100%	0%	0%	27	8%	15	5%
le dieron informacion acerca de los medicamentos que le	Si	0%	0%	0%	0%	0%	30%	0%	0%	100%	12	4%	2	1%
	NO	100%	100%	100%	71%	102%	70%	0%	100%	100%	297	88%	274	94%

aplicaron o le recetaron?	N/A	0%	0%	0%	25%	0%	0%	100%	0%	0%	28	8%	15	5%
el personal que lo atendio durante su instancia hospitalaria, se presento al momento de atenderlo?	si	0%	0%	0%	4%	0%	30%	0%	0%	0%	13	4%	2	1%
	No	100%	100%	100%	71%	102%	70%	0%	100%	100%	297	88%	275	94%
	N/A	0%	0%	0%	25%	0%	0%	86%	0%	0%	25	7%	16	5%
le dieron informacion sobre los cuidados que debe tener en casa?	Si	0%	0%	0%	4%	0%	30%	14%	0%	0%	16	5%	2	1%
	NO	100%	100%	100%	71%	102%	60%	0%	83%	100%	285	85%	274	94%
	N/A	0%	0%	0%	21%	0%	0%	100%	0%	0%	27	8%	17	6%
considera que la cantidad de alimentacion suministrada es suficiente?	Si	0%	0%	0%	0%	0%	30%	0%	0%	0%	12	4%	1	0%
	no	100%	100%	100%	71%	102%	70%	0%	100%	100%	297	88%	275	94%
	n/a	0%	0%	0%	18%	0%	0%	86%	0%	0%	23	7%	16	5%
considera que el horario de alimentacion es adecuado?	SI	0%	0%	0%	4%	0%	30%	14%	0%	0%	16	5%	2	1%
	NO	100%	100%	100%	71%	102%	70%	0%	100%	96%	296	88%	274	94%
	N/A	0%	0%	0%	29%	0%	0%	100%	0%	0%	29	9%	18	6%
la alimentacion fue de su agrado?	SI	0%	0%	0%	0%	0%	28%	0%	0%	0%	11	3%	0	0%
	NO	100%	100%	100%	71%	102%	98%	0%	117%	100%	316	94%	274	94%
	N/A	84%	85%	81%	86%	93%	83%	86%	85%	93%	288	85%	257	88%
quedo satisfecho con el trato recibido por parte del personal de alimentacion?	Si	14%	15%	19%	14%	10%	13%	14%	15%	7%	46	14%	35	12%
	NO	70%	69%	56%	57%	71%	65%	76%	61%	63%	224	66%	193	66%
	N/A	30%	31%	44%	43%	31%	30%	24%	39%	37%	112	33%	98	34%
la limpieza de la habitacion le parecio adecuada?	Si	28%	46%	19%	39%	31%	53%	29%	26%	52%	119	35%	83	28%
	NO	72%	54%	81%	61%	74%	58%	71%	74%	48%	224	66%	206	71%
	N/A	30%	31%	31%	25%	36%	35%	43%	41%	30%	115	34%	96	33%
Quedo satisfecho con el trato recibido por parte del personal de servicios generales?	Si	70%	69%	69%	75%	67%	55%	57%	59%	70%	219	65%	196	67%
	NO	19%	23%	16%	39%	21%	28%	14%	20%	11%	72	21%	65	22%
	N/A	37%	23%	34%	43%	31%	18%	43%	35%	30%	108	32%	106	36%
conoce usted cuales son sus derechos y cuales son sus deberes como	Si	5%	8%	0%	0%	7%	25%	0%	28%	7%	33	10%	17	6%
	No	28%	31%	31%	11%	26%	18%	29%	13%	33%	81	24%	73	25%
cree usted que el hospital le cumple con el deber de tener un servicio cortés y	Si	12%	15%	19%	7%	17%	15%	14%	9%	19%	47	14%	31	11%
	No	16%	23%	22%	18%	19%	28%	0%	28%	15%	67	20%	59	20%
SEXO	Masculino	21%	15%	25%	29%	26%	20%	14%	24%	15%	70	21%	61	21%
	Femenino	28%	23%	22%	32%	26%	25%	43%	24%	37%	93	28%	78	27%
AREA	Rural	35%	38%	31%	21%	31%	20%	43%	24%	37%	106	31%	94	32%
	Urbana	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%

EPS	SAVIA SALUD	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
	COOSALUD	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
	SUMIMEDICAL	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
	NUEVA EPS	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
	OTRAS	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
rangos de edad	18 a 25 años	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
	26 a 30 años	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
	31 a 45 años	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%
	>45 años	0%	0%	0%	0%	0%	0%	0%	0%	0%	0	0%	0	0%