

Management of Public Policy in Health and User Satisfaction of the Guasmo Sur General Hospital in Guayaquil, Ecuador, 2024

Dr. Ricarte Francisco Carreño Calderón¹, Dra. Cecilia Teresita De Jesús Carbajal Llauce², Psicóloga Marlene Maribel Zambrano Calderón³, Dra. Karim Violeta Herrera Ruesta⁴, Dr. José Eduardo Ayala Tandazo⁵, Dra. Elisa Amelia Cisneros Prieto⁶, Dr. Rody Ecuador Santacruz Yepe⁷

¹Universidad César Vallejo (Perú), <https://orcid.org/0009-0001-5080-0968>
carrenoricarte1974@gmail.com

²Universidad César Vallejo (Perú), <https://orcid.org/0000-0002-1162-8755>
cllaucect@ucvvirtual.edu.pe

³Universidad Politécnica Salesiana (Ecuador), <https://orcid.org/0009-9889-1924>
mar.bel777.za@gmail.com

⁴Universidad César Vallejo (Perú), <https://orcid.org/0000-0002-7893-7501>
karimvhr@gmail.com

⁵Universidad César Vallejo (Perú), <https://orcid.org/0000-0002-4512-6120>
ayalapiura@gmail.com

⁶Universidad César Vallejo (Perú), <https://orcid.org/0000-0002-6211-392X>
e_cisneros@tecnologicoargos.edu.ec

⁷Universidad de Guayaquil (Ecuador), resy_ecu@hotmail.com

KEYWORDS

public health policies, user satisfaction, hospital management, service quality, Ecuador, operational efficiency, hospital infrastructure.

Abstract

This study examines the relationship between the management of public health policies and user satisfaction at the Guasmo Sur General Hospital in Guayaquil, Ecuador, during 2024. Through a quantitative approach and a correlational design, the main factors affecting the perceived quality of health services were identified, including accessibility, infrastructure, communication, and operational efficiency. The results show a significant relationship between governing, enabling and value-adding processes with user satisfaction. In addition, it was evident that the availability of resources, transparency in management and hospital infrastructure are key determinants for a positive experience. This analysis offers practical strategies to optimize the quality of health services, highlighting the need for specific interventions that improve administrative management and user perception.

I. INTRODUCTION

The application of public health policies in regions that are struggling to reach a better level of development is a complicated task in which various structural factors converge. Thus, public policy efforts aim to improve access to health care and its outcomes around the world, but disparities in resources and infrastructure pose unique challenges when it comes to translating policy intentions into effective practices on the territory. Likewise, as users perceive their health care represents a complex challenge; therefore, it is essential to adopt comprehensive and multidisciplinary strategies that allow for continuous

improvements in the accessibility and efficiency of the health service.

Public health policies must be aligned with the objectives of the 2030 Agenda for Sustainable Development, particularly with Goal 3, which promotes universal coverage of essential health services. This goal highlights the need to improve access to global health care, given that a significant part of the population still does not have adequate access. It is essential to address inequalities in access to health, considering determinants such as environmental and commercial factors, to move towards equitable and sustainable provision of health services, thereby improving health outcomes and promoting economic, social, and environmental development (United Nations, 2023).

In this sense, at the global level; There has been evidence of a deficit of essential infrastructure needed to ensure quality health care, approximately 12.5% of health facilities suffered from access to safe drinking water, about 20% did not have adequate sanitation services, and about 16.7% lacked handwashing facilities at the point of care. This situation underscored the urgent need to improve basic infrastructures in healthcare facilities globally to ensure optimal standards of medical care and disease prevention. Similarly, it was estimated that 24% of the world's population residing in fragile environments presented significant obstacles to accessing care in health facilities that are priority and of quality (World Health Organization, 2020).

Regarding the degree of patient satisfaction; it has been proven according to research that in Europe, financial and health vulnerabilities have a significant influence on the perception of users regarding the health system, in this sense, those individuals who experienced financial or health difficulties tended to report lower satisfaction with the services received, these weaknesses manifested themselves in various ways, such as the absence of services, access to the health system and quality of care. Therefore, addressing these shortcomings makes a crucial need emerge to repair user satisfaction and consider balancing and entering the national health system to receive medical care across Europe (Righi et al., 2022).

Likewise, in Latin American countries at the regional level, access to the national health entity was highly vulnerable to various risks that significantly affected health at the local, national, and global levels. These risks weakened response capacity and wiped out gains in health outcomes, as well as in social and economic development. Understanding the impact of this problem is essential to build and apply strategies to improve the patient experience (Pan American Health Organization, 2020).

The national average of availability of drugs in Ecuador was 77% and for supplies 78%. However, it was considered ideal to achieve a 90% availability level for both. This gap between the current availability and the desired goal indicated a significant challenge in providing the necessary medicines and supplies in order to guarantee an optimal health service. The low level of availability had direct repercussions on good health care and its support for the state health apparatus in order to respond effectively to the needs of users (Ministry of Public Health of Ecuador, 2022).

Similarly, a low degree of total satisfaction of 58.9% was found among the users treated in the emergency area of the Quevedo General Hospital, highlighting a high negative perception with the response capacity and reliability of the service. This finding highlighted the critical need for hospital authorities to effectively plan and coordinate their resources and capacities to improve health care in this area. Therefore, it is

imperative to address the underlying conditions for the contribution of users who describe good care, in order to implement strategies aimed at improving the different processes (Villamar et al., 2023).

While from the de facto perceptible observation, the Guasmo Sur General Hospital of Guayaquil faced significant challenges at the operational level due to multiple critical nodes. Among them, the frequent changes of authorities (managers) in all processes, generate instability in administrative and technical management, which continuously causes difficulties in the effective implementation of policies and improvement programs. In addition, the deficient number of health workers compromised the hospital's care to provide patients in a timely and adequate manner, the lack of equipment, including medicines and medical supplies, has negatively impacted the effectiveness of health care, the lack of modern medical equipment and computer technologies has limited the diagnostic and therapeutic capabilities of the hospital. These difficulties have created a significant barrier to providing quality healthcare, which calls for comprehensive and coordinated solutions to improve hospital operation and meet community needs. (Comprehensive Health Team of the Guasmo Sur General Hospital of Guayaquil, 2023).

Given the identified problem that directly involved the management of health policies, the need arose to investigate the following problem: How is the Management of Public Policy in health related to user satisfaction at the Guasmo Sur General Hospital in Guayaquil, Ecuador 2024?

In the same way, the specific problems are delimited in: How are the governing process and user satisfaction related in the Hospital?, How are value-adding processes and user satisfaction related in the Hospital?, How are the enabling processes of advice and user satisfaction related in the Hospital? and How are the enabling processes of support and user satisfaction related in the Hospital?

From the pertinence of this research, this research is fundamental due to the imperative need to optimize the administration of public policies in the health sector. In a context where available resources are limited and the demand for health services is high, it is crucial to optimize management in order to have the stock to be used efficiently and effectively. In addition, this research addresses disparities in access to and quality of health services, identifying critical areas that require substantial improvements in policy formulation and implementation. Meanwhile, user satisfaction stands as a key indicator of service quality. A high level of satisfaction reflects adequate medical care, reasonable wait times, and respectful, professional treatment. Understanding the factors that affect this satisfaction allows for the creation and improvement of health services, increasing the safety of the population in the health system and promoting their proper use.

Regarding the social impact, this research seeks to raise public awareness about the importance of health policies and their close relationship with the general satisfaction of the population. By identifying and addressing deficiencies in the management of these policies, strategies can be implemented to strengthen the quality of life of users, ensuring adequate and satisfactory medical care. Likewise, the social relevance lies in its potential to transform the quality of life of the population and optimize health services. An efficient and equitable health system not only reduces access and quality gaps between different sectors of the population, but also improves the credibility of public entities.

From a theoretical and empirical perspective, the study seeks not only to validate

theories such as the Economic Policy in Health proposed by Roy et al. (2024); and the theory of Patient Satisfaction, proposed by Qian et al. (2024), but also to expand and adapt these theories to specific contexts, such as that of the Guasmo Sur General Hospital. Providing specific empirical data is essential, as it can serve as a reference point for further research and for evidence-based policymaking. This facilitates more informed and effective decision-making.

In this way, in relation to the methodological justification based on the results obtained, specific interventions can be formulated and implemented to improve the administration of public policies in the hospital, thus increasing the quality of services and patient satisfaction. In addition, this research will provide hospital and health system authorities with concrete data and informed strategies, allowing for more accurate and effective decisions.

Thus, research in terms of practical use will serve as a guide for future studies, offering a robust methodological reference. The validation of the information collection tool and the methods used will provide a framework that will facilitate the replication and comparison of results in subsequent studies, contributing to general knowledge in the field of public policy management in health and offering new perspectives and areas of study.

The general objective of the research: To establish the relationship between the variables Management of Public Policy in health and user satisfaction at the Guasmo Sur General Hospital in Guayaquil, Ecuador, 2024.

In this regard, the following specific objectives are specified: To diagnose the level of relationship between the governing process and user satisfaction in the hospital; To identify the level of relationship between value-adding processes and user satisfaction in the hospital; To determine the level of relationship between the enabling processes of counseling and user satisfaction in the hospital; To analyze the level of correlation between the enabling processes of support and user satisfaction in the hospital; To validate the proposed strategy based on the theoretical foundation of the study variables and their correlation in the context of the Guasmo Sur General Hospital Guayaquil, Ecuador, 2024.

Therefore, the following research hypothesis has been considered: The management of public health policy is related to user satisfaction at the Guasmo Sur General Hospital in Guayaquil, Ecuador, in the year 2024.

In relation to the exhaustive review, numerous studies have been found on public health policies and user satisfaction, which served as the basis for this study, of which some references stand out.

Yoon (2022), in its research conducted in Korea, aimed to analyze the impact of nursing staff on patient health outcomes, such as length of hospital stay, mortality within 30 days after hospitalization, and reincorporation within 7 days after discharge from acute care hospitals, the methodology in the study was retrospective cross-sectional correlational, A multilevel statistical analysis was carried out to evaluate mortality, readmission and length of hospital stay, resulting in a mean length of stay of 6.54 days, a mortality rate of 1.1% and a readmission rate of 7.1%, concluding that interventions are required for nursing staffing. In this regard, the results of the study demonstrate the need to implement policies in the management of human talent since, by hiring health personnel in hospitals, they can improve the clinical results of their patients, raising the level of

satisfaction, generating a positive impact on the management of health policies.

Richman & Schulman (2022), examined how patient-nurse ratios impact patient satisfaction, readmissions rate, and mortality in Pennsylvania hospitals, identified the correlation between patient-nurse ratios and some health outcomes including patient satisfaction, used a multilevel model to assess mortality, readmissions, and other statistical analyses finding that a lower patient-nurse burden is associated with higher patient satisfaction, reduced readmission rates, and lower mortality. The results underscore the importance of implementing adequate nursing staffing policies to improve patient experiences and increase the efficiency of the hospital system, thus promoting better care and satisfaction practices in the clinical setting

Riebling et al. (2019) identified patterns of dissatisfaction and measurement of specific elements that affect patient satisfaction in five hospitals in the United States; the approach was quantitative and its Six Sigma methodology to identify and improve patient experiences by developing a method to measure and evaluate the experiences of all patients while receiving care. The results showed that after implementing there were improvements in the processes focused and identified by the PEB, compliance with the package improved, maintaining highly reliable processes, critical factors for patient satisfaction and the improvement of these aspects was associated with greater overall patient satisfaction, concluding that although it is common to measure individual processes, Patients do not see it as separate, but as a collection of encounters that determine the patient's perception of their experience. This underscores the importance of implementing policies related to communication, hospital environment, basic needs/comfort, and logistics to improve communication can increase patient satisfaction, highlighting the importance of good professional-patient relations, clean environments, and reduced waiting times. These elements contribute to generating a positive experience, improving patients' perception of the quality of care received. As a result, the research has important implications for the management of public policies in the health sector, as it identifies specific areas that can improve user satisfaction and, therefore, the perceived quality of health services.

Nembhard et al. (2020) investigated the impact of care coordination by nurses in community health centers in the United States, focusing on patient satisfaction and health workforce efficiency, the methodology applied was a quasi-experimental study using a pre-post group-controlled design, concluding that the results of the study did not show a significant improvement in the global perception of quality of care in high-quality patients. Despite the fact that there was a statistically significant increase in the number of visits to the clinic among the participants of the program, no substantial changes were observed in the perception of teamwork or in the resolution of the work demands of the health personnel. These findings highlight the need for further research to identify more effective strategies to improve the perceived quality of care in this group of patients, suggesting that nurse care coordination is a promising strategy, but that its effectiveness may depend on other contextual factors and program implementation.

In relation to research carried out in the country, public policy approaches in the health system and their impact on user satisfaction have been highlighted. The purpose is to offer a solid and well-founded basis for the contextualization of the topic raised.

At the Monte Sinai General Hospital in Guayaquil, Ecuador, research was carried

out on the quality of health care perceived by patients, using the Servqual model, through surveys, the expectations and perceptions of users about the health service were evaluated, concluding that, although patients were generally satisfied, it is crucial to improve hospital processes and structures to increase satisfaction and ensure quality care; Patients expect timely care, empathy, and optimal conditions in the hospital, which is related to administrative management and public policies that impact satisfaction. In this regard, this research highlights that the results of the applied model consider the existence of a gap in the level of satisfaction of users who, despite the fact that users were satisfied with medical care, were not happy with the treatment received, which is related to better planning and coordination of their resources and capacities for the continuous improvement of care (Pilco and Ronquillo, 2020)

Guerrero, P., & Cañarte, A. (2023) studied patient satisfaction in the emergency department of the Portoviejo General Hospital, using a quantitative, descriptive, and cross-sectional approach. They applied the "SERVQUAL" questionnaire. The results showed high levels of satisfaction in medical care, and overall satisfaction. These results suggest that, although a greater number of patients are satisfied with health care, there are critical areas that require improvements to increase the quality of emergency service, especially in the availability of medication for patients who are going to receive care as part of the health policy of providing free drugs in care and communication between doctors and patients.

Argüello et al. (2020) evaluated patient satisfaction with the internal medicine service of the Guaranda Basic Hospital, using the SERVPERF questionnaire and the Smart PLS3 software included descriptive and multivariate statistical techniques, finding that 52% of the respondents were dissatisfied and the main reasons for dissatisfaction were deficiencies in interpersonal relationships, the scarcity of resources and long waiting times. These results highlight the urgent need to implement improvements in resource management, staff training, and service organization to raise the quality of care and increase patient satisfaction.

Triviño-Ibarra et al. (2019), investigated the effectiveness of care in the outpatient area of the Rodríguez Zambrano Hospital in Manta, Manabí, Ecuador; Aiming to identify the conditions that influenced how patients perceive quality in outpatient clinics by applying surveys and interviews to 540 users in a period of six months, the methodology was applied, descriptive, quantitative, cross-sectional, non-experimental, showing that 57% rated the care as regular, 35% as excellent and 8% as good; This key finding was the prolonged time in care, negatively affecting the perception of quality of service, highlighting that the perception of care is highly subjective among patients. These results suggest the importance of reducing waiting times and optimizing resources in order to raise the level of patient satisfaction by raising the quality of the service provided in the health facility.

Within the field of theories on public policy management in health, proposed by Brown et al. (2018), highlights Health Governance as the effectiveness of public health policies are closely related to the quality of governance in the health sector, demonstrating that when governance is robust due to its implementation, transparency, participation, effectiveness, optimization of resources, its success will depend on its interconnection. In this regard, health outcomes can be optimized by ensuring an efficient allocation of resources and improving coordination between the various levels and actors of the health system, while offering rapid

and adaptable responses to emerging challenges in public health; it is essential that the decision makers of the day know these theories in order to promote strategies that raise the level of satisfaction.

While user satisfaction in the health sector is a psychological construct that arises from the comparison between the patient's previous expectations and the perception of the care received; this cognitive discrepancy, according to these authors, is the main determinant of the evaluation of the quality of health services, with relevance to this theory in its ability to explain how patients' subjective experiences influence their perception of quality of care and, therefore, their overall satisfaction (Ferreira et al. 2023).

In this way, public health policies are defined as the set of guidelines, strategies, and actions implemented by governments and competent organizations to globally consider the problems and needs of society's health system (Pollack et al., 2018). These policies seek to raise the level of accessibility, quality and efficiency of health services, promoting balance and general well-being; In addition, they focus on including social determinants of health, such as socioeconomic, cultural, and environmental factors. Effective implementation of these policies requires rigorous planning, adequate resources, and collaboration across multiple sectors and levels of government.

The first dimension framed in public health policies was the governing process, which can be conceptualized as the capacity of public hospitals to effectively manage the available resources and expand the quality of the number of health services offered to the population (Piubello et al., 2021). This governing process seeks to improve the management of resources, the quality of care and the financial sustainability of the health system. In addition, it focuses on addressing the determinants of hospital inefficiency, such as technical, organizational, and contextual factors. Effectively implementing governance strategies to improve hospital efficiency requires rigorous planning, investment in appropriate technology, and collaboration across multiple levels of government and sectors.

The second dimension, framed in public health policies, referred to value-adding processes. These processes can be conceptualized as those activities within hospitals that increase the operational efficiency and quality of health services, while eliminating activities that do not add value, such as errors and waste. The use of Lean methodologies in hospital management stands out as an effective tool to achieve these objectives (Evans et al., 2023).

The third dimension was the enabling process of counseling, which can be conceptualized as the mechanisms that support and facilitate the delivery of high-quality health services. These processes include efficient patient flow management, interdepartmental coordination, and scaling up the system to support the healthcare workforce. Therefore, the enabling processes of counseling focus on improving these aspects to ensure continuous and efficient care throughout the hospital (Åhlin et al., 2023).

The fourth dimension, the enabling support processes, are conceptualized as those procedures and systems that facilitate the efficient and effective operation of the hospital, without being directly involved in clinical care. These processes include human talent management, information technology, infrastructure, and support

services. In this way, resource management, integration of health information systems, and effective collaboration between different departments are key elements to ensure operational efficiency and quality in health care (Bhati et al., 2023).

In this way, user satisfaction can be conceptualized as the positive perception that patients have in relation to the care provided and their experience in the health system (Friedel et al., 2023). The importance lies in its ability to reflect the effectiveness of medical and administrative practices within healthcare institutions. When patients feel well cared for and listened to, they are more inclined to follow recommended treatments and maintain an ongoing relationship with health services. This not only improves individual health outcomes, but also strengthens reputation and trust in the healthcare system as a whole.

Considering this, it was postulated as the first dimension of user satisfaction in relation to health care; As an indicator, accessibility, the ease with which people can access health services, that is, accessibility, is the first factor that determines whether a patient is satisfied with the medical care they receive and depends on several elements such as the proximity of the health center, hours of operation, and the availability of doctors and resources; When patients are able to get medical care in a timely and smooth manner, they feel more satisfied with the overall healthcare system (Buttigieg et al., 2016).

The second dimension in this context was quality. Quality in hospital management focuses on the safety of the care provided that is effective, safe, user-centered, considering the time factor. This includes the use of continuous quality improvement methodologies, as well as the collection of user feedback and the implementation of planning actions based on such feedback to improve health processes and outcomes (Berger et al., 2020).

The third dimension was communication, which is conceptualized as the effective interaction between the human talent of health facilities, users and their families, which is essential to have security in quality care and user satisfaction. These processes include clear information transfer, mutual understanding, and establishing trust between actors. Strategies such as the use of the SBAR (Situation, Background, Assessment, Recommendation) method for structured communication and the adoption of technological tools to improve interaction are essential to ensure that what is to be conveyed is clear, punctual and accurate. In this way, the implementation of structured communication systems and the promotion of a culture of open and effective communication among all actors in the health system are key elements to improve care coordination, reduce medical errors and increase patient satisfaction (Sharkiya, 2023).

As a last dimension, infrastructure was mentioned; which is defined in the as the set of facilities, equipment and technologies that allow the effective and safe provision of health services. Hospital infrastructure includes not only buildings and their physical characteristics, but also advanced systems for locating personnel and medical equipment, which are essential for the efficient improvement of patient operability and safety. A recent example of innovation in this area is the use of geomagnetic positioning technologies and BLE beacons to track in real time the location of workers and equipment within the hospital, facilitating better management of resources, as well as accelerating the need in clinical care (Yamashita et al., 2021).

In this way, the problem addressed in the study focuses on the management of public health policies and user satisfaction at the Guasmo Sur General Hospital in Guayaquil, Ecuador. The main challenges include the low amount of human talent and resources for adequate medical care, in addition to a negative perception of emergency services by users. Therefore, the problem arises from the imperative need to strengthen the efficiency and effectiveness in the administration of health policies to reduce inequalities in access to and quality of health services.

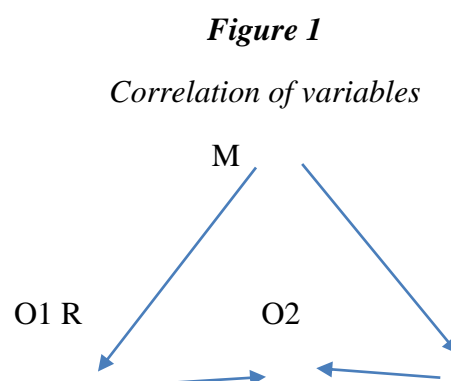
In addition, theoretical contributions are essential to understand and address this problem. The research is based on various theories and previous studies on the problems around health care. For example, recent studies (Yoon, 2022) and (Richman & Schulman, 2022) look at how nursing staffing and patient-nurse ratios affect health outcomes and user satisfaction. These theoretical contributions provide a robust framework that allows contextualizing and adapting the theories to the specific environment of the Guasmo Sur General Hospital, thus providing a solid basis for the collection and analysis of empirical data in the Ecuadorian context.

II. METHODOLOGY

This quantitative research, aligned with the guidelines of CONCYTEC (2019), aims to generate scientific knowledge applicable to solve a specific health problem, in approach it is quantitative since through the statistical analysis of data, patterns and relationships will be sought that allow the design of more effective interventions aimed at improving user satisfaction. so that these research results can determine new ways to achieve specific predetermined objectives having the detail of these variables and find logical conclusions and explanations with the existing knowledge in order to solve specific problems.(Apuke, 2017).

A non-experimental, transactional research approach will be used since the variables will not be manipulated and the data will be obtained through simple questions in their natural context. This type of design involves observing how events unfold naturally, without intervention or manipulation by the researcher (Reddig et al. 2021)

The following figure details the associations between variables according to the study sample.



Where:

The study sample is (M), while the study variables: Public Health Policies (O1) and User Satisfaction (O2). The correlation of both variables is represented in (R).

Considering that, it will be a correlational-causal study; since the relationship between two variables at a given time will be analyzed; questionnaires will be carried out adapted to the variables and their dimensions, considering time and space, in order to identify associations; in this sense, this type of study seeks to discover relationships between variables in a specific context of time and place (Lee et al., 2022)

In this way, the scope of the research will be limited to the analysis of health policies, as well as user satisfaction, within a specific context of time and place. It is expected to identify and analyze the relationships between these variables, providing conclusions and well-founded explanations that contribute to the knowledge and improvement of health policies.

Therefore, public health policies can be conceptualized as the set of decisions and actions taken by governments and other regulatory entities in order to protect, promote, and improve the health of the population. These policies may include the creation of health laws, regulations, programs, and services, as well as the provision of resources and the implementation of strategies to address specific health problems. Developing and implementing health policies involves a detailed analysis of the needs of the population, risk assessment, and consideration of social, economic, and policy conditions that influence the health part (Bullock et al., 2021).

In this sense, public health policies are operationalized as the set of decisions, strategies, and actions coordinated by governments and regulatory entities to protect, promote, and restore the health of the population. These policies will be dimensioned into: governing process, value-adding processes, enabling advisory processes and enabling support processes.

Similarly, user satisfaction is defined as the level at which users' expectations and needs are met by the services or products they receive. In the context of healthcare services, user satisfaction refers to patients' perception and assessment of the quality of care and services received, including aspects such as accessibility, treatment efficacy, communication with healthcare professionals, and the physical environment. User satisfaction is a key indicator of service quality and can influence treatment adherence and health outcomes (Ali et al., 2023).

Thus, user satisfaction is operationalized as the extent to which users' expectations and needs are satisfied by the health services received. This variable will include the following key dimensions: accessibility, quality, communication and infrastructure.

The term population refers to the set of people, objects or measures that share common characteristics and, therefore, constitute the object of study in a research (Yao et al., 2020). In this study, the observed population will be characterized by belonging to the locality of the Guasmo Sur General Hospital, specifically to districts 09D01 with an assigned population of 22,170 inhabitants and for District 09D02 165,424 inhabitants, considering that for the present research the age group will be more than 20 years of age, since it will be considered that it would provide more accurate and reliable answers when

completing the survey.

The criteria for inclusion in the analysis unit are patients from the Hospital over 20 years of age who signed the informed consent to fill out the questionnaire; y. the exclusion criteria are patients who did not complete the questionnaire, who did not decide to be included in the application of the instrument and who were under 20 years of age or who did not receive care.

On the other hand, a sample refers to a specific subset of a population chosen to be the subject of study (Mendoza et al., 2021). In cross-sectional research, it is common to calculate the sample size required for the calculation (Rodríguez & Mendivelso, 2018). In this case, when considering the assigned population greater than 100,000 individuals or users and 2000 patients per day who visit the hospital; The formula for infinite populations will be used, which will allow an adequate estimate to be achieved to carry out descriptive and inferential analyses. With the application of the formula for infinite populations, a sample of 384 individuals will be obtained for users who will be distributed according to the population density of each health district.

The choice of sampling type depends on several factors, including the objectives of the study, the nature of the population, and the resources available. When considering public policy and user satisfaction in a relatively large population, simple random sampling will be the most relevant method. This method is based on selecting a sample where all people in the population have the same probability of being chosen (Etikan & Bala, 2017).

The method of accessing the information will be critical, as choosing the right technique will ensure the accuracy and reliability of the data (Kyza et al., 2019). Therefore, considering the previously established variables, a survey will be applied.

Likewise, the tools that will be used for data acquisition will be fundamental and can be adjusted to the type of information that needs to be collected (Singh et al., 2022). Therefore, a questionnaire will be developed that will use the Likert scale for the responses, in order to collect pertinent information and ensure an accurate measurement according to the indicators of each dimension. The purpose of this scale is to mediate the attitudes, perceptions or opinions that respond to the degree of agreement or disagreement of a subject to a series of items, used in the social sciences and in the field of organizational learning. (Romero & Alvarez, 2022)

For validity, it is essential to rely on the expertise of experts to ensure content validity, which will allow for accurate measurement of variables (Vakili & Jahangiri, 2018). Therefore, the structure of the instrument will be reviewed by five health experts, and their evaluations will be weighted using the criteria sheet adapted from the proposal of Escobar and Cuervo (2008) to obtain an accurate and complete estimate.

The process of establishing a relationship between an instrument and a quantifiable external criterion is called criterion validity (Taherdoost, 2019). In this context, Pearson's correlation coefficient will be used to determine the level of association between the variables and their dimensions, seeking to obtain values greater than 0.21, which will indicate sufficient validity.

Finally, to obtain construct validity, it is necessary that a series of measurements

of a specific scale are properly correlated, this being a crucial part of the research (Bedford & Speklé, 2018). In this study, construct validity will be evaluated by analyzing the results of the correlation between each variable and its corresponding dimension.

The reliability of the results will be demonstrated by their consistency and coherence (Kamış & Doğan, 2018). In this context of the pilot test, estimates close to 1 of the Cronbach's alpha index will confirm the reliability of the instrument used. The following result was obtained for the instrument of the Public Policy Management variable 0.882, and for the second variable User Satisfaction 0.917.

To analyze the data in this study, both descriptive and inferential statistical techniques will be used. It will be analyzed through contingency tables to examine the relationship between variables and normality tests will be applied to evaluate how data are distributed. These tests will help determine the appropriateness of using parametric or nonparametric statistics in inferential analysis, as appropriate.

It is crucial that research methods are transparent, impartial, and free of ambiguity. It is essential to maintain the veracity of the criteria and the information presented, guided by ethical principles that regulate research (Mukherjee, 2020). By adhering to these ethical standards in this study, the confidence of healthcare professionals in future consultations related to this topic will be ensured.

It is essential to respect the integrity and autonomy of people, as well as ethical aspects, which is why RCUN No. 470-2022-UCV is considered. Consequently, the well-being of the units of analysis and the confidentiality of their contributions to research must be guaranteed. In addition, the principles of publication, accountability, and anti-plagiarism policy state that research must be conducted in accordance with verifiable scientific standards and regulations, and undergo meticulous review before publication.

III. Expected results

1. Relationship between public policies and user satisfaction:

- Identification of how the components of public policies (governing, enabling and value-adding processes) influence patient satisfaction.
- Analysis of the specific aspects of public policies that generate the greatest positive or negative impact on the user experience.

2. Determinants of user satisfaction:

- **Infrastructure:** Evaluation of the impact of the quality of physical facilities on the perception of the service.
- **Accessibility:** Relationship between waiting times, ease of access and patient satisfaction.
- **Communication:** Importance of interaction between medical and administrative staff with patients to build trust and well-being.

3. Hospital Operational Efficiency:

- Identification of key areas that need optimization to improve care processes.

- Relationship between efficiency in administrative processes and the user's perception of service quality.

4. **Proposals for improvement:**

- Strategies to implement public policies aimed at optimizing resources and improving hospital processes.
- Specific recommendations to strengthen transparency in hospital management and increase user satisfaction.

Possible quantitative results:

- Levels of satisfaction measured on a specific scale (e.g., Likert).
- Percentage of users who consider the service time and infrastructure to be adequate.
- Degree of correlation between the implementation of public policies and satisfaction indicators.

IV. **Conclusions**

1. **Significant relationship between public policies and user satisfaction:** The public health policies implemented at the Guasmo Sur General Hospital have a direct impact on the perception of user satisfaction. Governance, enabling, and value-adding processes stand out as key elements in ensuring efficient, patient-oriented service.
2. **Infrastructure and accessibility as fundamental pillars:** The quality of hospital infrastructure and accessibility to services were identified as determining factors for the user experience. Adequate infrastructure and reasonable waiting times significantly improve the perception of service quality.
3. **Importance of effective communication:** The interaction between medical-administrative staff and patients plays a crucial role in building trust and satisfaction. Strategies that encourage clear and empathetic communication can reduce complaints and increase the positive perception of the hospital.
4. **Need for optimization of resources and processes:** Operational efficiency continues to be a challenge in the hospital. More streamlined administrative processes and a more strategic use of available resources are critical to improving the user experience and ensuring the sustainability of services.
5. **Recommendations to strengthen hospital management:** It is proposed to strengthen public policies aimed at transparency, efficiency and citizen participation in the evaluation of services. In addition, it is crucial to implement performance indicators that allow for continuous monitoring and adjustment of hospital processes.
6. **Impact on public policy formulation:** This study highlights the importance of aligning public policies with the needs and expectations of users. The results can serve as a basis for the formulation of more inclusive policies aimed at improving the quality of health services in Ecuador.

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ANNEXES

Variable Operationalization Table

Variable	Conceptual definition	Operational Definition	Dimensions	Indicators	Scale Evaluative
Public Health Policy	(Bullock et al., 2021). Public health policies can be conceptualized as the set of decisions and actions taken by governments and other regulatory entities with the aim of protecting, promoting, and restoring the health of the population. These policies may include the creation of health laws, regulations, programs, and services, as well as the allocation of resources and the implementation of strategies to address specific health problems. The development and implementation of public health policies involve a detailed analysis of the needs of the population, the assessment of risks and the consideration of social, economic and political factors that influence health	Public health policies are operationalized as the set of decisions, strategies, and actions coordinated by governments and regulatory entities to protect, promote, and restore the health of the population. These policies will be dimensioned into: governing process, value-adding processes, enabling advisory processes and enabling support processes.	Governing Process	1. Effectiveness of decision-making 2. Transparency	Likert
			Value Adding Processes	1. Efficiency in service delivery 2. Recognition	
			Advisory Enabling Processes	1. Accessibility 2. Effectiveness	Ordinal: 1-2-3-4-5
			Support Enabling Processes	1. Availability 2. Efficiency	

Variable	Conceptual definition	Operational Definition	Dimensions	Indicators	Scale Evaluative
User satisfaction	(Ali et al., 2023). It is defined as the degree to which users' expectations and needs are met by the services or products they receive. In the context of health services, user satisfaction refers to the perception and evaluation that patients have about the quality of care and services received, including aspects such as accessibility, treatment effectiveness, communication with health professionals, and the physical environment. User satisfaction is a key indicator of service quality and can influence treatment adherence and health outcomes	User satisfaction is operationalized as the extent to which users' expectations and needs are met by the health services received. This variable will include the following key dimensions: accessibility, quality, communication and infrastructure.	Accessibility	1. Ease of Access 2. Wait time for appointments	Ordinal: 1-2-3-4-5
			Quality	1. Compliance with quality standards in treatment	
			Communication	1. Clarity of information provided 2. Availability of information about services	
			Infrastructure	1. Physical facility status 2. Availability of medical equipment.	

Appendices 2. Data collection tools

The Questionnaire/Interview Guide will allow the information to be collected in this research: MANAGEMENT OF PUBLIC POLICY IN HEALTH AND USER SATISFACTION OF THE GUASMO SUR GENERAL HOSPITAL IN GUAYAQUIL, ECUADOR, 2024, so it is required to evaluate the instrument, making, if necessary, suggestions to make the pertinent corrections. This answer must be marked by each item according to the criterion, being structured under the following scale called Likert ordinal that goes from Totally disagree (1), Disagree (2), Neither agree nor disagree (3), Agree (4), Strongly agree (5).

Data collection instrument

QUESTIONNAIRE 1: PUBLIC HEALTH POLICIES					
A set of guidelines, strategies and actions implemented by governments and competent bodies to globally consider the problems and needs of society's health system					SCALE
DIMENSION 1: GOVERNING PROCESS The capacity of public hospitals to effectively manage available resources and expand the quality of the number of health services offered to the population.					1. 2. 3. 4. Agree 5. Totally
Indicator: Effectiveness					
1	Do you think that the decisions taken by the hospital authorities solve the problems of access to the different health services?				
2	Do you think that the resources received by the hospital are sufficient to solve the operational problems in order to guarantee medical care benefits to patients?				
Indicator: Transparency					
3	Do you think that the population can easily access information on health policies and their results?				
DIMENSION 2: VALUE-ADDING PROCESSES Those activities within hospitals that increase the operational efficiency and quality of health services, while eliminating activities that do not add value, such as errors and waste					1. Strongly 2. Disagree 3. Neither 4. Agree 5. Totally
Indicator: Recognition					
4	Do you consider the hospital staff to be very committed and dedicated in their work?				
Indicator: Efficiency					
5	Do you agree that the health services at this hospital are provided efficiently and without unnecessary delays?				
6	Do you think the time you have to wait for medical care in the hospital is reasonable?				

DIMENSION 3: ENABLING ADVISORY PROCESSES		1. Strongly disagree	2. Disagree	3. Neither	4. Agree	5. Totally agree
Mechanisms that support and facilitate the delivery of high-quality health services. These processes include efficient patient flow management, interdepartmental coordination, and scaling up the system to support the healthcare workforce						
Indicator: Effectiveness						
7	Do you agree that the availability of information received by your department has sufficient data quality to provide advice to solve the problems of inefficiency of services in the long term?					
Indicator: Accessibility						
8	Do the measures or strategies used in the hospital to improve equitable access manage to meet patient demand?					
9	Are there sufficient resources and personnel available to ensure the accessibility of the information in the required timeframes?					
DIMENSION 4: ENABLING SUPPORT PROCESSES		1. Strongly disagree	2. Disagree	3. Neither	4. Agree	5. Totally agree
Those procedures and systems that facilitate the efficient and effective operation of the hospital, without being directly involved in clinical care. These processes include human talent management, information technology, infrastructure, and support services						
Indicator: Effectiveness						
10	Do you believe that there is effective coordination between the different hospital services to facilitate medical care					
Indicator: Availability						
11	Do you think the hospital has modern technology, adequate facilities and support services to provide good care to patients?					
12	Do you consider that the hospital has enough staff to efficiently handle the daily needs of care; in different areas such as administration, information, legal, statistics to schedule appointments, manage medical records among others?					
USER SATISFACTION						
The positive perception that patients have in relation to the care provided and their experience in the health system		SCALE				
DIMENSION 1: ACCESSIBILITY		Totally in	2. Disagree	3. Neither	4. Agree	5. Totally agree
Ease with which patients can obtain health services in relation to location, schedules, and availability of medical resources.						
Indicator: Ease						
1	Do you think that the appointment assignment time for the first time was attended in a timely manner?					

2	Do you consider that the subsequent appointment assignment time was attended in a timely manner?					
Indicator: Time						
3	Do you agree with the waiting time it took you to receive medical care since your admission to the hospital, is it reasonable and appropriate for patients?					
DIMENSION 2: QUALITY Quality in hospital management focuses on the safety of the care provided that is effective, safe, user-centered, considering the time factor.		Totally in disagreement	2. Disagree	3. Neither	4. Agree	5. Totally agree
Indicator: Professional competence						
4	Do you consider that the health professionals of the hospital have empathy (good treatment, kindness, respect), to communicate with patients, work as a team and adapt to their health needs?					
Indicator: Compliance with standards						
5	Do you think that the hospital's professionals follow quality standards, using technical and scientific methods that guarantee best practices to ensure that treatments are effective?					
6	Do you consider that the hospital maintains in continuous operation the conditions of medical equipment such as x-rays, ultrasounds, tomographs, etc., so that health professionals can diagnose diseases in time and resolve emergencies during their care?					
7	Do you agree with the condition and availability of hospital furniture such as stretchers, chairs, benches, desks, tents, trash cans, dispensers?					
DIMENSION 3: COMMUNICATION Effective interaction between the human talent of health establishments, users and their families, which is essential to have security in quality care and user satisfaction. These processes include clear information transfer, mutual understanding, and establishing trust between actors		Totally in disagreement	2. Disagree	3. Neither agree	4. Agree	5. Totally agree
Indicator: Clarity						
8	The information given by the hospital staff in the different administrative services such as the user service window; care areas such as emergency, hospitalization; social networks (Facebook, Instagram, among others) is easy to understand?					
Indicator: Availability						
9	Do you think the hospital has enough staff to help patients during their medical care?					

DIMENSION 4: INFRASTRUCTURE						
A set of facilities, equipment and technologies that allow the effective and safe provision of health services. Hospital infrastructure includes not only buildings and their physical characteristics, but also advanced systems for locating personnel and medical equipment, which are essential for the efficient improvement of patient operability and safety		Totally in disagreement	2. Disagree	3. Neither agree	4. Agree	5. Totally agree
Indicator: Facility Status						
10	Do you consider that the facilities such as walls, ceilings, floors, accesses for people with disabilities, doors, stairs, elevator, sanitary batteries, basic services, among others, of the hospital maintain good hygiene and are well maintained?					
11	Are you satisfied with the comfort of the hospital facilities during your stay?					
Indicator: Availability						
12	Do you think that the medical equipment and technology that the hospital has solves the needs of patients for timely care?					

Note: Author's elaboration (2024).

Annex 3: Evaluation by expert judgment.

Content validation sheet for an instrument

Next, the data collection instrument (Questionnaire/Interview Guide) that will allow you to collect the information in this research is sent to you: **MANAGEMENT OF PUBLIC POLICY IN HEALTH AND USER SATISFACTION OF THE GUASMO SUR GENERAL HOSPITAL IN GUAYAQUIL, ECUADOR, 2024** Therefore, you are requested to evaluate the instrument, making, if necessary, suggestions to make the pertinent corrections. The content validation criteria are:

Criteria	Detail	Qualification
Sufficiency	The item/question belongs to the dimension/subcategory and is sufficient to obtain the measurement of this dimension/subcategory	1: Agree 0: Disagree
Clarity	The Item/Question is easily understood, i.e., its syntactics and semantics are adequate	1: Agree 0: Disagree
Coherence	The item/question is logically related to the indicator that is Measuring	1: Agree 0: Disagree
Relevance	The item/question is essential or important, i.e., it must be included	1: Agree 0: Disagree

Note. Criteria adapted from the proposal of Escobar and Cuervo (2008).