



***Evaluation of Health Services and
the Quality of Comprehensive Care
for people with HIV/AIDS, from the
user's perspective***

Regional Report

2012

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EXECUTIVE SUMMARY

The report presented below, takes a perspective view of the methodological issues that evaluate the quality of integrated care in health services for people with HIV-AIDS, from the perspective of the users themselves, in which it was applied and has been contextualized in each of the seven participating countries.

This report describes the national conditions that were used to develop the process and the involvement of national authorities in the area of HIV. It describes briefly the situation of HIV in Central America, and the impact that the assessment has in reorienting health services.

Below are the results from the application of the 17 instrumental variables and finally the report illustrates a summary sheet for each country.

The purpose of this evaluation, in addition to responding to contractual indicator number 2.3 Percentage of favorable settlements in providing comprehensive care for PHIV, set in the context of performance and approved by Global Fund to REDCA+ Regional Program, which establishes as to favoring those health services that provide care for people with HIV, of the countries of the Central American region, with a percentage > 80%, perceived by the users, this is making available to the decision makers a methodological tool in the political and technical scope that can be replicated in each country, and that in the future may be adopted as an annual or bi annual evaluation practice, or as required by the countries through which they can obtain information from primary sources, in order to implement a program of continuous improvement of the quality of care for people with HIV-AIDS, and therefore the quality of life of people with HIV-AIDS and their families, based from the perspective of human rights.

ACRONYMS

ARV: Antiretroviral (regarding to medication)

VCT: Voluntary Counselling and Testing

C-NET+: Collaborative Network for Persons Living with HIV

OI: Opportunistic Infections

NGO: None Government Organization

PAHO / WHO: Pan-American Health Organization / World Health Organization

UNAIDS: United Nations Programme on HIV/AIDS

PHIV: Person Living with HIV

AIDS: Acquired immunodeficiency syndrome

ART: Anti retroviral Treatment

UNGASS: United Nations Special General Assembly

HIV: Human Immune Virus

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I. Introduction

The concept of quality, as applied to health services, has been incorporated into the Central Americans Region in recent years. This does imply that health services historically have not always sought excellence. However, the adaptation of methods is not only to possess technical or intrinsic quality, but to produce quality acts and for it to be perceived by the users.

One of the challenges that the health sector in Latin America and the Caribbean face currently is the reduction in health inequity in terms of; access to health services and health coverage. This is because the process of globalization of the economy, the reform of the state, and therefore reform the health sector, has failed to respond to the demands of the population in achieving better health and better quality of life.

The Assessment of Comprehensive Services, Quality of Care in Public Health that provide care for people with HIV, providing antiretroviral therapy, including variables that must be verified in order to obtain timely, quality information that allows successful decisions and based on the primary source of information, which focuses on: the perception of the service by the users themselves. Having the user information satisfaction represents a tracer element for making timely decisions, from which design strategies reorientation of health services, to provide comprehensive care to people with HIV.

In this context, it is necessary to establish a mechanism to assess the quality of care provided by the Comprehensive Health Care Services, which is driven by an external multidisciplinary team, then accountable for the comprehensive health care services in each of health centers, through a methodological guide, enabling them to explore and identify the conditions of quality and efficiency with which these services are provided as a result of self-evaluation.

From the evaluation process, it is intended that the findings establish the situational panorama, identify problems that affect the quality and efficiency in the delivery of health services, and the satisfaction of users, as well as to know through an interview the members of the multidisciplinary teams, what are the tools available to them and the constraints to which they face to provide quality health care to people with HIV-AIDS.

In the framework of the provision of services in the health systems of Central American countries, it is important to note that one of the key elements that healthcare institutions should have is human resources trained and sensitized on the issue of HIV, and economical resources.

It is Important to highlight that Comprehensive Care Services for people with HIV in the network of health care has been decentralized, which exceeds the budgets available and soon to be insufficient funding, since the frequency is limited and verification timely compliance with the agreements made by the country in the national response to the HIV epidemic (UNGASS 2010 Proposal).

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We must recognize for whom are the services?, Who defines the demand?, Who identifies the offer?, Who should be satisfied?, As the population is one of the actors in the health services, not only as an (external) user to health services, but as an actor, it finances the services, either directly (direct payment and / or through insurance) or if indirectly, through taxes, which is reflected in pocket spending which currently exceeds 48% of health spending.

The participation of user in security programs and improving the quality of care is increasingly essential, not only because the users are the main customer, but also because responses need to be given and demands need to be met; the users are becoming more informed and demanding as time goes by.

It is in this context that the importance of this intervention in the various departments of comprehensive health care for people with HIV with or those that are without antiretroviral therapy, this information is obtained through the interview to the primary source in this cause the users of the facilities, which provides the means to establish the diagnosis of situational conditions of the service provided locally and have a regional overview from the national scene in the countries of the region, for the purpose of making available to the national and regional health authorities in decision making.

II. Background

In recent years there has been an increasing interest in issues of evaluation, audit and quality. This phenomenon is the result of the questioning of medical practices (the inability to cover all knowledge) and increased professional skills and economic.

All professions tend to safeguard and protect their work as a form of division of labor and control activity. So preventive or anticipatory self-assessment of one's actions, is a smart way to preserve the conduct of professional activities. Before we judge others, we try to analyze our own pairs performance; but the quality is not an issue exclusive to specialists, for what are now more common questions from patients about the care they are given, not only with reference to the welfare aspects or treatment, but also on aspects of technical development of care.

For the cases of Honduras, Nicaragua, El Salvador and Panama, which in 2011 were evaluated, the outcome of the evaluation has been considered as inputs to monitor the process of improving the quality of comprehensive care.

In the case of Belize, Costa Rica and Guatemala these are the countries that conducted the evaluation during the second half of 2012, and this report presents the results of the seven countries of Central America, as well as the experience of the four initial countries, it is expected that the results are considered input for the design of strategies that seek to reorient health services, in order to improve the quality of care for people with HIV-AIDS.

III. HIV status and quality of health care

HIV is a relatively stable epidemic in Latin America. In 2009, there were an estimated 92,000 new infections compared with 99,000 in 2001 and 58,000 AIDS-related deaths compared with 53,000 in 2000. During the same period, due to increased availability of ART, the number of people living with HIV increased from 1.1 million to 1.44 million.

A third of people with HIV in the region live in Brazil, however, the prompt and ongoing treatment and prevention efforts have kept the rate of adult HIV prevalence below 1% in the last decade.

Most of the HIV epidemic in Latin America is concentrated around networks of gay men and other men who have sex with men. Homophobia, stigma and discrimination, contribute to men who have sex with men, formerly MSM, have disproportionately high rates of HIV. The trans population also has high rates of HIV and are discriminated against by government agents, including health care providers because many countries do not allow gender change in official documents. Both MSM organizations as Trans people reported acts of violence perpetrated by government agents as other citizens against their members. The gradual increase in the prevalence rates of HIV-AIDS infection in the world (which on average reaches 1% today) and expansion into generalized epidemics in at least two sub regions of the world (sub-Saharan Africa and the Caribbean), becomes to this epidemic in a serious and perhaps the leading public health problem facing the human race today.

Global progress made both in prevention and treatment of HIV infection underscores the benefits of maintaining continued investment in the fight against HIV / AIDS in the long term. The most recent report of the WHO, UNICEF and UNAIDS Report on the Global HIV / AIDS Response indicates that increased access to anti-HIV infection resulted in a 15% reduction in new infections during the previous decade and a 22% decrease in AIDS-related deaths in the last five years.

The condition of young people (15-24 years) of society, hits head on, on the indicators of development achieved by countries in recent decades, in proportions as devastating as the case of sub-Saharan Africa where life expectancy of any countries has fallen by more than 20 years, with the human, social, political and economic consequences this entail.

Given the universally accepted fact that early intervention provides significant benefits to people with HIV and that, that should improve and expand health care access for people with HIV-AIDS to ensure comprehensive care to users, being that this one right to be a creditor.

The HIV situation in the participating countries: Belize, Guatemala and Costa Rica, is characterized by having a sufficient legal framework from the perspective of human rights, as reflected in various international commitments and national level. In terms of knowledge of the legal framework by people with HIV, remains a challenge as it is a small percentage that is aware and apply this.

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As to what stigma and discrimination is concerned, this still causes myths and stereotypes that have been substantiated by weak education, information campaigns and awareness processes to the general population, despite the effort by the competent authorities to sensitize officials on the subject, these are often rotated from their positions or work instructions, which makes that officials have not come to this part of training.

As for insurance and treatment, this represents a key factor in improving the quality of life of for people with HIV, which not only involves the provision of antiretroviral therapy, but also promote adherence to it.

Comprehensive care will be defined according to the manual the strategy "Building Blocks" of the OP-WHO, to care in a multidisciplinary and integrated character that supports not only people with HIV but also family members and the community.

Thanks to recent advances in access to ART, HIV-positive people can now live longer and in better health. In countries of low or middle income by the end of 2010 antiretroviral therapy will be available to 6.65 million people, although there is still another 7 million who need treatment and do not have access to it.

This type of continuing care strategy aims at ensuring high quality, cost-effective and at the same time be a guide with a logical sequence of events, which should be useful to prioritize actions and set targets for future interventions of increasing complexity.

The strategy "Building Blocks: Comprehensive Care Guidelines for Persons Living with HIV-AIDS in America" (2000), describes the comprehensive care consists of four interrelated elements:

- Clinical Management
- Nursing Care
- Counseling and emotional support
- Social Support.

In this line of work for 2011 as one of the agreements of the resolution of the 64th World Health Assembly, Held in Geneva in May 2011, Emphasis was made in strengthening health systems, therefore and in consequence of improvement of health services towards people with HIV; these are enlisted below:

- Providing services in terms of effectiveness;
- Sufficient levels of staffing and availability of professionals properly trained;
- A robust health information system;
- Access to essential medical products and technologies;
- Allocation of sufficient funds to finance health systems

- Strong leadership and good governance

Comprehensive care should be characterized by its accessibility and equity, therefore, is a dynamic process that makes it possible to organize the resources available according to the standards that are set for each situation or level of care.

Efforts to obtain these standards involve not only the community workers, religious organizations and others involved in the care of people with HIV. The focus should also be flexible to allow adaptation to the social and cultural life.

Central American situation:

Thus for the Central American area in 2010 a quality assessment was performed in Nicaragua in which 77 people with HIV were interviewed, who attended Japan Friendship Hospital located in Granada Nicaragua, Roberto Calderon Gutiérrez in Managua, School Dr . Oscar Danilo Rosales Arguello, in Leon, Gaspar Garcia Laviana in Rivas, Spain in Chinandega and Humberto Alvarado located in Masaya.

Where 93.5% of respondents said that the professional explained how their health status was, but the waiting times were a point of user dissatisfaction. They suggest that multidisciplinary committees must consist of at least one member from each of the areas that come into direct contact with the person with HIV, and also include a person with HIV on the committee.

In Honduras two populations were captured corresponding to the two sides of the coin, that have comprehensive care on the one hand the user of health services and on the other that of the service provider.

One hundred and forty six (146) users and 37 service providers from the 17 establishments. From which it was concluded that the people who are in comprehensive care area should be trained and sensitized, not applying bio-security measures triggers accidents at the work.

Health personnel have been trained, but there is resistance to implementing care protocols, although they are known, the health personnel is not applying bio-security measures and are also interested in knowing more about it. Health care personnel are sensitized, as most give the same treatment to a person with HIV than that who does not carry the virus, they also think it is safe to work with these users.

The vast majority is satisfied with their work, but some think that their work is not recognized by their superiors, which is an important factor for the performance of the work.

The timeliness of care was affected by the waiting time that exceeds 30 minutes, and the client does not always pass with the personnel that was assigned to them at the beginning of their first appointment, this interferes with monitoring and the building of a trusting relationship between

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the service provider and the patient. That's why the resolution capacity is affected because the doubts about the clients' health are not solved by a margin of 6%, which should be improved.

In Panama of respondents that were interviewed a total of 285 shows that 183 are men and 102 women, showing that in the time periods of diagnosis of 1-10 years, where the frequency is higher for men reflecting 42 % and women with a 25.96% of the entire population, it is also observed that the diagnosis time is extended to 20 years, giving a projection of the possible improvement in the life expectancy of people with HIV in Panama.

The health personnel that are the first to come in contact, is the doctor and the nurse, which is why they should be resources that are required to be aware, and that they should give confidence and demonstrate knowledge of the subject, as well as laboratory personnel and particularly the personnel working in pharmacy; it is essential to actively integrate the team and the subject.

In El Salvador 100 users were interviewed and 135 service providers, waiting times are related to the lack of human resources to provide the service.

Users need quality personal attention and opportunity. However users are satisfied with the care they receive at the moment.

Several hospitals have exclusive clinics for comprehensive care for persons with HIV, which is considered favorable, but in some hospitals, users complain about the service and consider it discriminatory and stigmatizing.



IV. Evaluation objectives

General

- Contribute to continuous improvement in the quality of comprehensive care to people with HIV in Central America, based on evidence, by applying standardized assessment criteria in health services for people with HIV in the region.

Specific

- Verify compliance of protocols in comprehensive care for people with HIV, that are in place in each of the countries in Central America.
- Propose the flow chart of care for people with HIV in health services, in order to reorient health services, from the perspective of users.
- Provide easy application tools for assessing the quality of care of health services that strengthen civil society participation.

V. Ethical Considerations

This evaluation has been conducted in accordance with the principles born of the 18th World Medical Assembly (Helsinki, 1964) and all applicable amendments.

As required by local regulations, where each institution coordinating the process conducted necessary consultations with the appropriate National Research Ethics. It also ensured the confidentiality of data and protection according to local regulations, including regulations for data protection. The questionnaire is completely anonymous. There is no obligation to complete the questionnaire.

These materials or information cannot be disseminated by the researchers or by any person in the group that is an unauthorized person without the prior written formal sponsor.

Care was taken that each coordinator in the study consider as confidential all information received, acquired or inferred during the study and to ensure that there is no breach of confidentiality, other than the information to be disclosed by law.

VI. Methodology

a. Operating equipment.

In each of the countries a committee was formed that was represented by an NGO operating in broad reference and experience in the area of HIV-AIDS, this is how in the case of the First Phase of countries: Honduras: Laves Foundation, El Salvador: Atlacatl Association live Positive, Panama: Panama: Genesis Group Panama, Nicaragua: self-help group in the West, and in the second phase: Belize: C-NET + (Collaborative Network of people living with HIV, for its acronym in English), Guatemala: Association Semillas, Costa Rica: Esperanza Viva with a team of surveyors, coordination and supervision, made the lifting of the data based on the Guide to the Assessment of Quality of Care in Comprehensive Health Services for people with HIV-AIDS which was revised and updated in the first half of 2012, the document was suggested and supported by members of governments and civil society in each of the beneficiary countries listed above. It is worthy to note that the evaluation of the quality of care, through the analysis of the clinical record review was not provided for this occasion.

b. Population and Sample Size

i. Sample Size

For the calculation of the sample population, the total number of people with HIV-AIDS over 18 years registered in each of the national health systems of the recipient countries in 2011 was taken as study object.

Where:

n = is the size of the sample.

Z = is the confidence level, 95% = 1.96

p = is positive variability, 50% = 0.5

q = the negative variability, 50% = 0.5%

N = the population size; 73246

E = the accuracy or error. 5% = 0.05

- Sample

$Z p q N$

$\frac{Z p q N}{NE + Z p q}$

ii. Design effects:

The survey was designed as a stratified probability sample and not a random sample. In order to correct the difference in design, the sample size is multiplied by the design effect (D). Usually assumes a design effect equal to 2.

	Honduras	El Salvador	Nicaragua	Panama	Belize	Costa Rica	Guatemala	Total
PHIV (N)	29,330	26,338	5,693	11,885	5,394	4,557	20,951	104,148
n	797	796	756	782	753	744	792	5420

iii. Target Evaluation Population.

The application of the tool is done through Persons with HIV for person with HIV, with or without antiretroviral therapy. This allows having different perceptions regarding changes both physically and emotionally since diagnosis, but also from the start of antiretroviral therapy.

iv. Evaluation Period

The period provided for lifting the tool was Phase I this was conducted in 2011 (Honduras, Nicaragua, El Salvador, Panama) and phase II (Costa Rica, Belize, Guatemala, to do this phase it was scheduled, in three compressed months between the months of July to September 2012, however in the case of Costa Rica and Belize delays occurred in the commencing as planned, because national authorities on the subject of HIV and ethics committee, made questions, about if there should or should not be approved by the ethics committees in hospitals where the Clinics are located for Comprehensive Care, as it is a descriptive study which does not involve clinical trials, the resolution of COMISCA was used as support; which was held in June 2012, which is expressed by the resolution firm commitment and endorsement by Health Ministers of each of the participating countries it was agreed, by UCP of REDCA +, it was recommended in the case of Belize and Costa Rica that the study be conducted, due to the limitations expressed above, the number of interviews to be collected was reduced, the collection period was extended until October 30, 2012.

c. National Conditions

To carry out the Assessment of Quality of Care, and Comprehensive Health Services for people with HIV-AIDS, each of the participating countries were staged according to the recommendations in the technical guide which was designed for the purpose of a standardized methodology.

However, each country took action efforts to the national authorities in the area of HIV, represented by the heads of the National HIV-AIDS, in the process of managing each of the three participating countries (Belize, Guatemala and Costa Rica), these were found in different scenarios, which are summarized in the following table.

Table 1: Summary, national conditions, phase II evaluation. 2012.

Country	Instance	Solution strategy	Results
Belize	Initially the process was supported by the national program authorities on HIV, however there was objection by the ethics committee research, who did not approve of the evaluation.	The lifting of the information was supported by, the resolution of COMISCA which was held in the month of June 2012	It was established that a sample of 753 was to be taken, however with the limitations of the health facilities, in not authorizing the study, it was agreed to collect at least 50% of the sample size, therefore a total of 528 interviews were done, i.e. 70%. Maintaining technical quality and ethical balance.
Guatemala	Initially, the ethics committee filed objections to the conduct of evaluation, however the NGO Asociacion SEMILLAS, founded the process based on the resolution of COMISCA June 2012.	The collection of information was started, backed by resolution of COMISCA conducted in June-2012, with this support the ethics committee formally approved the study.	It was established that a sample size of 792, but a total of 2,172 were reached, in maintaining the technical quality and ethical concerns. For purposes of analysis of results, the analysis was adjusted to 792, as was first required.
Costa Rica	The NGO: Asociacion Esperanza Viva, conducted the negotiations with the national HIV program and ethics committee, however evaluation was not accepted.	The collection of information was started, backed by resolution of COMISCA conducted in June-2012, with this support the ethics committee formally approved the study.	It was established that a sample size of 744 would be collected, but given the setbacks only 824 interviews were done.

d. Cleaning of the database

After cleaning the database these are the valid surveys for each country:

Country	Interviews received and digitalized	Incomplete Interviews	Effective Interviews
Guatemala	2,173	2	2,171
Costa Rica	824	32	792
Belize	818	25	793
Total	3,815	59	3,756

Source: documents received by each of the participating countries.

The criteria in collecting the information for the study was left up to each country, the gathering of information in most health services that provide comprehensive care for people with HIV; contemplating at least the most representative in the country, the largest population of users, geographical coverage, which include previously revised number of hospitals; which makes a total 22 hospitales (Guatemala: 9, Costa Rica: 5, Belize: 8).

e. Data analysis

The data collected was processed using Epi info 7.0.8.0, where data matching was performed on the data and the results were obtained. In order to optimize the use of the database, a version of was also created in: STATA, SPSS, and Excel.

VII. Results

In the process of providing Integrated Health Care Services for people with HIV-AIDS, who represent external users of the health system function, has been assessed by including 17 variables included the survey of satisfaction (Appendix 1) which is broken down in sections as detailed below:

- A. **Personalized Treatment:** calling the user by name, if health personnel is introduced to them, the professional information of the user is presented a case by case for each user, is personalized and friendly in a comfortable atmosphere, and that operation of medical procedures go smoothly and according to the protocol of care for people with HIV-AIDS in force;
- B. **Opportunity:** the time the user remains in the waiting rooms to get attended and time spent in the doctors' office, the interaction with the health care professional, current knowledge of topic in medicine and proper use of technology, with information to the user about his/her condition, and the phase in which the patients is, i.e. ARVs and drugs for Opportunistic Infections; the access of information and methods that reduce the transmission of infection (providing condoms), belonging and attending a support group or have the benefit of home visits.
- C. **Service Satisfaction:** learn about the environment and the conditions under which interventions are developed
- D. **Resolution Capacity:** to know if the process which they user came for was resolved, to the point as to know how to inform the user about his/her situation and to know how to give more about services rendered to the users.

A. PERSONALIZED TREATMENT

1. THE STAFF WAS PRESENT FOR THE APPOINTMENT

Of the 112 hospitals evaluated 86.4% of staff present themselves to appointments that were scheduled to serves people with HIV-AIDS, 13.6% are no show.

Table1. The Health personnel show up. 2011-2012

The personnel showed up	Percentage	Accumulated Percentage	
NA	3	3	
NO	13.3	13.6	■
YES	86.4	100.0	■
TOTAL	100.0	100.0	■

2. THE PERSONNEL CALLED THE USER BY HIS OR HER NAME

When asked about whether the health professional called the user by his or her name, 95.1% of respondents said that yes they had been called by name, reflecting as satisfactory in terms of what this variable is measuring. Only 4.6% participants mentioned that the professionals did not call them by their name.





Table 2: The Professional called the User by his or her name

The staff called them by there name	Percentage	Accumulated Percentage	
NA	3	3	
NO	4.6	4.9	■
YES	95.1	100.0	■
TOTAL	100.0	100.0	■

3. INFORMATION ON PROCEDURES, DISCOMFORT AND SIDE EFFECTS.

As far as the delivery of information to the users about procedures, discomfort and side effects are concerned, 90.7% said that yes they had been informed. And about one person in ten was not informed.





Table 3. Information to the Users 2011-2012

Was informed of the procedures, discomforts and side effects	Percentage	Accumulated Percentage	
NA	.6	6	
NO	8.6	9.3	
YES	90.7	100.0	
TOTAL	100.0	100.0	

4. CLEAR AND TIMELY RESPONSES

94.1% of users surveyed said that they received clear and timely responses, for the care provided. And 5.5% of the respondents did not receive information.

Table 4. Clear and timely responses





Clear and timely responses	Percentage	Accumulated Percentage	
NA	.4	.4	
NO	5.5	5.9	
YES	94.1	100.0	
TOTAL	100.0	100.0	

B. OPPORTUNITY

5. CARE WAS RECEIVED AS EXPECTED

93.6% of respondents said that they received health care according to expectations. Less than 6% of the respondents said they have not received attention as they expected.








Table 5. Care Was Received As Expected

Care was received as expected	Percentage	Accumulated Percentage	
NA	.5	.5	
NO	5.9	6.4	
YES	93.6	100.0	
TOTAL	100.0	100.0	

6. HOW LONG WAS THE WAIT

As for time waiting is concerned, this can be seen in Table 6 that the percentage distribution is similar, in that 29.2% reported that they had to wait about 1 hour for treatment, and 8.5% waited more than 3 hours to receive attention.

Table 6. Waiting Time 2011 – 2012

Waiting Time	Percentage	Accumulated Percentage	
-1H	18.2	18.2	
+3H	8.5	26.7	
1H	29.2	55.9	
2H	17.0	72.9	
3H	9.5	82.3	
NA	17.7	100.0	
TOTAL	100.0	100.0	

7. SERVICES RECEIVED BY ALL WHO CAME

95.0% of users received all services for which they approached the hospital. However, 4.3% of people expressed not receiving the services required.

Table 7. Services Received 2011 – 2012

Care was received as expected	Percentage	Accumulated Percentage	
NA	.7	.7	
NO	4.3	5.0	
YES	95.0	100.0	
TOTAL	100.0	100.0	

8. MONETARY CONTRIBUTION IS ASK FOR ARVs

According to the statement by the respondents, 85.7% reported having received free health care and antiretrovirals. However eleven people in a hundred indicated otherwise.

Table 8. Monetary Contribution is asked 2011 – 2012

Care was received as expected	Percentage	Accumulated Percentage	
NA	2.9	2.9	
NO	85.7	88.6	
YES	11.4	100.0	
TOTAL	100.0	100.0	

9. IF THEY DO NOT PAY, AI AND ARVs ARE PROVIDED

The result of the variable N / A (Not Applicable), was 80.4%, since the services he received was free in consistency as indicated in Table 8.

Table 9. Care delivery and free ARV, 2011 – 2012

If They Do Not Pay, Ai And Arvs Are Provided	Percentage	Accumulated Percentage	
NA	80.4	80.4	
NO	5.0	85.4	
YES	14.6	100.0	
TOTAL	100.0	100.0	

1. Availability of medication for OI. 2011 – 2012

Regarding the availability of drugs for Opportunistic Infections (OIs), 71.4% answered yes. We must stress that 22.5% said no.





Table 10. Availability of medication for OI 2011 – 2012

If medication for OIs is need are they available	Percentage	Accumulated Percentage	
NA	6.1	6.1	
NO	22.5	28.6	
YES	71.4	100.0	
TOTAL	100.0	100.0	

2. Availability of condoms and educational material

As far as availability of condoms and educational materials when required by users, 85.5% said yes, that is that their need were met. While 13.3% indicated otherwise.

Table 11. Availability of condoms and educational material. 2011-2012





Are there condoms and educational material	Percentage	Accumulated Percentage	
NA	1.2	1.2	
NO	13.3	14.5	
YES	85.5	100.0	
TOTAL	100.0	100.0	

C. SERVICE SATISFACTION

3. THE CLINIC IS COMFORTABLE AND PLEASANT

The 90.6% of users interviewed expressed that clinics are comfortable and friendly and only 9.0% said otherwise.

Table 12. Space is Comfortable and Pleasant 2011 – 2012.

Clinic is Comfortable and Pleasant	Percentage	Accumulated Percentage	
NA	.4	.4	
NO	9.0	9.4	
YES	90.6	100.0	
TOTAL	100.0	100.0	

4. IS THERE PRIVACY

With regard to privacy in the care received, 84.2% say yes there is privacy, this variable is directly related to the perception of spaces as comfortable and enjoyable, if we analyze the two results a difference of 6.4% are in favor of the area to be comfortable and pleasant even if the space is private.

Table 13. Privacy in clinics 2011 – 2012

Is there Privacy	Percentage	Accumulated Percentage	
NA	.3	.3	
NO	15.4	15.8	
YES	84.2	100.0	
TOTAL	100.0	100.0	

5. DISSATISFIED WITH THE SERVICE TODAY

91.1% of users were satisfied with the care provided on the day of the consultation. Highly correlated with the response to the question of whether the user got all or one of the services in hospital.

Table 14. Satisfaction in the level of service received. 2011- 2012

Satisfied with the service received today?	Percentage	Accumulated Percentage	
NA	3.4	3.4	
NO	5.5	8.9	
YES	91.1	100.0	
TOTAL	100.0	100.0	

6. SATISFACTION RATING

When the user was asked to rate the quality level of satisfaction, 62.1% - slightly more than half of respondents-ranked their satisfaction between good and excellent. It is necessary to reflect that there is a 7.5% that places satisfaction rate between bad and regular.

Table 15. Satisfaction of the User. 2011 – 2012

Ranking of Satisfaction	Percentage	Accumulated Percentage	
1M	2.0	2.0	
2R	5.5	7.4	
3B	28.1	35.5	
4MB	34.0	69.5	
5E	30.2	99.7	
NA	0.3	100.0	
TOTAL	100.0	100.0	

D. RESOLUTION CAPABILITY

7. RESOLUTION PENDING RATING

In terms of the resolution capacity the outcome is very similar, ranging from good, very good and excellent, which makes an average of 89.0% which that there issue is solved. But there is a 8.8% of the users expressing dissatisfaction ranging from (Poor + Regular) when solving the users issues.





Table 16. Resolution Capability

Ranking of Satisfaction	Percentage	Accumulated Percentage	
1M	2.7	2.7	
2R	6.1	8.8	
3B	32.7	41.5	
4MB	31.6	73.1	
5E	24.7	97.8	
NA	2.2	100.0	
TOTAL	100.0	100.0	

8. WAS THERE ENOUGH INFORMATION TO USE THE SERVICE

91.4% of respondents replied that they had the necessary information for the use of the services.

Table 17. Delivery of necessary information. 2011 – 2012

Satisfied with the service received today?	Percentage	Accumulated Percentage	
NA	2.4	2.4	
NO	6.2	8.6	
YES	91.4	100.0	
TOTAL	100.0	100.0	

RESULTS BY HOSPITAL

Below is the result of the 112 hospitals providing Anti Retroviral Therapy (ART) to people living with HIV-AIDS, the seven participating countries (Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua and Panama) in which the assessment was applied, which includes the 17 variables explained above:

Table.18. Results by hospital that participated. 2012 – 2013

Belize:

País	Belize	Belize	Belize	Belize	Belize	Belize	Belize	Belize
Hospital	Cleopatra	Dangriga Hospital	Hospital Corozal	Hospital de Belmopan	Hospital Regional del Norte	Hospital San Ignacio	KHMH	Orange Walk
Hospitales	1	2	3	4	5	6	7	8
Variables								
1	50.0%	100.0%	92.3%	100.0%	100.0%	76.7%	93.2%	82.4%
2	100.0%	100.0%	76.9%	40.0%	100.0%	73.3%	84.6%	82.4%
3	50.0%	100.0%	92.3%	60.0%	96.8%	83.3%	84.2%	88.2%
4	100.0%	100.0%	92.3%	60.0%	100.0%	53.3%	90.3%	94.1%
5	100.0%	100.0%	92.3%	60.0%	100.0%	53.3%	87.8%	82.4%
6	50.0%	0.0%	30.8%	0.0%	29.0%	13.3%	11.8%	35.3%
7	100.0%	100.0%	92.3%	40.0%	100.0%	66.7%	90.0%	94.1%
8	100.0%	100.0%	100.0%	100.0%	100.0%	93.3%	87.5%	100.0%
9	0.0%	0.0%	0.0%	0.0%	0.0%	6.7%	12.2%	0.0%
10	50.0%	100.0%	69.2%	40.0%	100.0%	43.3%	84.2%	47.1%
11	50.0%	100.0%	84.6%	40.0%	98.4%	53.3%	83.2%	100.0%
12	50.0%	100.0%	92.3%	80.0%	100.0%	26.7%	92.8%	88.2%
13	50.0%	100.0%	100.0%	80.0%	100.0%	30.0%	84.9%	94.1%
14	100.0%	100.0%	92.3%	80.0%	100.0%	56.7%	93.2%	88.2%
15	50.0%	100.0%	23.1%	0.0%	29.0%	0.0%	29.4%	17.6%
16	50.0%	100.0%	15.4%	0.0%	29.0%	0.0%	31.5%	11.8%
17	50.0%	100.0%	92.3%	80.0%	100.0%	90.0%	95.7%	70.6%
Total	1100.0%	1500.0%	1238.5%	860.0%	1382.3%	820.0%	1236.6%	1176.5%
Promedio	68.8%	100.0%	77.4%	66.2%	86.4%	54.7%	72.7%	73.5%

Costa Rica

País	Costa Rica	Costa Rica	Costa Rica	Costa Rica	Costa Rica	El Salvador	El Salvador	El Salvador
Hospital	Hospital Calderon Guardia	Hospital Mexico	Hospital Monseñor Sanabria	Hospital San Juan de Dios	Hospital Tony Facio	AHU	CHA	COJ
Hospitales Variables	9	10	11	12	13	14	15	16
1	60.2%	77.2%	94.1%	64.3%	72.2%	93.2%	100.0%	97.7%
2	93.9%	100.0%	100.0%	94.3%	88.9%	100.0%	100.0%	100.0%
3	81.6%	89.1%	96.1%	79.3%	83.3%	88.6%	100.0%	100.0%
4	84.7%	89.1%	96.1%	87.1%	83.3%	97.7%	100.0%	100.0%
5	81.6%	97.0%	94.1%	86.4%	83.3%	100.0%	100.0%	97.7%
6	28.6%	18.8%	35.3%	27.1%	50.0%	11.4%	4.0%	11.6%
7	95.9%	98.0%	96.1%	97.1%	100.0%	100.0%	100.0%	100.0%
8	100.0%	98.0%	96.1%	97.9%	100.0%	100.0%	100.0%	100.0%
9	0.0%	2.0%	3.9%	2.1%	100.0%	2.3%	0.0%	0.0%
10	94.9%	91.1%	96.1%	92.1%	94.4%	61.4%	76.0%	72.1%
11	89.8%	87.1%	84.3%	86.4%	88.9%	90.9%	92.0%	72.1%
12	91.8%	95.0%	66.7%	62.1%	77.8%	100.0%	100.0%	97.7%
13	77.6%	92.1%	62.7%	39.3%	72.2%	95.5%	100.0%	95.3%
14	94.9%	97.0%	98.0%	93.6%	88.9%	100.0%	100.0%	100.0%
15	16.3%	14.9%	37.3%	12.1%	22.2%	47.7%	48.0%	53.5%
16	17.3%	15.8%	43.1%	9.3%	16.7%	34.1%	24.0%	46.5%
17	92.9%	96.0%	96.1%	94.3%	94.4%	88.6%	100.0%	97.7%
Total	1202.0%	1258.4%	1296.1%	1125.0%	1316.7%	1311.4%	1344.0%	1341.9%
Promedio	75.1%	74.0%	76.2%	66.2%	77.5%	77.1%	84.0%	83.9%

El Salvador

País	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador
Hospital	GOT	LU	RO	SA	SB	SENS	SL	SM
Hospitales								
Variables	17	18	19	20	21	22	23	24
1	81.8%	86.8%	85.3%	96.0%	82.9%	71.4%	82.8%	85.1%
2	81.8%	97.4%	100.0%	100.0%	88.6%	100.0%	100.0%	100.0%
3	95.5%	92.1%	100.0%	100.0%	80.0%	92.9%	86.2%	93.6%
4	86.4%	100.0%	97.1%	98.0%	94.3%	100.0%	100.0%	97.9%
5	90.9%	97.4%	97.1%	98.0%	88.6%	100.0%	96.6%	89.4%
6	9.1%	5.3%	5.9%	6.0%	8.6%	0.0%	0.0%	8.5%
7	95.5%	94.7%	100.0%	100.0%	94.3%	100.0%	100.0%	97.9%
8	95.5%	97.4%	97.1%	98.0%	100.0%	100.0%	100.0%	93.6%
9	0.0%	0.0%	2.9%	0.0%	2.9%	0.0%	6.9%	2.1%
10	63.6%	65.8%	85.3%	68.0%	65.7%	71.4%	86.2%	68.1%
11	86.4%	100.0%	79.4%	80.0%	94.3%	92.9%	89.7%	91.5%
12	59.1%	44.7%	97.1%	100.0%	85.7%	100.0%	100.0%	95.7%
13	31.8%	71.1%	97.1%	96.0%	85.7%	92.9%	100.0%	91.5%
14	95.5%	100.0%	100.0%	98.0%	91.4%	100.0%	100.0%	87.2%
15	4.5%	44.7%	32.4%	28.0%	51.4%	64.3%	55.2%	48.9%
16	0.0%	31.6%	20.6%	22.0%	31.4%	71.4%	48.3%	48.9%
17	81.8%	97.4%	94.1%	94.0%	91.4%	92.9%	93.1%	93.6%
Total	1059.1%	1226.3%	1291.2%	1282.0%	1237.1%	1350.0%	1344.8%	1293.6%
Promedio	70.6%	76.6%	76.0%	80.1%	72.8%	90.0%	84.1%	76.1%

País	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador	Guatemala
Hospital	SO	SR	SV	SY	USU	ZAC	ZAT	Clínica 1
Hospitales								
Variables	25	26	27	28	29	30	31	32
1	100.0%	91.7%	100.0%	87.8%	91.7%	100.0%	96.3%	97.5%
2	97.3%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
3	97.3%	91.7%	100.0%	95.9%	91.7%	97.1%	96.3%	97.5%
4	100.0%	91.7%	97.8%	98.0%	100.0%	100.0%	88.9%	98.8%
5	94.6%	94.4%	100.0%	98.0%	100.0%	98.6%	100.0%	98.8%
6	5.4%	2.8%	2.2%	4.1%	16.7%	5.7%	3.7%	52.5%
7	100.0%	94.4%	100.0%	98.0%	100.0%	100.0%	100.0%	97.5%
8	100.0%	100.0%	93.5%	98.0%	100.0%	100.0%	92.6%	98.8%
9	0.0%	2.8%	2.2%	2.0%	8.3%	0.0%	0.0%	1.3%
10	94.6%	80.6%	76.1%	79.6%	83.3%	80.0%	88.9%	82.5%
11	94.6%	88.9%	89.1%	81.6%	91.7%	87.1%	100.0%	95.0%
12	100.0%	97.2%	100.0%	98.0%	75.0%	98.6%	92.6%	98.8%
13	100.0%	94.4%	97.8%	91.8%	58.3%	95.7%	100.0%	100.0%
14	100.0%	94.4%	100.0%	98.0%	100.0%	100.0%	96.3%	100.0%
15	56.8%	38.9%	43.5%	57.1%	58.3%	64.3%	33.3%	56.3%
16	40.5%	25.0%	30.4%	42.9%	50.0%	54.3%	18.5%	17.5%
17	94.6%	100.0%	100.0%	93.9%	100.0%	98.6%	100.0%	98.8%
Total	1375.7%	1288.9%	1332.6%	1324.5%	1325.0%	1380.0%	1307.4%	1391.3%
Promedio	86.0%	75.8%	78.4%	77.9%	77.9%	86.3%	81.7%	81.8%

Guatemala

País	Guatemala	Guatemala	Guatemala	Guatemala	Guatemala	Guatemala	Guatemala	Guatemala
Hospital	Clínica ICA	Hospital de la Amistad Japón-Guatemala	Hospital Nacional Regional Escuintla	Hospital Pedro de Betancourt Antigua Guatemala	Hospital Pedro de Betancourt, Sacatepequez	Hospital Regional Zacapa	UAI Clínica 12	Unidad de Atención Integral
Hospitales	33	34	35	36	37	38	39	40
Variables	33	34	35	36	37	38	39	40
1	99.2%	54.4%	90.0%	100.0%	87.5%	91.0%	99.3%	100.0%
2	98.4%	99.2%	99.5%	100.0%	100.0%	100.0%	99.3%	100.0%
3	99.2%	68.8%	97.0%	100.0%	87.5%	97.8%	98.3%	100.0%
4	99.2%	76.4%	100.0%	100.0%	100.0%	100.0%	99.0%	100.0%
5	100.0%	82.7%	97.5%	100.0%	87.5%	97.8%	98.6%	100.0%
6	54.8%	4.2%	10.5%	100.0%	0.0%	2.2%	1.0%	10.0%
7	99.2%	81.0%	91.0%	100.0%	100.0%	100.0%	98.3%	100.0%
8	97.6%	100.0%	99.5%	75.0%	100.0%	100.0%	100.0%	100.0%
9	2.4%	0.0%	0.5%	25.0%	0.0%	0.0%	0.0%	0.0%
10	89.5%	57.8%	59.0%	0.0%	37.5%	86.5%	79.9%	45.0%
11	98.4%	76.4%	75.5%	100.0%	75.0%	96.6%	97.6%	95.0%
12	99.2%	93.7%	98.0%	100.0%	100.0%	100.0%	99.0%	100.0%
13	100.0%	77.2%	97.5%	100.0%	87.5%	100.0%	97.9%	100.0%
14	100.0%	70.9%	95.0%	100.0%	100.0%	100.0%	99.0%	100.0%
15	70.2%	19.4%	19.0%	100.0%	37.5%	29.2%	22.9%	50.0%
16	35.5%	13.5%	6.5%	100.0%	0.0%	23.6%	22.2%	55.0%
17	98.4%	73.8%	69.5%	100.0%	100.0%	98.9%	99.3%	100.0%
Total	1441.1%	1049.4%	1205.5%	1500.0%	1200.0%	1323.6%	1311.5%	1355.0%
Promedio	84.8%	65.6%	70.9%	93.8%	85.7%	82.7%	82.0%	84.7%

Honduras

País	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras
Hospital	CAI	CAS	CEC	CHO	CSC	HATL	HCR	HDO
Hospitales	41	42	43	44	45	46	47	48
Variables	41	42	43	44	45	46	47	48
1	100.0%	88.9%	75.0%	100.0%	100.0%	86.5%	42.3%	25.0%
2	100.0%	100.0%	91.7%	100.0%	100.0%	98.1%	73.1%	100.0%
3	100.0%	88.9%	100.0%	100.0%	100.0%	86.5%	79.8%	100.0%
4	100.0%	100.0%	91.7%	96.7%	100.0%	96.2%	90.4%	100.0%
5	100.0%	100.0%	100.0%	93.3%	100.0%	84.6%	90.4%	100.0%
6	16.7%	11.1%	8.3%	23.3%	16.7%	26.9%	9.6%	100.0%
7	100.0%	100.0%	100.0%	100.0%	100.0%	92.3%	98.1%	100.0%
8	50.0%	0.0%	0.0%	66.7%	100.0%	30.8%	26.0%	25.0%
9	66.7%	100.0%	100.0%	33.3%	0.0%	76.9%	76.9%	50.0%
10	83.3%	77.8%	83.3%	90.0%	83.3%	73.1%	24.0%	100.0%
11	66.7%	88.9%	100.0%	86.7%	100.0%	100.0%	93.3%	100.0%
12	100.0%	66.7%	91.7%	90.0%	100.0%	94.2%	97.1%	100.0%
13	83.3%	77.8%	83.3%	90.0%	100.0%	92.3%	93.3%	0.0%
14	83.3%	100.0%	91.7%	100.0%	100.0%	86.5%	91.3%	100.0%
15	0.0%	11.1%	58.3%	10.0%	83.3%	53.8%	39.4%	100.0%
16	0.0%	11.1%	50.0%	16.7%	66.7%	51.9%	35.6%	100.0%
17	100.0%	88.9%	91.7%	96.7%	100.0%	80.8%	88.5%	100.0%
Total	1250.0%	1211.1%	1316.7%	1293.3%	1450.0%	1311.5%	1149.0%	1400.0%
Promedio	83.3%	75.7%	82.3%	76.1%	90.6%	77.1%	67.6%	87.5%

País	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras
Hospital	HMCR	HMR	HO	HOR	HPC	HRC	HSB	HSC
Hospitales	57	58	59	60	61	62	63	64
Variables								
1	0.0%	80.0%	66.7%	100.0%	15.0%	25.0%	80.0%	100.0%
2	50.0%	100.0%	100.0%	100.0%	20.0%	25.0%	100.0%	100.0%
3	50.0%	80.0%	100.0%	100.0%	85.0%	50.0%	100.0%	100.0%
4	100.0%	100.0%	100.0%	100.0%	95.0%	100.0%	100.0%	100.0%
5	50.0%	100.0%	100.0%	100.0%	95.0%	100.0%	100.0%	100.0%
6	40.0%	16.7%	0.0%	65.0%	25.0%	0.0%	0.0%	0.0%
7	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	90.0%	100.0%
8	50.0%	20.0%	33.3%	100.0%	10.0%	25.0%	100.0%	100.0%
9	50.0%	100.0%	66.7%	50.0%	90.0%	75.0%	0.0%	0.0%
10	0.0%	40.0%	66.7%	50.0%	50.0%	75.0%	40.0%	100.0%
11	50.0%	100.0%	66.7%	50.0%	95.0%	100.0%	90.0%	100.0%
12	50.0%	100.0%	100.0%	50.0%	95.0%	75.0%	40.0%	100.0%
13	50.0%	100.0%	16.7%	100.0%	95.0%	75.0%	80.0%	100.0%
14	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
15	100.0%	60.0%	100.0%	0.0%	45.0%	0.0%	70.0%	0.0%
16	100.0%	60.0%	83.3%	0.0%	35.0%	0.0%	50.0%	50.0%
17	0.0%	100.0%	100.0%	100.0%	75.0%	50.0%	100.0%	100.0%
Total	940.0%	1356.7%	1300.0%	1265.0%	1125.0%	975.0%	1240.0%	1350.0%
Promedio	67.1%	79.8%	81.3%	84.3%	66.2%	69.6%	82.7%	96.4%

País	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras
Hospital	HDP	HDT	HE	HEP	HET	HGA	HGH	HMC
Hospitales	49	50	51	52	53	54	55	56
Variables								
1	0.0%	100.0%	93.2%	73.3%	100.0%	100.0%	58.3%	24.7%
2	0.0%	100.0%	96.6%	83.3%	100.0%	100.0%	100.0%	68.8%
3	0.0%	85.7%	94.9%	83.3%	50.0%	100.0%	100.0%	85.7%
4	0.0%	100.0%	89.8%	93.3%	100.0%	100.0%	100.0%	85.7%
5	0.0%	100.0%	89.8%	86.7%	100.0%	100.0%	100.0%	92.2%
6	0.0%	0.0%	10.2%	20.0%	100.0%	0.0%	1.3%	0.0%
7	0.0%	85.7%	89.8%	96.7%	75.0%	100.0%	91.7%	96.1%
8	0.0%	42.9%	11.9%	20.0%	50.0%	100.0%	91.7%	13.0%
9	100.0%	57.1%	86.4%	80.0%	50.0%	0.0%	8.3%	72.7%
10	0.0%	42.9%	69.5%	63.3%	75.0%	100.0%	58.3%	41.6%
11	100.0%	85.7%	72.9%	90.0%	75.0%	100.0%	100.0%	90.9%
12	100.0%	100.0%	88.1%	90.0%	100.0%	100.0%	100.0%	98.7%
13	100.0%	85.7%	83.1%	83.3%	75.0%	100.0%	66.7%	87.0%
14	100.0%	85.7%	91.5%	100.0%	75.0%	100.0%	100.0%	90.9%
15	0.0%	42.9%	22.0%	63.3%	25.0%	100.0%	100.0%	20.8%
16	0.0%	57.1%	16.9%	60.0%	25.0%	100.0%	58.3%	16.9%
17	100.0%	85.7%	94.9%	83.3%	50.0%	100.0%	100.0%	88.3%
Total	600.0%	1257.1%	1201.7%	1270.0%	1225.0%	1500.0%	1334.6%	1074.0%
Promedio	100.0%	78.6%	70.7%	74.7%	72.1%	100.0%	78.5%	67.1%

País	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras
Hospital	HSF	HSL	HSMO	HSP	HTI	IHSP	IHSS	IHSST
Hospitales	65	66	67	68	69	70	71	72
Variables								
1	80.0%	100.0%	87.5%	94.7%	100.0%	50.0%	100.0%	100.0%
2	100.0%	100.0%	100.0%	94.7%	100.0%	100.0%	100.0%	100.0%
3	100.0%	78.6%	100.0%	78.9%	100.0%	50.0%	100.0%	100.0%
4	100.0%	100.0%	100.0%	94.7%	100.0%	50.0%	100.0%	100.0%
5	100.0%	100.0%	100.0%	78.9%	98.0%	50.0%	100.0%	83.3%
6	0.0%	0.0%	10.5%	10.2%	0.0%	33.3%	16.7%	9.1%
7	100.0%	92.9%	100.0%	84.2%	95.9%	100.0%	100.0%	100.0%
8	100.0%	85.7%	100.0%	31.6%	30.6%	100.0%	100.0%	100.0%
9	0.0%	14.3%	0.0%	94.7%	77.6%	0.0%	33.3%	16.7%
10	90.0%	85.7%	87.5%	57.9%	91.8%	75.0%	33.3%	50.0%
11	100.0%	100.0%	100.0%	100.0%	93.9%	75.0%	50.0%	50.0%
12	100.0%	92.9%	100.0%	100.0%	98.0%	75.0%	100.0%	50.0%
13	60.0%	64.3%	100.0%	94.7%	95.9%	100.0%	100.0%	16.7%
14	90.0%	92.9%	87.5%	84.2%	95.9%	50.0%	100.0%	100.0%
15	50.0%	21.4%	100.0%	42.1%	71.4%	0.0%	66.7%	16.7%
16	30.0%	14.3%	100.0%	42.1%	69.4%	50.0%	0.0%	16.7%
17	100.0%	92.9%	100.0%	84.2%	93.9%	50.0%	100.0%	100.0%
Total	1300.0%	1235.7%	1473.0%	1268.1%	1412.2%	1008.3%	1300.0%	1109.1%
Promedio	86.7%	77.2%	92.1%	74.6%	88.3%	67.2%	81.3%	65.2%

País	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Nicaragua	Nicaragua
Hospital	MPB	PT	SM	TORAX	UDSM	USM	BOA	CB
Hospitales	73	74	75	76	77	78	79	80
Variables								
1	100.0%	100.0%	100.0%	100.0%	100.0%	0.0%	100.0%	96.7%
2	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
3	90.9%	100.0%	100.0%	92.3%	100.0%	0.0%	100.0%	100.0%
4	90.9%	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%	96.7%
5	81.8%	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%	100.0%
6	0.0%	0.0%	7.7%	0.0%	0.0%	0.0%	36.7%	0.0%
7	100.0%	66.7%	100.0%	100.0%	0.0%	100.0%	100.0%	96.7%
8	100.0%	100.0%	100.0%	0.0%	100.0%	0.0%	100.0%	86.7%
9	0.0%	0.0%	0.0%	100.0%	100.0%	0.0%	88.9%	93.3%
10	100.0%	100.0%	100.0%	53.8%	0.0%	100.0%	66.7%	100.0%
11	90.9%	66.7%	100.0%	38.5%	100.0%	100.0%	100.0%	96.7%
12	90.9%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
13	81.8%	100.0%	100.0%	92.3%	100.0%	0.0%	100.0%	93.3%
14	90.9%	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%	90.0%
15	63.6%	33.3%	0.0%	7.7%	0.0%	100.0%	11.1%	0.0%
16	54.5%	33.3%	0.0%	0.0%	0.0%	100.0%	11.1%	3.3%
17	90.9%	100.0%	100.0%	92.3%	0.0%	100.0%	100.0%	100.0%
Total	1327.3%	1300.0%	1307.7%	1176.9%	800.0%	1100.0%	1414.4%	1353.3%
Promedio	88.5%	86.7%	93.4%	84.1%	100.0%	100.0%	83.2%	90.2%

Nicaragua

País	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua
Hospital	GGL	HA	HACEX	HBC	HC	HE	HES	HESB
Hospitales Variables	81	82	83	84	85	86	87	88
1	75.0%	100.0%	100.0%	100.0%	100.0%	70.6%	100.0%	100.0%
2	100.0%	100.0%	100.0%	100.0%	100.0%	70.6%	100.0%	85.7%
3	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	88.9%	100.0%
4	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
5	100.0%	100.0%	100.0%	75.0%	100.0%	100.0%	100.0%	100.0%
6	62.7%	100.0%	0.0%	0.0%	0.0%	11.1%	42.9%	4.5%
7	100.0%	98.7%	100.0%	87.5%	100.0%	100.0%	100.0%	100.0%
8	75.0%	98.7%	100.0%	100.0%	100.0%	88.2%	100.0%	100.0%
9	0.0%	52.0%	0.0%	0.0%	0.0%	11.8%	11.1%	0.0%
10	100.0%	97.3%	100.0%	12.5%	0.0%	52.9%	22.2%	42.9%
11	100.0%	97.3%	100.0%	87.5%	0.0%	100.0%	77.8%	85.7%
12	100.0%	10.7%	0.0%	100.0%	0.0%	94.1%	100.0%	100.0%
13	100.0%	8.0%	0.0%	87.5%	0.0%	94.1%	100.0%	100.0%
14	100.0%	96.0%	100.0%	100.0%	100.0%	94.1%	100.0%	85.7%
15	50.0%	0.0%	0.0%	50.0%	0.0%	82.4%	0.0%	28.6%
16	50.0%	0.0%	0.0%	37.5%	0.0%	70.6%	100.0%	0.0%
17	75.0%	97.3%	100.0%	75.0%	100.0%	64.7%	0.0%	0.0%
Total	1387.7%	1256.0%	1100.0%	1212.5%	900.0%	1305.2%	1242.9%	1133.1%
Promedio	86.7%	83.7%	100.0%	80.8%	100.0%	76.8%	82.9%	80.9%

País	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua
Hospital	HESBL	HHA	HHS	HJD	HMG	HOR	HRC	HSCEX
Hospitales Variables	89	90	91	92	93	94	95	96
1	95.5%	83.3%	82.4%	100.0%	100.0%	98.0%	96.2%	100.0%
2	95.5%	100.0%	70.6%	100.0%	100.0%	97.3%	95.6%	100.0%
3	100.0%	33.3%	58.8%	100.0%	100.0%	95.3%	90.1%	100.0%
4	100.0%	66.7%	94.1%	100.0%	100.0%	96.0%	95.1%	100.0%
5	95.5%	83.3%	100.0%	100.0%	100.0%	94.0%	95.1%	100.0%
6	0.0%	52.9%	0.0%	0.0%	34.0%	17.6%	0.0%	0.0%
7	100.0%	83.3%	94.1%	0.0%	100.0%	96.7%	97.8%	0.0%
8	90.9%	100.0%	94.1%	100.0%	100.0%	100.0%	100.0%	100.0%
9	0.0%	0.0%	5.9%	0.0%	0.0%	41.3%	1.6%	0.0%
10	36.4%	16.7%	76.5%	0.0%	100.0%	37.3%	65.4%	100.0%
11	81.8%	83.3%	76.5%	0.0%	100.0%	44.0%	78.6%	0.0%
12	100.0%	100.0%	100.0%	0.0%	100.0%	96.0%	98.9%	0.0%
13	95.5%	16.7%	35.3%	0.0%	100.0%	80.7%	95.6%	0.0%
14	100.0%	66.7%	88.2%	0.0%	100.0%	72.0%	87.9%	0.0%
15	31.8%	33.3%	17.6%	0.0%	0.0%	4.0%	34.1%	0.0%
16	0.0%	0.0%	11.8%	0.0%	0.0%	4.7%	34.1%	0.0%
17	13.6%	16.7%	52.9%	0.0%	100.0%	98.7%	93.4%	100.0%
Total	1136.4%	936.3%	1058.8%	600.0%	1334.0%	1173.6%	1259.3%	800.0%
Promedio	81.2%	62.4%	66.2%	100.0%	95.3%	69.0%	78.7%	100.0%

País	Nicaragua	Nicaragua	Nicaragua	Panamá	Panamá	Panamá	Panamá	Panamá
Hospital	HSJD	HSUD	KSJD	CHI	CHM	HAM	HAT	HCC
Hospitales	97	98	99	100	101	102	103	104
Variables								
1	100.0%	100.0%	100.0%	92.3%	98.0%	100.0%	88.9%	100.0%
2	94.4%	100.0%	100.0%	97.4%	100.0%	100.0%	100.0%	100.0%
3	100.0%	100.0%	100.0%	92.3%	95.1%	100.0%	77.8%	92.9%
4	88.9%	100.0%	0.0%	94.9%	97.1%	100.0%	88.9%	100.0%
5	72.2%	100.0%	0.0%	100.0%	97.1%	100.0%	88.9%	92.9%
6	0.0%	0.0%	10.3%	34.3%	50.0%	0.0%	11.1%	14.3%
7	72.2%	0.0%	100.0%	97.4%	94.1%	100.0%	100.0%	100.0%
8	100.0%	100.0%	100.0%	92.3%	97.1%	100.0%	88.9%	100.0%
9	0.0%	0.0%	0.0%	7.7%	2.0%	0.0%	55.6%	7.1%
10	38.9%	0.0%	0.0%	69.2%	64.7%	100.0%	66.7%	50.0%
11	11.1%	0.0%	0.0%	82.1%	62.7%	100.0%	100.0%	100.0%
12	33.3%	0.0%	0.0%	97.4%	93.1%	100.0%	100.0%	57.1%
13	16.7%	0.0%	0.0%	97.4%	80.4%	50.0%	88.9%	50.0%
14	5.6%	0.0%	0.0%	89.7%	91.2%	100.0%	88.9%	100.0%
15	11.1%	0.0%	0.0%	28.2%	16.7%	100.0%	33.3%	35.7%
16	5.6%	0.0%	0.0%	25.6%	7.8%	100.0%	22.2%	35.7%
17	88.9%	0.0%	100.0%	94.9%	93.1%	50.0%	77.8%	85.7%
Total	838.9%	600.0%	610.3%	1293.3%	1240.2%	1400.0%	1277.8%	1221.4%
Promedio	55.9%	100.0%	87.2%	76.1%	73.0%	93.3%	75.2%	71.8%

Panama

País	Panamá	Panamá	Panamá	Panamá	Panamá	Panamá	Panamá	Panamá
Hospital	HLF	HM	HMG	HST	HSTCE	KY	NB	NG
Hospitales	105	106	107	108	109	110	111	112
Variables								
1	100.0%	100.0%	100.0%	88.2%	100.0%	75.0%	100.0%	100.0%
2	100.0%	100.0%	99.6%	97.4%	100.0%	100.0%	100.0%	100.0%
3	95.0%	100.0%	92.0%	92.8%	100.0%	95.0%	100.0%	100.0%
4	100.0%	100.0%	99.1%	96.1%	100.0%	100.0%	100.0%	100.0%
5	100.0%	100.0%	96.9%	97.4%	100.0%	100.0%	100.0%	100.0%
6	20.0%	0.0%	41.3%	20.3%	0.0%	0.0%	0.0%	0.0%
7	100.0%	100.0%	96.0%	93.5%	100.0%	100.0%	83.3%	100.0%
8	100.0%	100.0%	96.4%	96.1%	100.0%	95.0%	100.0%	100.0%
9	5.0%	0.0%	3.1%	3.3%	0.0%	0.0%	0.0%	0.0%
10	100.0%	100.0%	68.4%	64.7%	100.0%	85.0%	50.0%	0.0%
11	100.0%	100.0%	98.2%	85.6%	100.0%	100.0%	83.3%	100.0%
12	100.0%	100.0%	80.9%	98.7%	100.0%	90.0%	100.0%	100.0%
13	55.0%	0.0%	70.2%	98.7%	100.0%	90.0%	83.3%	100.0%
14	100.0%	100.0%	73.3%	94.1%	100.0%	95.0%	100.0%	0.0%
15	45.0%	0.0%	22.7%	17.0%	0.0%	10.0%	0.0%	0.0%
16	40.0%	0.0%	20.4%	16.3%	0.0%	15.0%	33.3%	0.0%
17	100.0%	100.0%	97.8%	98.0%	100.0%	100.0%	100.0%	100.0%
Total	1360.0%	1200.0%	1256.4%	1258.2%	1300.0%	1250.0%	1233.3%	1100.0%
Promedio	80.0%	100.0%	73.9%	74.0%	100.0%	83.3%	88.1%	100.0%

CONSOLIDATED

Table 19 is denoted - a metric level indicator - with values lower than 5059% (range considered insufficient, except the indicator 9) indicators are 6, 9, 15 and 16, according to the indicated by informant. Even with the above the 72.352.7% (59 stores) - of the 112 establishments - are among the categories of good, very good and excellent, as indicated by the informants.

Table.19. Results by participating hospital. 2011-2012¹

Range	Category	Hospital	Percentage	valoración de las 17 variables
<59%	Insufficient	2	1,8%	88.1% 1
60% -69%	enough	14	12,5%	94.6% 2
70% - 79%	Acceptable	37	33,0%	91.3% 3
80% - 89%	Good	37	33,0%	95.8% 4
90% -99%	Very good	9	8,0%	94.4% 5
100%	Excelente	13	11,6%	24.6% 6
Percentage of favorable settlements (Good, Very Good and Excellent)				95.9% 7
				87.1% 8
				39.4% 9
				71.9% 10
				86.5% 11
				90.0% 12
				83.0% 13
				93.5% 14
				44.6% 15
				40.2% 16
				90.1% 17

The best indicators evaluated by the informants are linked to the information received by the process that they perform, the services received according to your demand, the level of satisfaction with the services received on the day of interview, among others.

¹ Fuente: Encuesta realizada en 112 centros de saludos de los siete países de la Región Centroamericana, período 2011-2012

Table 20: Conceptualization of variables.

Número	Concepto de variable	Opción valorada
1	El personal que lo atendió, se presentó con usted	SI
2	El personal que lo atendió, le llamo por su nombre	SI
3	Se le informo sobre los procedimientos que se le realizarían, con sus posibles molestias y consecuencias y/o efectos	SI
4	Las respuestas que el personal de salud le brinda son claras y oportunas	SI
5	Recibió la atención o servicio como usted lo esperaba	SI
6	En caso de ser negativo, cuanto tiempo espero	MENOS DE 1 HORA
7	Recibió todos los servicios por los que acudio en esta ocasión	SI
8	Le han pedido alguna aportación monetaria por la atención integral incluido los ans	No
9	En caso de ser la respuesta afirmativa, si usted no puede dar la aportación monetaria, siempre recibe la atención integral incluyendo los ans	NA
10	Cuando necesita medicamentos para i.o. estos están disponibles	SI
11	Tiene el centro de salud material educativo y condones	SI
12	El consultorio o lugar donde le atendieron es comodo o agradable	SI
13	El lugar donde le atendieron cuenta con privacidad	SI
14	Esta usted satisfecho con el servicio que se le dio hoy	SI
15	Califique según escala de 1 a 5 (1. malo, 2. regular, 3. bueno, 4. muy bueno, 5. excelente)	EXCELENTE
16	Califique según escala de 1 a 5, la calidad de atención del trámite realizado (1. malo, 2. regular, 3. bueno, 4. muy bueno, 5. excelente)	EXCELENTE
17	Se le brindo la información necesaria para la utilización de los servicios y trámites a realizar	SI

Table 21. No. of hospitals participating per country. 2011-2012

Country	Hospital count
Belize	8
Costa Rica	5
El Salvador	18
Guatemala	9
Honduras	38
Nicaragua	21
Panamá	13
Total	112

VIII. Results by country and by hospital

Country:

Belize.

summary information:

Collection of data in 8 hospitals in 2012.

25.0% establishments in category of good, very good and excellent.

37.5% of establishments acceptable category.

Pais	Belize	Belize	Belize	Belize	Belize	Belize	Belize	Belize
Hospital	Cleopatra	Dangriga Hospital	Hospital Corozal	Hospital de Belmopan	Hospital Regional del Norte	Hospital San Ignacio	KHMH	Orange Walk
Hospitales	1	2	3	4	5	6	7	8
Variables								
1	50.0%	100.0%	92.3%	100.0%	100.0%	76.7%	93.2%	82.4%
2	100.0%	100.0%	76.9%	40.0%	100.0%	73.3%	84.6%	82.4%
3	50.0%	100.0%	92.3%	60.0%	96.8%	83.3%	84.2%	88.2%
4	100.0%	100.0%	92.3%	60.0%	100.0%	53.3%	90.3%	94.1%
5	100.0%	100.0%	92.3%	60.0%	100.0%	53.3%	87.8%	82.4%
6	50.0%	0.0%	30.8%	0.0%	29.0%	13.3%	11.8%	35.3%
7	100.0%	100.0%	92.3%	40.0%	100.0%	66.7%	90.0%	94.1%
8	100.0%	100.0%	100.0%	100.0%	100.0%	93.3%	87.5%	100.0%
9	0.0%	0.0%	0.0%	0.0%	0.0%	6.7%	12.2%	0.0%
10	50.0%	100.0%	69.2%	40.0%	100.0%	43.3%	84.2%	47.1%
11	50.0%	100.0%	84.6%	40.0%	98.4%	53.3%	83.2%	100.0%
12	50.0%	100.0%	92.3%	80.0%	100.0%	26.7%	92.8%	88.2%
13	50.0%	100.0%	100.0%	80.0%	100.0%	30.0%	84.9%	94.1%
14	100.0%	100.0%	92.3%	80.0%	100.0%	56.7%	93.2%	88.2%
15	50.0%	100.0%	23.1%	0.0%	29.0%	0.0%	29.4%	17.6%
16	50.0%	100.0%	15.4%	0.0%	29.0%	0.0%	31.5%	11.8%
17	50.0%	100.0%	92.3%	80.0%	100.0%	90.0%	95.7%	70.6%
Total	1100.0%	1500.0%	1238.5%	860.0%	1382.3%	820.0%	1236.6%	1176.5%
Promedio	68.8%	100.0%	77.4%	66.2%	86.4%	54.7%	72.7%	73.5%

valoración de las 17 variables

✓	0.8681	1
✓	0.8215	2
✓	0.8186	3
✓	0.8626	4
✓	0.8448	5
✗	0.2838	6
✓	0.8538	7
✓	0.9760	8
✗	0.0943	9
⚠	0.6673	10
⚠	0.7619	11
✓	0.7876	12
✓	0.7988	13
✓	0.8880	14
⚠	0.4152	15
⚠	0.3962	16
✓	0.8482	17

Country:

Costa Rica.

Summary information:

. Uprising in five hospitals during 2012.

0.0% of establishments in search of good, very good and excellent.

80.0% of establishments acceptable category.

País	Costa Rica	Costa Rica	Costa Rica	Costa Rica	Costa Rica			
Hospital	Hospital Calderon Guardia	Hospital Mexico	Hospital Monseñor Sanabria	Hospital San Juan de Dios	Hospital Tony Facio			
Hospitales	1	2	3	4	5			
Variables								
1	60.2%	77.2%	94.1%	64.3%	72.2%	✓	0.7361	1
2	93.9%	100.0%	100.0%	94.3%	88.9%	✓	0.9541	2
3	81.6%	89.1%	96.1%	79.3%	83.3%	✓	0.8589	3
4	84.7%	89.1%	96.1%	87.1%	83.3%	✓	0.8807	4
5	81.6%	97.0%	94.1%	86.4%	83.3%	✓	0.8851	5
6	28.6%	18.8%	35.3%	27.1%	50.0%	✗	0.3196	6
7	95.9%	98.0%	96.1%	97.1%	100.0%	✓	0.9743	7
8	100.0%	98.0%	96.1%	97.9%	100.0%	✓	0.9839	8
9	0.0%	2.0%	3.9%	2.1%	100.0%	✗	0.2701	9
10	94.9%	91.1%	96.1%	92.1%	94.4%	✓	0.9373	10
11	89.8%	87.1%	84.3%	86.4%	88.9%	✓	0.8731	11
12	91.8%	95.0%	66.7%	62.1%	77.8%	✓	0.7869	12
13	77.6%	92.1%	62.7%	39.3%	72.2%	⚠	0.6878	13
14	94.9%	97.0%	98.0%	93.6%	88.9%	✓	0.9449	14
15	16.3%	14.9%	37.3%	12.1%	22.2%	✗	0.2056	15
16	17.3%	15.8%	43.1%	9.3%	16.7%	✗	0.2046	16
17	92.9%	96.0%	96.1%	94.3%	94.4%	✓	0.9474	17
Total	1202.0%	1258.4%	1296.1%	1125.0%	1316.7%			
Promedio	75.1%	74.0%	76.2%	66.2%	77.5%			

Country:

El Salvador.

Summary Information:

Data collection in 18 hospitals during 2011. **44.4 %** establishments were rated in category of good, very good and excellent.

55.6 % of establishments in acceptable category.

País	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador
Hospital	AHU	CHA	COJ	GOT	LU	RO	SA	SB	SENS
Hospitales	1	2	3	4	5	6	7	8	9
Variables	1	2	3	4	5	6	7	8	9
1	93.2%	100.0%	97.7%	81.8%	86.8%	85.3%	96.0%	82.9%	71.4%
2	100.0%	100.0%	100.0%	81.8%	97.4%	100.0%	100.0%	88.6%	100.0%
3	88.6%	100.0%	100.0%	95.5%	92.1%	100.0%	100.0%	80.0%	92.9%
4	97.7%	100.0%	100.0%	86.4%	100.0%	97.1%	98.0%	94.3%	100.0%
5	100.0%	100.0%	97.7%	90.9%	97.4%	97.1%	98.0%	88.6%	100.0%
6	11.4%	4.0%	11.6%	9.1%	5.3%	5.9%	6.0%	8.6%	0.0%
7	100.0%	100.0%	100.0%	95.5%	94.7%	100.0%	100.0%	94.3%	100.0%
8	100.0%	100.0%	100.0%	95.5%	97.4%	97.1%	98.0%	100.0%	100.0%
9	2.3%	0.0%	0.0%	0.0%	0.0%	2.9%	0.0%	2.9%	0.0%
10	61.4%	76.0%	72.1%	63.6%	65.8%	85.3%	68.0%	65.7%	71.4%
11	90.9%	92.0%	72.1%	86.4%	100.0%	79.4%	80.0%	94.3%	92.9%
12	100.0%	100.0%	97.7%	59.1%	44.7%	97.1%	100.0%	85.7%	100.0%
13	95.5%	100.0%	95.3%	31.8%	71.1%	97.1%	96.0%	85.7%	92.9%
14	100.0%	100.0%	100.0%	95.5%	100.0%	100.0%	98.0%	91.4%	100.0%
15	47.7%	48.0%	53.5%	4.5%	44.7%	32.4%	28.0%	51.4%	64.3%
16	34.1%	24.0%	46.5%	0.0%	31.6%	20.6%	22.0%	31.4%	71.4%
17	88.6%	100.0%	97.7%	81.8%	97.4%	94.1%	94.0%	91.4%	92.9%
Total	1311.4%	1344.0%	1341.9%	1059.1%	1226.3%	1291.2%	1282.0%	1237.1%	1350.0%
Promedio	77.1%	84.0%	83.9%	70.6%	76.6%	76.0%	80.1%	72.8%	90.0%
El Salvador	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador	El Salvador
SL	SM	SO	SR	SV	SY	USU	ZAC	ZAT	
10	11	12	13	14	15	16	17	18	
82.8%	85.1%	100.0%	91.7%	100.0%	87.8%	91.7%	100.0%	96.3%	
100.0%	100.0%	97.3%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
86.2%	93.6%	97.3%	91.7%	100.0%	95.9%	91.7%	97.1%	96.3%	
100.0%	97.9%	100.0%	91.7%	97.8%	98.0%	100.0%	100.0%	88.9%	
96.6%	89.4%	94.6%	94.4%	100.0%	98.0%	100.0%	98.6%	100.0%	
0.0%	8.5%	5.4%	2.8%	2.2%	4.1%	16.7%	5.7%	3.7%	
100.0%	97.9%	100.0%	94.4%	100.0%	98.0%	100.0%	100.0%	100.0%	
100.0%	93.6%	100.0%	100.0%	93.5%	98.0%	100.0%	100.0%	92.6%	
6.9%	2.1%	0.0%	2.8%	2.2%	2.0%	8.3%	0.0%	0.0%	
86.2%	68.1%	94.6%	80.6%	76.1%	79.6%	83.3%	80.0%	88.9%	
89.7%	91.5%	94.6%	88.9%	89.1%	81.6%	91.7%	87.1%	100.0%	
100.0%	95.7%	100.0%	97.2%	100.0%	98.0%	75.0%	98.6%	92.6%	
100.0%	91.5%	100.0%	94.4%	97.8%	91.8%	58.3%	95.7%	100.0%	
100.0%	87.2%	100.0%	94.4%	100.0%	98.0%	100.0%	100.0%	96.3%	
55.2%	48.9%	56.8%	38.9%	43.5%	57.1%	58.3%	64.3%	33.3%	
48.3%	48.9%	40.5%	25.0%	30.4%	42.9%	50.0%	54.3%	18.5%	
93.1%	93.6%	94.6%	100.0%	100.0%	93.9%	100.0%	98.6%	100.0%	
1344.8%	1293.6%	1375.7%	1288.9%	1332.6%	1324.5%	1325.0%	1380.0%	1307.4%	
84.1%	76.1%	86.0%	75.8%	78.4%	77.9%	77.9%	86.3%	81.7%	

|

Range	Category	Hospital	Percentage	valoración de las 17 variables		
<59%		0	0,0%	✓	0.9057	1
60% -69%	Suficiente	0	0,0%	✓	0.9806	2
70% - 79%	Aceptable	10	55,6%	✓	0.9438	3
80% - 89%	Bueno	7	38,9%	✓	0.9709	4
90% -99%	Muy Bueno	1	5,6%	✓	0.9673	5
100%	Excelente	0	0,0%	✗	0.0693	6
				✓	0.9860	7
				✓	0.9808	8
				✗	0.0360	9
				✓	0.7593	10
				✓	0.8901	11
				✓	0.9119	12
				✓	0.8861	13
				✓	0.9782	14
				⚠	0.4616	15
				⚠	0.3768	16
				✓	0.9509	17
Percentage established as (Good, very good and excelente)		18	44,4%			

Country:
Guatemala.

Summary Information:

Information gotten from 9 hospitals during 2012.

77.8% of the establishments that range from good, very good and excellent.

11.1 % of the establishments range as acceptable.

Pais	Guatemala	Guatemala	Guatemala	Guatemala	Guatemala	Guatemala	Guatemala	Guatemala	Guatemala
Hospital	Clinica 1	Clinica ICA	Hospital de la Amistad Japón-Guatemala	Hospital Nacional Regional Escuintla	Hospital Pedro de Betancourt Antigua Guatemala	Hospital Pedro de Betancourt, Sacatepequez	Hospital Regional Zacapa	UAI Clínica 12	Unidad de Atención Integral
Hospitales	1	2	3	4	5	6	7	8	9
1	97.5%	99.2%	54.4%	90.0%	100.0%	87.5%	91.0%	99.3%	100.0%
2	100.0%	98.4%	99.2%	99.5%	100.0%	100.0%	100.0%	99.3%	100.0%
3	97.5%	99.2%	68.8%	97.0%	100.0%	87.5%	97.8%	98.3%	100.0%
4	98.8%	99.2%	76.4%	100.0%	100.0%	100.0%	100.0%	99.0%	100.0%
5	98.8%	100.0%	82.7%	97.5%	100.0%	87.5%	97.8%	98.6%	100.0%
6	52.5%	54.8%	4.2%	10.5%	100.0%	0.0%	2.2%	1.0%	10.0%
7	97.5%	99.2%	81.0%	91.0%	100.0%	100.0%	100.0%	98.3%	100.0%
8	98.8%	97.6%	100.0%	99.5%	75.0%	100.0%	100.0%	100.0%	100.0%
9	1.3%	2.4%	0.0%	0.5%	25.0%	0.0%	0.0%	0.0%	0.0%
10	82.5%	89.5%	57.8%	59.0%	0.0%	37.5%	86.5%	79.9%	45.0%
11	95.0%	98.4%	76.4%	75.5%	100.0%	75.0%	96.6%	97.6%	95.0%
12	98.8%	99.2%	93.7%	98.0%	100.0%	100.0%	100.0%	99.0%	100.0%
13	100.0%	100.0%	77.2%	97.5%	100.0%	87.5%	100.0%	97.9%	100.0%
14	100.0%	100.0%	70.9%	95.0%	100.0%	100.0%	100.0%	99.0%	100.0%
15	56.3%	70.2%	19.4%	19.0%	100.0%	37.5%	29.2%	22.9%	50.0%
16	17.5%	35.5%	13.5%	6.5%	100.0%	0.0%	23.6%	22.2%	55.0%
17	98.8%	98.4%	73.8%	69.5%	100.0%	100.0%	98.9%	99.3%	100.0%
Total	1391.3%	1441.1%	1049.4%	1205.5%	1500.0%	1200.0%	1323.6%	1311.5%	1355.0%
Promedio	81.8%	84.8%	65.6%	70.9%	93.8%	85.7%	82.7%	82.0%	84.7%

valoración de las 17 variables

✓	0.9099	1
✓	0.9959	2
✓	0.9400	3
✓	0.9703	4
✓	0.9587	5
✗	0.2942	6
✓	0.9633	7
✓	0.9676	8
✗	0.0729	9
⚠	0.6721	10
✓	0.8994	11
✓	0.9873	12
✓	0.9557	13
✓	0.9609	14
⚠	0.4494	15
✗	0.3423	16
✓	0.9318	17

Rango	Categoría	Hospital	Porcentaje
<59%	Insuficiente	0	0,0%
60% -69%	Suficiente	1	11,1%
70% - 79%	Aceptable	1	11,1%
80% - 89%	Bueno	6	66,7%
90% -99%	Muy Bueno	1	11,1%
100%	Excelente	0	0,0%

Percentage established as favorable (good, very good and excellent)

9 77,8%

Country:

Honduras.

Summary Information:

Interviews were done in 38 hospitals during 2011.

52.6% of the establishments rated as good, very good, and excellent

28.9% of the establishments rated acceptable.

Pais	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras
Hospital	CAI	CAS	CEC	CHO	CSC	HATL	HCR	HDO	HDP
Hospitales	1	2	3	4	5	6	7	8	9
Variables									
1	100.0%	88.9%	75.0%	100.0%	100.0%	86.5%	42.3%	25.0%	0.0%
2	100.0%	100.0%	91.7%	100.0%	100.0%	98.1%	73.1%	100.0%	0.0%
3	100.0%	88.9%	100.0%	100.0%	100.0%	86.5%	79.8%	100.0%	0.0%
4	100.0%	100.0%	91.7%	96.7%	100.0%	96.2%	90.4%	100.0%	0.0%
5	100.0%	100.0%	100.0%	93.3%	100.0%	84.6%	90.4%	100.0%	0.0%
6	16.7%	11.1%	8.3%	23.3%	16.7%	26.9%	9.6%	100.0%	0.0%
7	100.0%	100.0%	100.0%	100.0%	100.0%	92.3%	98.1%	100.0%	0.0%
8	50.0%	0.0%	0.0%	66.7%	100.0%	30.8%	26.0%	25.0%	0.0%
9	66.7%	100.0%	100.0%	33.3%	0.0%	76.9%	76.9%	50.0%	100.0%
10	83.3%	77.8%	83.3%	90.0%	83.3%	73.1%	24.0%	100.0%	0.0%
11	66.7%	88.9%	100.0%	86.7%	100.0%	100.0%	93.3%	100.0%	100.0%
12	100.0%	66.7%	91.7%	90.0%	100.0%	94.2%	97.1%	100.0%	100.0%
13	83.3%	77.8%	83.3%	90.0%	100.0%	92.3%	93.3%	0.0%	100.0%
14	83.3%	100.0%	91.7%	100.0%	100.0%	86.5%	91.3%	100.0%	100.0%
15	0.0%	11.1%	58.3%	10.0%	83.3%	53.8%	39.4%	100.0%	0.0%
16	0.0%	11.1%	50.0%	16.7%	66.7%	51.9%	35.6%	100.0%	0.0%
17	100.0%	88.9%	91.7%	96.7%	100.0%	80.8%	88.5%	100.0%	100.0%
Total	1250.0%	1211.1%	1316.7%	1293.3%	1450.0%	1311.5%	1149.0%	1400.0%	600.0%
Promedio	83.3%	75.7%	82.3%	76.1%	90.6%	77.1%	67.6%	87.5%	100.0%

Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras
HDT	HE	HEP	HET	HGA	HGH	HMC	HMCR	HMR	HO
10	11	12	13	14	15	16	17	18	19
100.0%	93.2%	73.3%	100.0%	100.0%	58.3%	24.7%	0.0%	80.0%	66.7%
100.0%	96.6%	83.3%	100.0%	100.0%	100.0%	68.8%	50.0%	100.0%	100.0%
85.7%	94.9%	83.3%	50.0%	100.0%	100.0%	85.7%	50.0%	80.0%	100.0%
100.0%	89.8%	93.3%	100.0%	100.0%	100.0%	85.7%	100.0%	100.0%	100.0%
100.0%	89.8%	86.7%	100.0%	100.0%	100.0%	92.2%	50.0%	100.0%	100.0%
0.0%	10.2%	20.0%	100.0%	0.0%	1.3%	0.0%	40.0%	16.7%	0.0%
85.7%	89.8%	96.7%	75.0%	100.0%	91.7%	96.1%	100.0%	100.0%	100.0%
42.9%	11.9%	20.0%	50.0%	100.0%	91.7%	13.0%	50.0%	20.0%	33.3%
57.1%	86.4%	80.0%	50.0%	0.0%	8.3%	72.7%	50.0%	100.0%	66.7%
42.9%	69.5%	63.3%	75.0%	100.0%	58.3%	41.6%	0.0%	40.0%	66.7%
85.7%	72.9%	90.0%	75.0%	100.0%	100.0%	90.9%	50.0%	100.0%	66.7%
100.0%	88.1%	90.0%	100.0%	100.0%	100.0%	98.7%	50.0%	100.0%	100.0%
85.7%	83.1%	83.3%	75.0%	100.0%	66.7%	87.0%	50.0%	100.0%	16.7%
85.7%	91.5%	100.0%	75.0%	100.0%	100.0%	90.9%	100.0%	100.0%	100.0%
42.9%	22.0%	63.3%	25.0%	100.0%	100.0%	20.8%	100.0%	60.0%	100.0%
57.1%	16.9%	60.0%	25.0%	100.0%	58.3%	16.9%	100.0%	60.0%	83.3%
85.7%	94.9%	83.3%	50.0%	100.0%	100.0%	88.3%	0.0%	100.0%	100.0%
1257.1%	1201.7%	1270.0%	1225.0%	1500.0%	1334.6%	1074.0%	940.0%	1356.7%	1300.0%
78.6%	70.7%	74.7%	72.1%	100.0%	78.5%	67.1%	67.1%	79.8%	81.3%

Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras
HOR	HPC	HRC	HSB	HSC	HSF	HSL	HSMO	HSP	HTI
20	21	22	23	24	25	26	27	28	29
100.0%	15.0%	25.0%	80.0%	100.0%	80.0%	100.0%	87.5%	94.7%	100.0%
100.0%	20.0%	25.0%	100.0%	100.0%	100.0%	100.0%	100.0%	94.7%	100.0%
100.0%	85.0%	50.0%	100.0%	100.0%	100.0%	78.6%	100.0%	78.9%	100.0%
100.0%	95.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	94.7%	100.0%
100.0%	95.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	78.9%	98.0%
65.0%	25.0%	0.0%	0.0%	0.0%	0.0%	0.0%	10.5%	10.2%	0.0%
100.0%	100.0%	100.0%	90.0%	100.0%	100.0%	92.9%	100.0%	84.2%	95.9%
100.0%	10.0%	25.0%	100.0%	100.0%	100.0%	85.7%	100.0%	31.6%	30.6%
50.0%	90.0%	75.0%	0.0%	0.0%	0.0%	14.3%	0.0%	94.7%	77.6%
50.0%	50.0%	75.0%	40.0%	100.0%	90.0%	85.7%	87.5%	57.9%	91.8%
50.0%	95.0%	100.0%	90.0%	100.0%	100.0%	100.0%	100.0%	100.0%	93.9%
50.0%	95.0%	75.0%	40.0%	100.0%	100.0%	92.9%	100.0%	100.0%	98.0%
100.0%	95.0%	75.0%	80.0%	100.0%	60.0%	64.3%	100.0%	94.7%	95.9%
100.0%	100.0%	100.0%	100.0%	100.0%	90.0%	92.9%	87.5%	84.2%	95.9%
0.0%	45.0%	0.0%	70.0%	0.0%	50.0%	21.4%	100.0%	42.1%	71.4%
0.0%	35.0%	0.0%	50.0%	50.0%	30.0%	14.3%	100.0%	42.1%	69.4%
100.0%	75.0%	50.0%	100.0%	100.0%	100.0%	92.9%	100.0%	84.2%	93.9%
1265.0%	1125.0%	975.0%	1240.0%	1350.0%	1300.0%	1235.7%	1473.0%	1268.1%	1412.2%
84.3%	66.2%	69.6%	82.7%	96.4%	86.7%	77.2%	92.1%	74.6%	88.3%

Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras	Honduras
IHSP	IHSS	IHSST	MPB	PT	SM	TORAX	UDSM	USM
30	31	32	33	34	35	36	37	38
50.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	0.0%
100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
50.0%	100.0%	100.0%	90.9%	100.0%	100.0%	92.3%	100.0%	0.0%
50.0%	100.0%	100.0%	90.9%	100.0%	100.0%	100.0%	0.0%	100.0%
50.0%	100.0%	83.3%	81.8%	100.0%	100.0%	100.0%	0.0%	100.0%
33.3%	16.7%	9.1%	0.0%	0.0%	7.7%	0.0%	0.0%	0.0%
100.0%	100.0%	100.0%	100.0%	66.7%	100.0%	100.0%	0.0%	100.0%
100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	0.0%	100.0%	0.0%
0.0%	33.3%	16.7%	0.0%	0.0%	0.0%	100.0%	100.0%	0.0%
75.0%	33.3%	50.0%	100.0%	100.0%	100.0%	53.8%	0.0%	100.0%
75.0%	50.0%	50.0%	90.9%	66.7%	100.0%	38.5%	100.0%	100.0%
75.0%	100.0%	50.0%	90.9%	100.0%	100.0%	100.0%	100.0%	100.0%
100.0%	100.0%	16.7%	81.8%	100.0%	100.0%	92.3%	100.0%	0.0%
50.0%	100.0%	100.0%	90.9%	100.0%	100.0%	100.0%	0.0%	100.0%
0.0%	66.7%	16.7%	63.6%	33.3%	0.0%	7.7%	0.0%	100.0%
50.0%	0.0%	16.7%	54.5%	33.3%	0.0%	0.0%	0.0%	100.0%
50.0%	100.0%	100.0%	90.9%	100.0%	100.0%	92.3%	0.0%	100.0%
1008.3%	1300.0%	1109.1%	1327.3%	1300.0%	1307.7%	1176.9%	800.0%	1100.0%
67.2%	81.3%	65.2%	88.5%	86.7%	93.4%	84.1%	100.0%	100.0%

valoración de las 17 variables

✓	0.8132	1
✓	0.9193	2
✓	0.8918	3
✓	0.9651	4
✓	0.9372	5
✗	0.2629	6
✓	0.9597	7
✓	0.6406	8
⚠	0.6766	9
⚠	0.7178	10
✓	0.8596	11
✓	0.9035	12
✓	0.8398	13
✓	0.9425	14
⚠	0.5593	15
⚠	0.5183	16
✓	0.9105	17

Range	Category	Hospital	Percentage
<59%	Insufficient	0	0,0%
60% -69%	Enough	7	18,4%
70% - 79%	Acceptable	11	28,9%
80% - 89%	Good	12	31,6%
90% -99%	Very Good	4	10,5%
100%	Excellent	4	10,5%
Percentage of favorable establishments (Good, Very Good and Excellent)		38	52,6%

Country:
Nicaragua.

Summary Information:

Information was received from 21 hospitals during 2011.

71.4% of the health centers range from good, very good, and excellent.

9.5% of the establishments were rated as acceptable.

Pais	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua
Hospital	BOA	CB	GGL	HA	HACEX	HBC	HC	HE	HES
Hospitales	1	2	3	4	5	6	7	8	9
1	100.0%	96.7%	75.0%	100.0%	100.0%	100.0%	100.0%	70.6%	100.0%
2	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	70.6%	100.0%
3	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	88.9%
4	100.0%	96.7%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
5	100.0%	100.0%	100.0%	100.0%	100.0%	75.0%	100.0%	100.0%	100.0%
6	36.7%	0.0%	62.7%	100.0%	0.0%	0.0%	0.0%	11.1%	42.9%
7	100.0%	96.7%	100.0%	98.7%	100.0%	87.5%	100.0%	100.0%	100.0%
8	100.0%	86.7%	75.0%	98.7%	100.0%	100.0%	100.0%	88.2%	100.0%
9	88.9%	93.3%	0.0%	52.0%	0.0%	0.0%	0.0%	11.8%	11.1%
10	66.7%	100.0%	100.0%	97.3%	100.0%	12.5%	0.0%	52.9%	22.2%
11	100.0%	96.7%	100.0%	97.3%	100.0%	87.5%	0.0%	100.0%	77.8%
12	100.0%	100.0%	100.0%	10.7%	0.0%	100.0%	0.0%	94.1%	100.0%
13	100.0%	93.3%	100.0%	8.0%	0.0%	87.5%	0.0%	94.1%	100.0%
14	100.0%	90.0%	100.0%	96.0%	100.0%	100.0%	100.0%	94.1%	100.0%
15	11.1%	0.0%	50.0%	0.0%	0.0%	50.0%	0.0%	82.4%	0.0%
16	11.1%	3.3%	50.0%	0.0%	0.0%	37.5%	0.0%	70.6%	100.0%
17	100.0%	100.0%	75.0%	97.3%	100.0%	75.0%	100.0%	64.7%	0.0%
Total	1414.4%	1353.3%	1387.7%	1256.0%	1100.0%	1212.5%	900.0%	1305.2%	1242.9%
Promedio	83.2%	90.2%	86.7%	83.7%	100.0%	80.8%	100.0%	76.8%	82.9%

Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua	Nicaragua
HESB	HESBL	HHA	HHS	HJD	HMG	HOR	HRC	HSCEX	HSJD
10	11	12	13	14	15	16	17	18	19
100.0%	95.5%	83.3%	82.4%	100.0%	100.0%	98.0%	96.2%	100.0%	100.0%
85.7%	95.5%	100.0%	70.6%	100.0%	100.0%	97.3%	95.6%	100.0%	94.4%
100.0%	100.0%	33.3%	58.8%	100.0%	100.0%	95.3%	90.1%	100.0%	100.0%
100.0%	100.0%	66.7%	94.1%	100.0%	100.0%	96.0%	95.1%	100.0%	88.9%
100.0%	95.5%	83.3%	100.0%	100.0%	100.0%	94.0%	95.1%	100.0%	72.2%
4.5%	0.0%	52.9%	0.0%	0.0%	34.0%	17.6%	0.0%	0.0%	0.0%
100.0%	100.0%	83.3%	94.1%	0.0%	100.0%	96.7%	97.8%	0.0%	72.2%
100.0%	90.9%	100.0%	94.1%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
0.0%	0.0%	0.0%	5.9%	0.0%	0.0%	41.3%	1.6%	0.0%	0.0%
42.9%	36.4%	16.7%	76.5%	0.0%	100.0%	37.3%	65.4%	100.0%	38.9%
85.7%	81.8%	83.3%	76.5%	0.0%	100.0%	44.0%	78.6%	0.0%	11.1%
100.0%	100.0%	100.0%	100.0%	0.0%	100.0%	96.0%	98.9%	0.0%	33.3%
100.0%	95.5%	16.7%	35.3%	0.0%	100.0%	80.7%	95.6%	0.0%	16.7%
85.7%	100.0%	66.7%	88.2%	0.0%	100.0%	72.0%	87.9%	0.0%	5.6%
28.6%	31.8%	33.3%	17.6%	0.0%	0.0%	4.0%	34.1%	0.0%	11.1%
0.0%	0.0%	0.0%	11.8%	0.0%	0.0%	4.7%	34.1%	0.0%	5.6%
0.0%	13.6%	16.7%	52.9%	0.0%	100.0%	98.7%	93.4%	100.0%	88.9%
1133.1%	1136.4%	936.3%	1058.8%	600.0%	1334.0%	1173.6%	1259.3%	800.0%	838.9%
80.9%	81.2%	62.4%	66.2%	100.0%	95.3%	69.0%	78.7%	100.0%	55.9%

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Nicaragua		Nicaragua				
HSUD		KSJD				
20		21		valoración de las 17 variable		
100.0%		100.0%		✓	0.9512	1
100.0%		100.0%		✓	0.9570	2
100.0%		100.0%		✓	0.9364	3
100.0%		0.0%		✓	0.9687	4
100.0%		0.0%		✓	0.9575	5
0.0%		10.3%		✗	0.3726	6
0.0%		100.0%		✓	0.9594	7
100.0%		100.0%		✓	0.9684	8
0.0%		0.0%		✗	0.3825	9
0.0%		0.0%		⚠	0.6268	10
0.0%		0.0%		✓	0.8252	11
0.0%		0.0%		✓	0.8887	12
0.0%		0.0%		⚠	0.7489	13
0.0%		0.0%		✓	0.8742	14
0.0%		0.0%		✗	0.3218	15
0.0%		0.0%		✗	0.3286	16
0.0%		100.0%		✓	0.8096	17
600.0%		610.3%				
100.0%		87.2%				

Range	Category	Hospital	Percentage
<59%	Insuficiente	1	4,8%
60% -69%	Suficiente	3	14,3%
70% - 79%	Aceptable	2	9,5%
80% - 89%	Bueno	8	38,1%
90% -99%	Muy Bueno	2	9,5%
100%	Excelente	5	23,8%
Percentage of favorable settlements (Good, Very Good and Excellent)		21	71,4%

Country: Panama.

Summary Information:

Data was collected from 13 hospitals during 2011.

53.8% of the establishments were rated as good, very good, and excellent.

46.2% of the establishments were rated as acceptable.

País	Panamá	Panamá	Panamá	Panamá	Panamá	Panamá	Panamá	Panamá	Panamá
Hospital	CHI	CHM	HAM	HAT	HCC	HLF	HM	HMG	HST
Hospitales	1	2	3	4	5	6	7	8	9
Variables	1	2	3	4	5	6	7	8	9
1	92.3%	98.0%	100.0%	88.9%	100.0%	100.0%	100.0%	100.0%	88.2%
2	97.4%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.6%	97.4%
3	92.3%	95.1%	100.0%	77.8%	92.9%	95.0%	100.0%	92.0%	92.8%
4	94.9%	97.1%	100.0%	88.9%	100.0%	100.0%	100.0%	99.1%	96.1%
5	100.0%	97.1%	100.0%	88.9%	92.9%	100.0%	100.0%	96.9%	97.4%
6	34.3%	50.0%	0.0%	11.1%	14.3%	20.0%	0.0%	41.3%	20.3%
7	97.4%	94.1%	100.0%	100.0%	100.0%	100.0%	100.0%	96.0%	93.5%
8	92.3%	97.1%	100.0%	88.9%	100.0%	100.0%	100.0%	96.4%	96.1%
9	7.7%	2.0%	0.0%	55.6%	7.1%	5.0%	0.0%	3.1%	3.3%
10	69.2%	64.7%	100.0%	66.7%	50.0%	100.0%	100.0%	68.4%	64.7%
11	82.1%	62.7%	100.0%	100.0%	100.0%	100.0%	100.0%	98.2%	85.6%
12	97.4%	93.1%	100.0%	100.0%	57.1%	100.0%	100.0%	80.9%	98.7%
13	97.4%	80.4%	50.0%	88.9%	50.0%	55.0%	0.0%	70.2%	98.7%
14	89.7%	91.2%	100.0%	88.9%	100.0%	100.0%	100.0%	73.3%	94.1%
15	28.2%	16.7%	100.0%	33.3%	35.7%	45.0%	0.0%	22.7%	17.0%
16	25.6%	7.8%	100.0%	22.2%	35.7%	40.0%	0.0%	20.4%	16.3%
17	94.9%	93.1%	50.0%	77.8%	85.7%	100.0%	100.0%	97.8%	98.0%
Total	1293.3%	1240.2%	1400.0%	1277.8%	1221.4%	1360.0%	1200.0%	1256.4%	1258.2%
Promedio	76.1%	73.0%	93.3%	75.2%	71.8%	80.0%	100.0%	73.9%	74.0%

Panamá	Panamá	Panamá	Panamá
HSTCE	KY	NB	NG
10	11	12	13
100.0%	75.0%	100.0%	100.0%
100.0%	100.0%	100.0%	100.0%
100.0%	95.0%	100.0%	100.0%
100.0%	100.0%	100.0%	100.0%
100.0%	100.0%	100.0%	100.0%
0.0%	0.0%	0.0%	0.0%
100.0%	100.0%	83.3%	100.0%
100.0%	95.0%	100.0%	100.0%
0.0%	0.0%	0.0%	0.0%
100.0%	85.0%	50.0%	0.0%
100.0%	100.0%	83.3%	100.0%
100.0%	90.0%	100.0%	100.0%
100.0%	90.0%	83.3%	100.0%
100.0%	95.0%	100.0%	0.0%
0.0%	10.0%	0.0%	0.0%
0.0%	15.0%	33.3%	0.0%
100.0%	100.0%	100.0%	100.0%
1300.0%	1250.0%	1233.3%	1100.0%
100.0%	83.3%	88.1%	100.0%

valoración de las 17 variables

✓	0.9557	1
✓	0.9957	2
✓	0.9483	3
✓	0.9815	4
✓	0.9793	5
✗	0.2733	6
✓	0.9726	7
✓	0.9737	8
✗	0.1196	9
✗	0.7656	10
✓	0.9323	11
✓	0.9364	12
✓	0.8033	13
✓	0.9435	14
✗	0.3429	15
✗	0.3165	16
✓	0.9210	17

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Range	Category	Hospital	Percentage
<59%	Insuficiente	0	0,0%
60% -69%	Suficiente	0	0,0%
70% - 79%	Aceptable	6	46,2%
80% - 89%	Bueno	3	23,1%
90% -99%	Muy Bueno	1	7,7%
100%	Excelente	3	23,1%
Percentage of favorable health centers (Good, Very Good and Excellent)		13	53,8%

IX. Discussion

At the level of the Central American Region, conducting assessment processes of quality comprehensive care, that provide health services to people with HIV-AIDS, represents a major breakthrough, as it provides fundamental elements with primary sources of statistical data that can be used for decision making and continuous improvement of strategies, which help in the improvement and update of the health system; this has gained importance in recent years as an axis of the reform process for the health sector in each of the countries of the region.

The initial experience of the evaluation process was conducted in Honduras, Nicaragua, El Salvador and Panama, this marked the starting point for countries like Belize, Guatemala and Costa Rica, to undertake the evaluation of the quality of care, where it is observed that the availability of a methodological tool, facilitates harmonization of results, that can count on the regional overview of what the quality of care the health services provide to people with HIV-AIDS.

When disaggregating the variables, it is note that for example, at the regional level 86.4% of health personnel introduce themselves to the user who go for health service, the situation has improved, but remains a challenge that relate to complying with quality standards.

The waiting time is also one of the standards of quality that is continuously observed in health systems, as in the case of care for people with HIV, only 29.2% waited about 1 hour, 70.8% waited between 1 and 3 hours to get attended and receive care, which leads to analyze whether it is a result of scarce human resources or the over-saturation of the appointments scheduled.

In terms of delivery of care and anti retroviral medication 80.4% of the users responded that they receive the services and the medication for free, as well as for the availability of medications for Opportunistic Infections (OIs), 71.4% responded that they do have access to treatment.

In regional terms, it is observed that in terms of average, 52.7% of participating health facilities; provide a qualified health care that ranges from good, very good and excellent, this being 33.0% rated as acceptable.

FROM THE PERSPECTIVE OF THE PROVIDERS

It is important to note that the general staff has been through the processes of bio-security measures, there is a high degree of job satisfaction, however it is not expressed in terms of recognition to their work, and their sense of belonging to the team is limited. Health staff in charge of comprehensive care to people with HIV-AIDS, recommend that while health authorities, made efforts to improve the capacity of the personnel, it is also necessary to improve physical facilities in order to ensure confidentiality and privacy, ensuring the supply of drugs, and reagents for viral load and CD4, which involves strengthening the planning process of medicines and medical supplies, for it to be consistent with the needs of each facility.

It also requires systematic review of the allocation of working hours for doctors, nurse, psychologist, among others, depending on the number of patients attended per hour currently considering that health professionals, sometimes attend up to 20 patients in 2-4 hours, and in terms of comprehensive care for HIV-AIDS, because of the complexity of health issues, it requires more time to attend to each patient's.

X. Limitations and lessons learned

- One of the limitations that the three participating countries expressed was the bureaucratic process to obtain approval to conduct the study, Guatemala only after overcoming a series of obstacles won approval, the rest did the study having as support the agreement signed by the Ministers of Health, in June COMISCA 2012
- **Planning:** even when all permits and requirements are already gotten from country; this does not implies that the development of the project will be easy. Always have more than one option, such as hiring additional personnel; the loss of support of the institutions that in one way or another have helped to the development of the project; and the time required to complete the project.
- Take into consideration the processes of the country, such as the time required for approval of a project; the various organizations involved for decision-making, the time delay due to situations beyond the control of the institution that is conducting project.
- The alliance with leaders and health personnel. It is very important that all who are involved directly or indirectly are aware of the processes that are used for the preparation of a draft and for transparency of the project.
- The participation of peers is also very important so therefore they have to be kept informed of what is being done in the project, and the importance of the project for each of our peers. Involve them and make them understand that they own the project and are the main beneficiaries of the results.

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Positive factors.

- The tool applied contains general aspects that are rarely addressed by health personnel, such as economic status, family aspects, general information about health status etc.
- The involvement of people with HIV as interviewer from various NGO's, and with gender equity.
- People who were hired were trained in selected areas such as: qualities of a interviewer, assertive and receptive communication, Human Rights, among others which states that current team is well trained.
- Interviewers were mobilized to the different areas where they were support groups or places indicated by the participants, this help in collecting data from the population that live in the rural areas of the country.

XI. Conclusions

- People with HIV continue to perceive that the fact that they are provided with ARVs, that they should also be scheduled with routine medical checkups and prescriptions, this is synonymous to good Comprehensive Care; ignoring that there are other external factors that are closely linked with a Real comprehensive care, such as housing, nutrition, workplace, among others.
- There leniency by users as to express or report how they are treated, because they consider it an act of bureaucratic, since in most cases there is no response.
- As for educational processes to improve adherence to ARVs this yet represents a challenge.
- The information that is circulated by the people living in rural areas differ much with the information circulated by the people who live in urban areas, because most HIV clinics are located in the towns and cities of the country. Without neglecting, some information dissemination processes or materials are handled only in the greater metropolitan area leaving out rural areas that do not have a language that is appropriate to the educational level of the same.
- As the protocols of comprehensive care for people with HIV, is enforced in each of the countries of Central America, refers, it is important to establish a mechanism for monitoring and evaluating implementation, consistent with quality standards adopted by each country.
- Upon request flowchart describing the care of people with HIV, which is used and applied in health services, it is important to note that they are different, so it would be of great importance to standardize a chart according to current regulations in the National Program of HIV in each of the countries in Central America, this would help to reorient health services, from the perspective of users, as part of the continuous improvement of the quality of care.

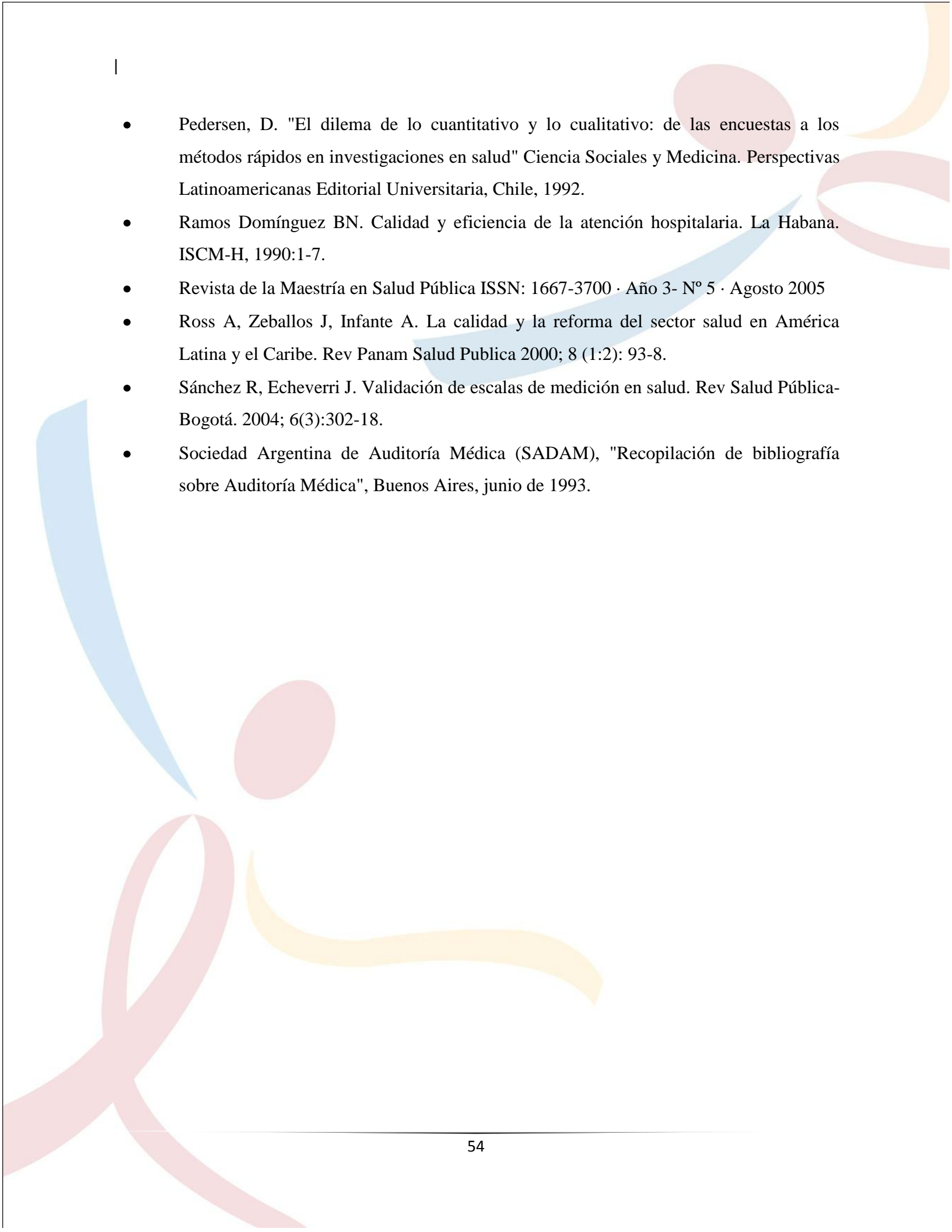
XII. Recommendations

- The qualifying result of 80%, is used as a basis to establish the performance framework approved by the Global Fund for Regional Program REDCA +, however, countries can and should take these results as a baseline to establish their own criteria for self-evaluation.
- Providing a space of socialization, with national authorities on annual actions that are to be developed in the country, indicating the contact persons who will follow up on this work.
- Ensure, before the start of each action to have the endorsement and support of the relevant authorities or otherwise, taking into account the time that these authorities need to give consent.
- It would be useful to conduct studies in Central America, on Ethnicity and HIV, especially regarding to sexual behaviors and practices
- It is recommended that the Health Authority for each one of the countries in Central America, design and implement a set of indicators involving the timeliness and quality variables, which is provided in each of the comprehensive care clinics for people with HIV-AIDS and that this information is accessible to users who wish to consult.
- In terms of human resources, it is recommended that the Ministries of Health assign human resources that are sensitized and trained on the issue of HIV-AIDS depending on the demand in each health facility that provides comprehensive care to people with HIV-AIDS.
- It is necessary to ensure that service provision is based on the right to health, non-discrimination, gender, privacy and reliability and the active participation of the users, for which it must design and implement explicit policies and standards quantitative / qualitative binding by staff.
- Strengthen home visits in order to aid in the adhesion and eliminate family discrimination against people living with HIV.

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XIV. Annexes

ANNEX 1

Questionnaire No. _____

Evaluation of the Quality of Care in Comprehensive Health Services for people with HIV-AIDS.

Please answer the following questions honestly, listening attentively to question each. This questionnaire does not require your name, the data will remain confidential.

QUALITY ASSESSMENT OF COMPREHENSIVE HEALTH CARE SERVICES FOR PEOPLE HIV AND ADVANCED HIV (AIDS).				
Health Center:		Area:	Date:	Country:
Sex	Male:		Female:	
Edad				
Sexual Orientation	Heterosexual	Homosexual	Bisexual	
Gender Identity	Masculine	Feminine	Trans	
Ethnicity				
Academic Level	primary	Secondary	Associates	University
Area	Rural		Urban	
¿How long ago were you diagnosed with HIV?				
How long have you been receiving health services in this Clinic/ Hospital?				

Has the Nurse or doctor told in what stage you are in terms with HIV?	YES	No	¿En cuál fase se encuentra?
How often do you receive your medical checkups?	Weekly	Quarterly	Monthly
Every 2 months	Every 3 months		More than 3 months
Who attended you today?	Doctor		Nurse
Other			

PERSONALIZED TREATMENT			YES	NO	Comment
1. Did the person who attended to your introduce himself/herself?					
2. Did the staff that attended you call you by your name?					
3. Was the staff that attended you friendly?					
4. Were you informed about the procedures that were being done to you and about the possible consequences or effects?					
5. Did the doctor/nurse explain to you how to go about taking your medication at home?					
6. Did the doctor/nurse explain to you how your health status is and how to maintain or or improve?					
7. Are the responses received by the doctor/nurse clear and accurate?					
OPORTUNITY			YES	NO	Comments
8. did you receive the attention or service that you were expecting?					
9. Were you attend on the date that you were scheduled? Yes or NO Why?					
10. Did you receive the service with you having to wait more than 30 minutes? *in case of being negative.					
How long did you wait?	Less than 1	1 hour	2 hours	3 hours	+ than 3 hours

	hour				
11. How long did you take with your doctor/Nurse?	15 min	30 min	45 min	1 hour	Less than 15 min.
12. Were you attend where your appointment was made? YES or NO why?					
13. Did you receive all the services that you required?					
14. Are you taking your anti retroviral medication?					
15. Have you been asked to pay for the medical services and or your medication?					
16. Should the answer be affirmative, if you cannot give a monetary contribution, do you always receive comprehensive care including ARVs?					
17. When do you need drugs to I.O. these are available?					
18. Does the health service have educational materials and condoms?					
19. At the health center is there a support group for people with HIV?					
20. If your answer is YES, do you Attend the support groupf?					

21. Do you receive home visits?				
SERVICE SATISFACTION		YES	NO	Comments
22. Is the office or place where you were treated is it comfortable and pleasant?				
23. Is the place where you were treated has privacy?				
24. Have you been given a control card?				
25 Do you have medical control board?				
26. Do you know what tests are done to you to handle your case?				
27 Are you satisfied with the service that was given to you today?				
Rate according to scale of 1-5 (1. Bad, 2. Regular, 3. Good, 4. Very good, 5. Excellent.)	1	2	3	4
				5

RESOLUTION CAPABILITY				YES	NO	Comments
28 Did the health personnel, attend to your request?						
Rate according to scale of 1-5, the quality of care of the processing done (1. Bad, 2. Regular, 3. Good, 4. Very good, 5. Excellent.)						
1	2	3	4	5		
29. Were you provided with the information necessary for the use of services and procedures to be performed?						
30. Were your doubts clarified concerning your health?						
31. When you encounter difficulties in health care, have you received the correct direction to resolve it?						
32. Do you know what to do in each of your appointments?						
31. To answer your questions? Who do you consult?		Doctor	Nurse	Trained PVS	Other health personnel	
Why?		confidence	knowledge	better communication	Time to spend	
32. What service did you received today?		Outpatient	pharmacy	laboratory	ART Clinic	
maternity		nutrition	dentistry	social Work	Emergency	
Infectious		psychology	Other:			

OBSERVATIONS AND COMMENTS:

THANK YOU!

ANNEX 2

EVALUATION OF QUALITY AND COMPREHENSIVE CARE FOR PEOPLE WITH HIV. SURVEY ADDRESSED TO HEALTH SERVICE PROVIDER.				
Health Facility:	Area:	Date:		Country:
QUESTION	YES	NO	Comments	
1. Do you know and apply the protocol or comprehensive national standards of care for People with HIV?				
2. Do you request specific tests to people with HIV?				
3. If the answer above is yes, please indicate which ones and how often are they done.				
4. Do you currently have the necessary resources to provide quality comprehensive care to people with HIV AIDS?				
5. Have you been trained to care for people with HIV?				
6. Have you received training in the last 6 months?				
7. Is the training received on the subject of HIV, consistent with the work you do in caring for these people?				
8. Do you know of and applies bio-security measures in that are established by protocol?				
9. Does the health service provide the necessary equipment to implement bio-security measures?				

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10. Are you interested in learning more about HIV?			
11. Do you think it is safe to work with people with HIV?			
12. In the last year has had an accident at work when treating a person with HIV?			
13. Are you satisfied with the work you do in HIV?			
14. Has your work in HIV been recognized and valued by your superiors?			
15. Are you a member of the multidisciplinary team at the health center?			

How would you say the flow of care is for People with HIV? What would you recommend to improve the quality of care for people with HIV?

THANK YOU!

ANNEX 3

INSTRUCTIONS FOR FILLING IN THE FORMS

The following are some suggested instructions for completing the survey for the "Assessment of the Quality of Care in Comprehensive Health Services for people with HIV-AIDS:

1. The interviewer must be correctly identified.
2. Interviewer must introduce himself/herself to the interviewee.
3. The interview must be completed in ink.
4. Survey must be filled by the interviewer.
5. Write legibly, preferably print.

For the data of age, this should correspond to age at the time of the interview.

Focus Area: This corresponds to area where the interview was conducted.

From question 1 through 8, will be filled one option at a time. The item comment corresponds to cases in which the respondent does not want to answer. On question 9 if the answer is NO explain why. In the second part of question 10, check only one alternative. In question 11 answer one alternative and in question 12, if the answer is NO, explain why.

From 13 to 25, an option will be filled simultaneously. The item comment corresponds to cases in which the respondent does not want to answer. It is recommended to prompt and briefly describe the situation.

Question 26 to be answer if the person knows the tests that are done to handle his/her case and describe which test are done.

In question 27 and 28 in the second half the person will select one of the options that best show the satisfaction of care received.

From 29 to 32, an option will be filled simultaneously. The item comment corresponds to cases in which the respondent does not want to answer. It is recommended to prompt and briefly describe the situation.

And finally in question 31 and 32 the interviewee can fill multiple choices depending the services the user had done the day of the interview.

At the end of the interview thank the user for their collaboration.

ANNEX 4
INFORMED CONSENT STATEMENT

Mr. Mrs. Ms.:, of Years old with Id No.... .., declare that I have been briefed on the objectives of the "Evaluation of the Quality of Care in Comprehensive Health Services for people with HIV-AIDS," and the benefits that can be generated in improving care for people with HIV-AIDS.

I have also been informed that my personal data will be protected and my participation is voluntary.

Taking this into consideration, I GIVE CONSENT and to provide the following survey information that will be used to meet the specified objectives of the evaluation.

_____ of _____ 2012.

Signature of interviewee.

Signature of interviewer.

ANNEX 5

ADDRESSED TO MULTIDISCIPLINARY TEAM SHEET

This form is intended to gather basic information of the health facility and professionals of the multidisciplinary committee.

Instructions: For each center where interviews are conducted, it will be necessary to fill out the form below.

Health center:	Level of attention	Name of Director	Date:	Country:
Manager Multidisciplinary Committee				
Committee composed of	Name	profession		
Is there a support group.				
YES		NO		
Frequency of meetings:				
Observations				

Name and Signature of Interviewer:

ANNEX 6

TECHNIQUES FOR QUALITY EVALUATION

This section describes techniques put in place to assess the quality of care received by people with HIV in the comprehensive care.

After defining the orientation of the evaluation model, with predominant tone or any of the streams described, the next step is the consideration of the operation profile. This should take into account some assumptions, including:

- Respect the interests of the institution and consider the factual actions.
- Start with the problems of greatest risk to service users (patients) and avoid irrelevant studies or unrepresentative.
- Take into account the legal aspects of the activity.
- Preserving the rigor and discretion in obtaining information.
- Formalize the projects and disseminate the results within the institution, and safeguard the information off of it.
- Use standards, evaluation criteria that have consensus.
- Find ways of incorporation or cooperative study groups or committees related to the theme, infections committee, deaths and other complications, medical records, drug and medication.
- Find allies to promote activities and identify obstacles.
- To enable validation or correction of problems.
- Propose mechanisms to implement corrective action techniques.
- To engage those whose performances are evaluated and the participation of the population served.

There are several categories of evaluation according to the conditions to be taken into account: its origins, the time of execution by the conceptual approach for obtaining the data, the validity of the results, the participation of the people involved, for the foundation that underpins trials, for the category of phenomena to be studied.

ANNEX 7

DEFINITIONS AND KEYWORDS

For the purposes of this guide it is considered:

Health Care: The set of services provided to the individual, in order to protect, promote and restore health.

Acceptability / legitimacy: Compliance with the expectations of patients and families. Legitimacy is community acceptance.

Accessibility: Full access for services.

Adequacy of services: quantitative dimension that relates resources or potential needs of the population.

Quality: To meet or exceed user expectations consistently. Value creation is perceived by customers and users. Always requires a basic standard of reference and an indicator to see if this standard was reached or not.

Quality technical / scientific: Incorporating knowledge and technology to achieve the best possible levels.

Efficiency: The ratio between the results achieved and the resources used.

Effectiveness: Doing the right thing with adherence to rules and procedures; the extent to which the desired results are achieved in individual cases.

Effectiveness: Ability to achieve personal or procedural outcomes, objectives and meet the requirements; achieving better health, improving morbidity and mortality impact on a defined population group.

Efficiency / optimize: Ability to cut costs without reducing improvements; favorable relationship between the results achieved and monetary resources used.

Strategy: Tactics or maneuver that is used to direct the operations of a plan / work program.

Equity: Distribution of resources according to the needs of the population groups.

Evaluation: A systematic process of collecting and analyzing data to determine the historical or projected situation of an organization.

Function: Action Capacity of ones role.

Leadership: This refers to the behaviors and actions taken by the leader to inspire, convince or encourage personnel and the organization towards achieving the vision.

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Guideline: Guidance or guidelines that institutions must follow to fulfill their goals.

Policy: Subject expressing the opinion of how to run an organization, institute or government.

User: any person, patient or non-patient, that needs and gets the care of health services.

ANNEX 8

SAMPLE CALCULATION

Step 1: For the calculation of the baseline the sample intends to use the finite population formula: Where:

n = is the size of the sample.

Z = is the confidence level, 95% = 1.96

p = is positive variability, 50% = 0.5

q = the negative variability, 50% = 0.5%

N = the population size; 73246

E = the accuracy or error. 5% = 0.05

	Honduras	Nicaragua	El Salvador	Panamá	Belice	Costa Rica	Guatemala	Total
PVS	29330	5693	26338	11885	5394	4557	20951	104148
%	28%	5%	25%	11%	5%	4%	20%	100%
n	226	44	203	92	42	35	162	804
fh	0,007719783							

It was decided to establish the sample by country, with the formula for finite populations:

Z	1,96		
Z ²	3,8416	$n = \frac{Z^2 pq N}{NE^2 + Z^2 pq}$	
p	0,5		
q	0,5		
N	104148		
E	0,05		
E ²	0,0025		
Z ² pqN	100023,7392		
NE ²	260,37		
Z ² pq	0,9604		
NE ² + Z ² pq	261,3304		
n	382,7481962		
Diseño (n*2)	765,4963923		
Impr (5%)	803,7712119		
Aprox	804		
fh	n/N		
fh	0,007719783		

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	Honduras	Nicaragua	El Salvador	Panamá	Belice	Costa Rica	Guatemala	Total
PVS (N)	29330	5693	26338	11885	5394	4557	20951	104148
n	797	756	796	782	753	744	792	5420
$n = \frac{Z^2 pq N}{NE^2 + Z^2 pq}$								
Z	1,96	1,96	1,96	1,96	1,96	1,96	1,96	1,96
Z ²	3,8416	3,8416	3,8416	3,8416	3,8416	3,8416	3,8416	3,8416
p	0,5	0,5	0,5	0,5	0,5	0,5	0,5	0,5
q	0,5	0,5	0,5	0,5	0,5	0,5	0,5	0,5
N	29330	5693	26338	11885	5394	4557	20951	
E	0,05	0,05	0,05	0,05	0,05	0,05	0,05	0,05
E ²	0,0025	0,0025	0,0025	0,0025	0,0025	0,0025	0,0025	0,0025
Z ² pqN	28168,532	5467,5572	25295,0152	11414,354	5180,3976	4376,5428	20121,3404	
NE ²	73,325	14,2325	65,845	29,7125	13,485	11,3925	52,3775	
Z ² pq	0,9604	0,9604	0,9604	0,9604	0,9604	0,9604	0,9604	
NE ² + Z ² pq	74,2854	15,1929	66,8054	30,6729	14,4454	12,3529	53,3379	
n	379,193381	359,87581	378,637284	372,131556	358,619187	354,292741	377,242831	
Diseño (n*2)	758,386762	719,751621	757,274568	744,263112	717,238373	708,585482	754,485662	
Impr (5%)	796,306101	755,739202	795,138296	781,476267	753,100292	744,014756	792,209945	
Aprox (n)	797	756	796	782	753	744	792	