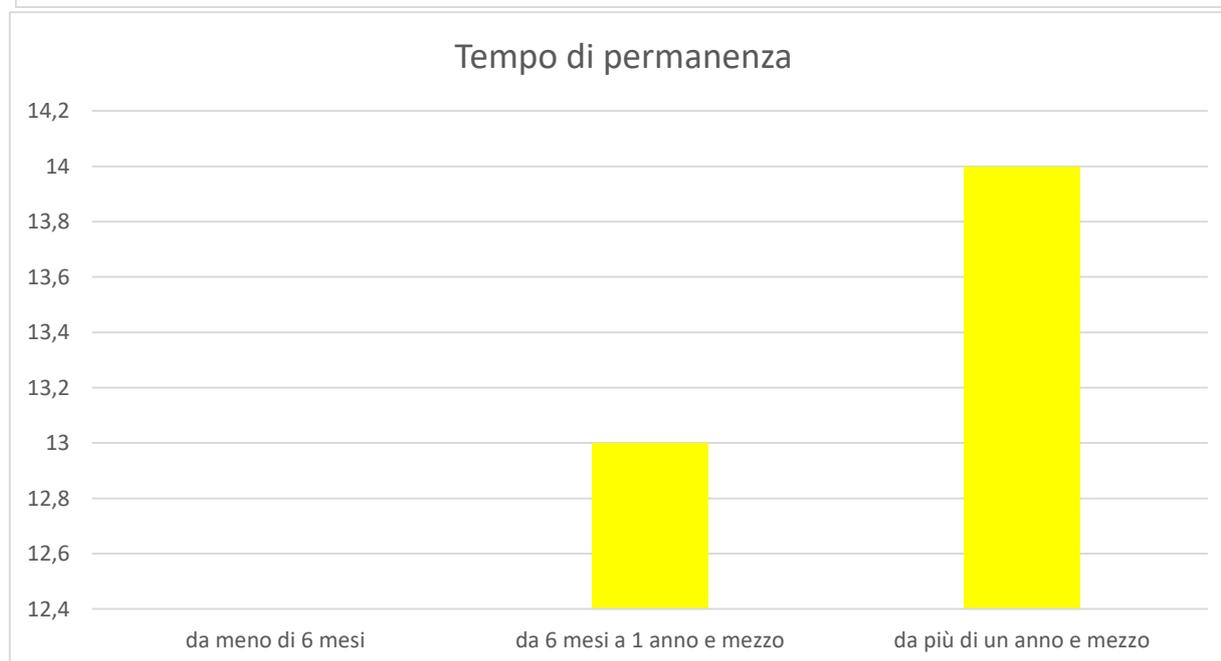
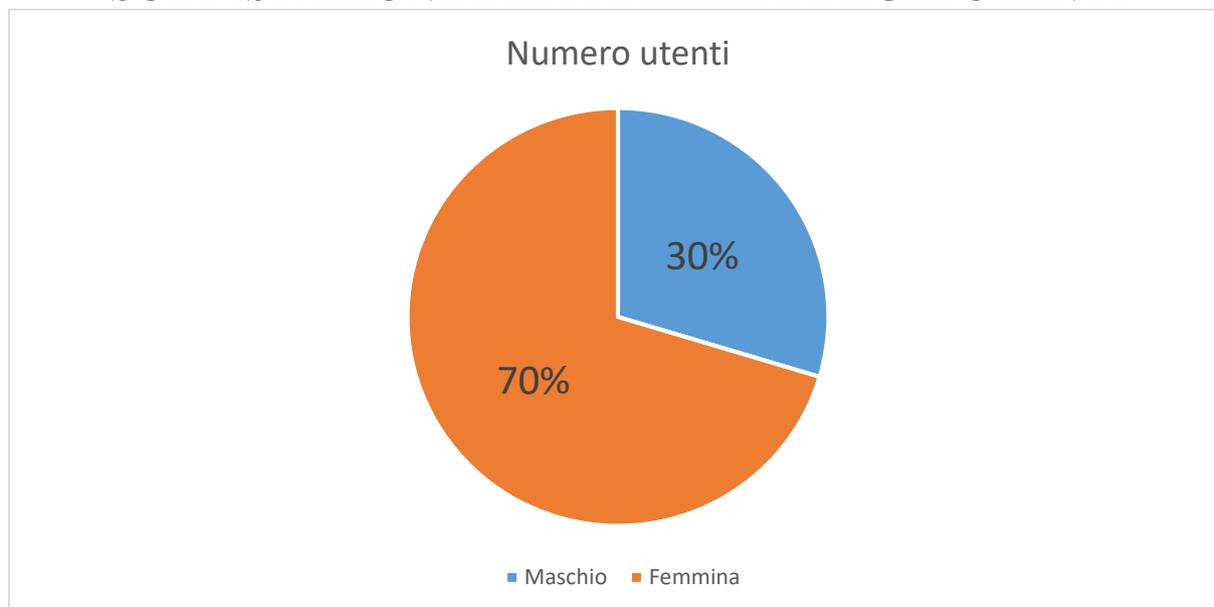
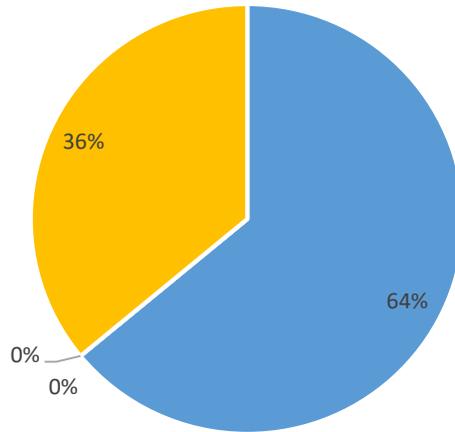


QUESTIONARIO DI GRADIMENTO SERVIZIO DI CASA RESIDENZA ANZIANI

RISULTATO QUESTIONARIO 2020 SUL GRADO DI SODDISFAZIONE DEI FAMILIARI DEGLI UTENTI

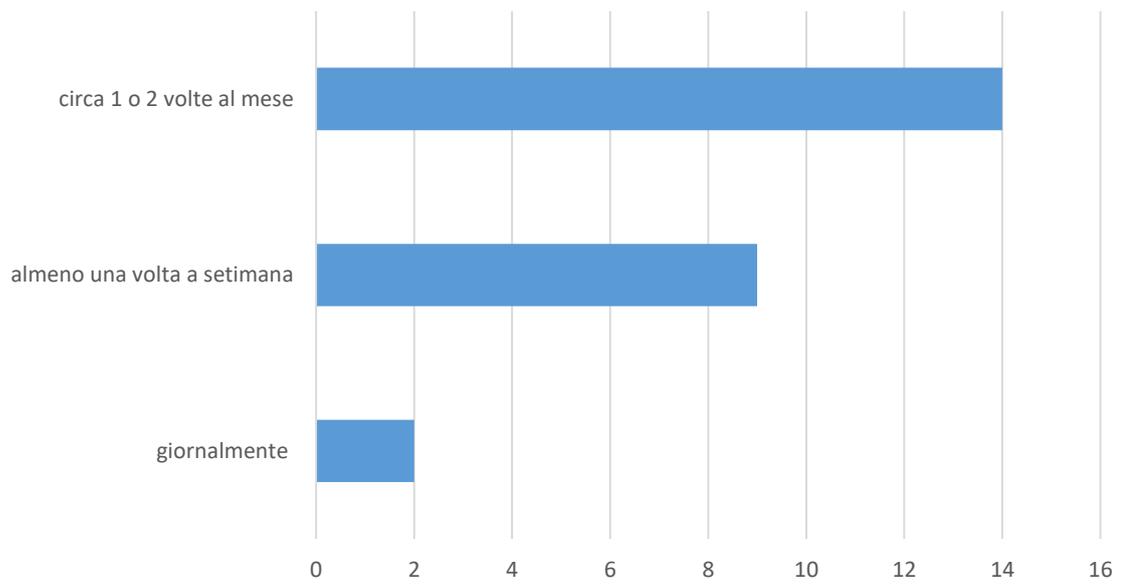


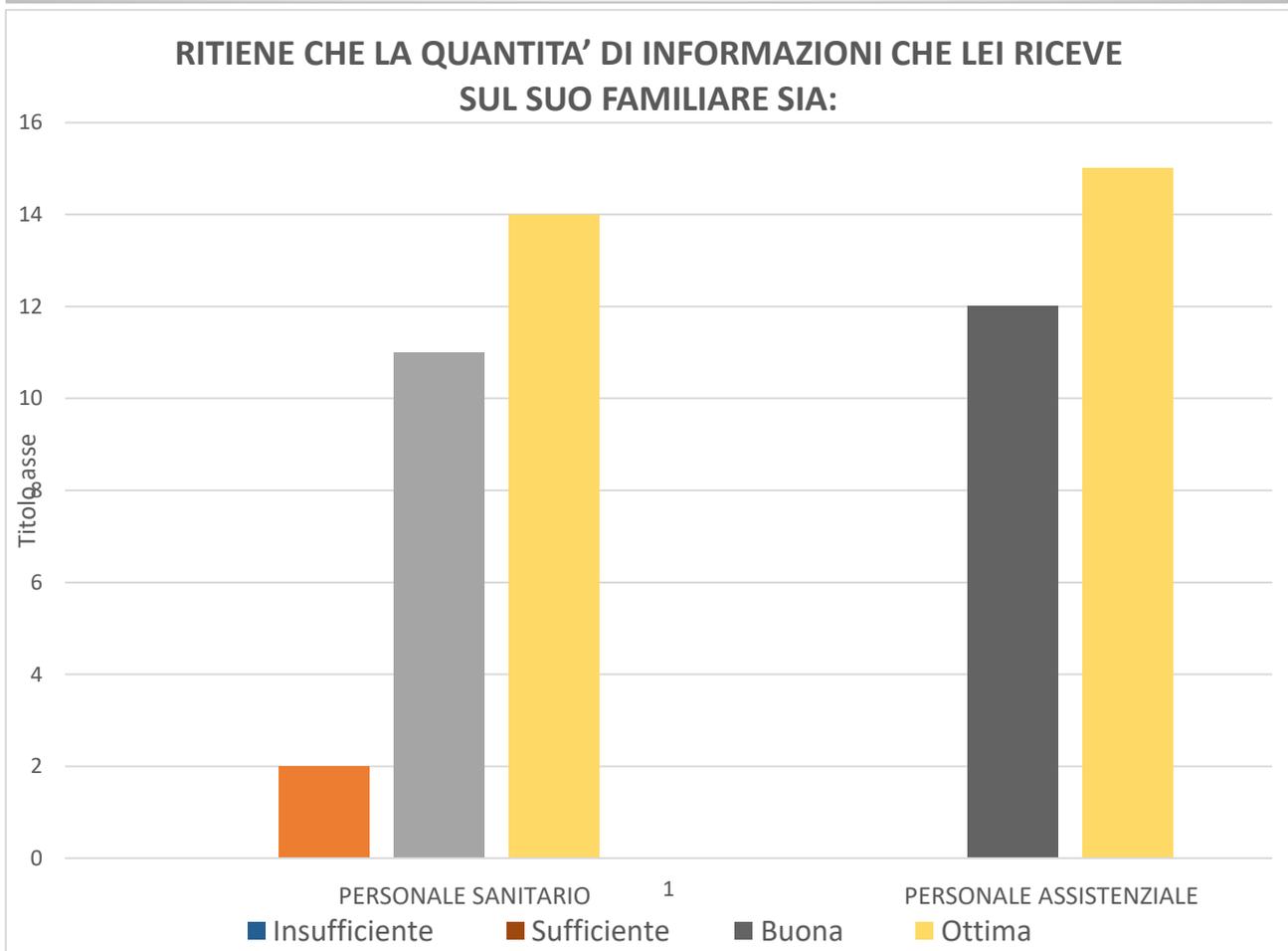
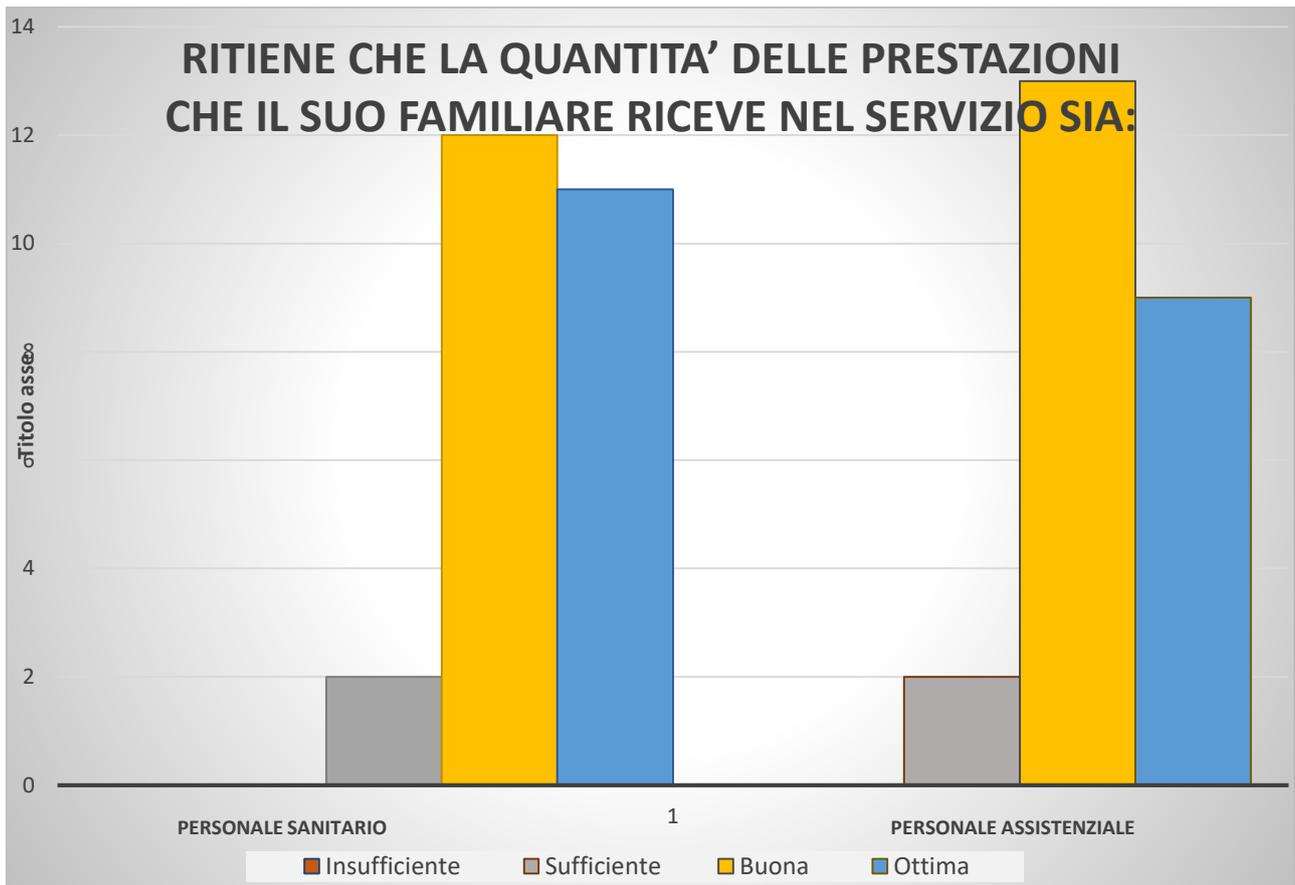
Grado di parentela



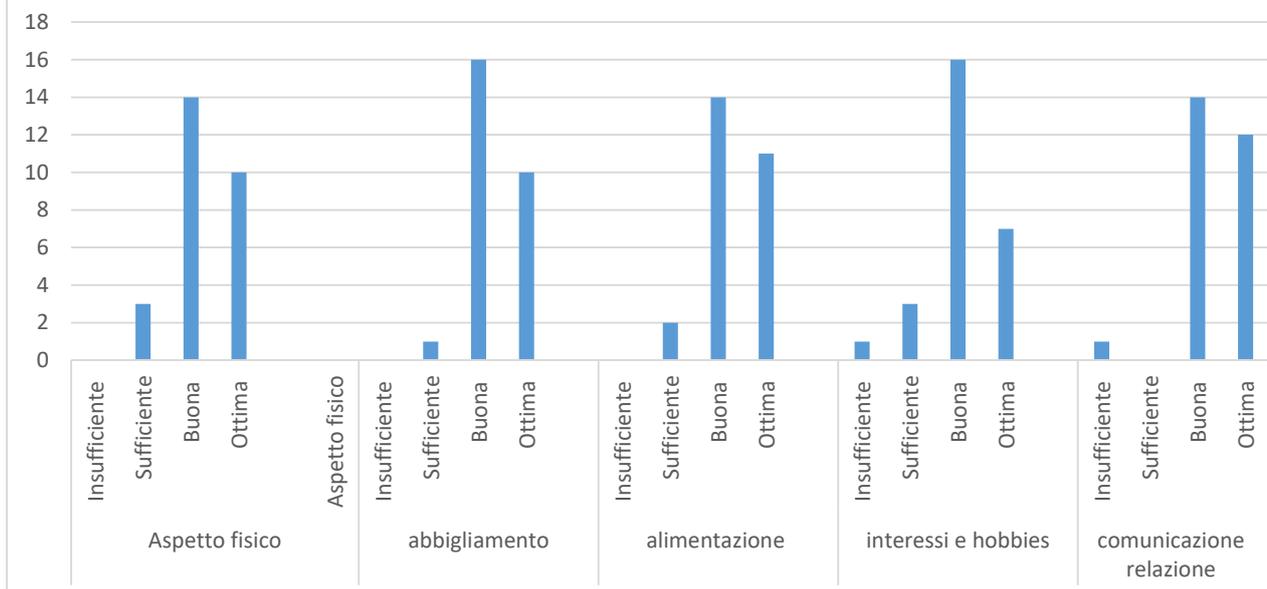
■ Figlio/a ■ Coniuge ■ Sorella/Fratello ■ Nipote o altro

Numero visite familiari

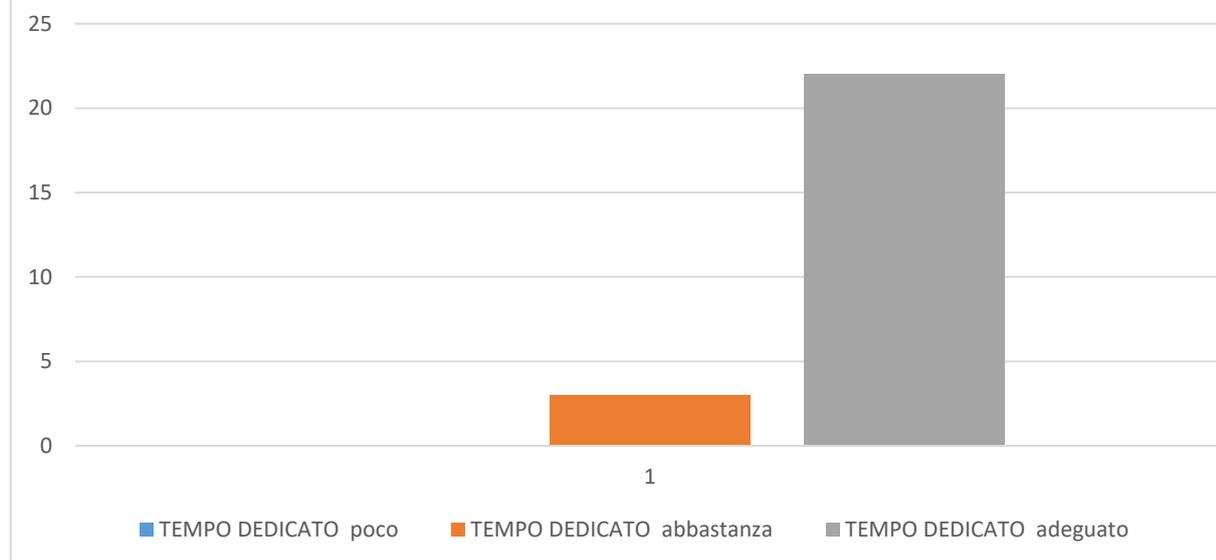




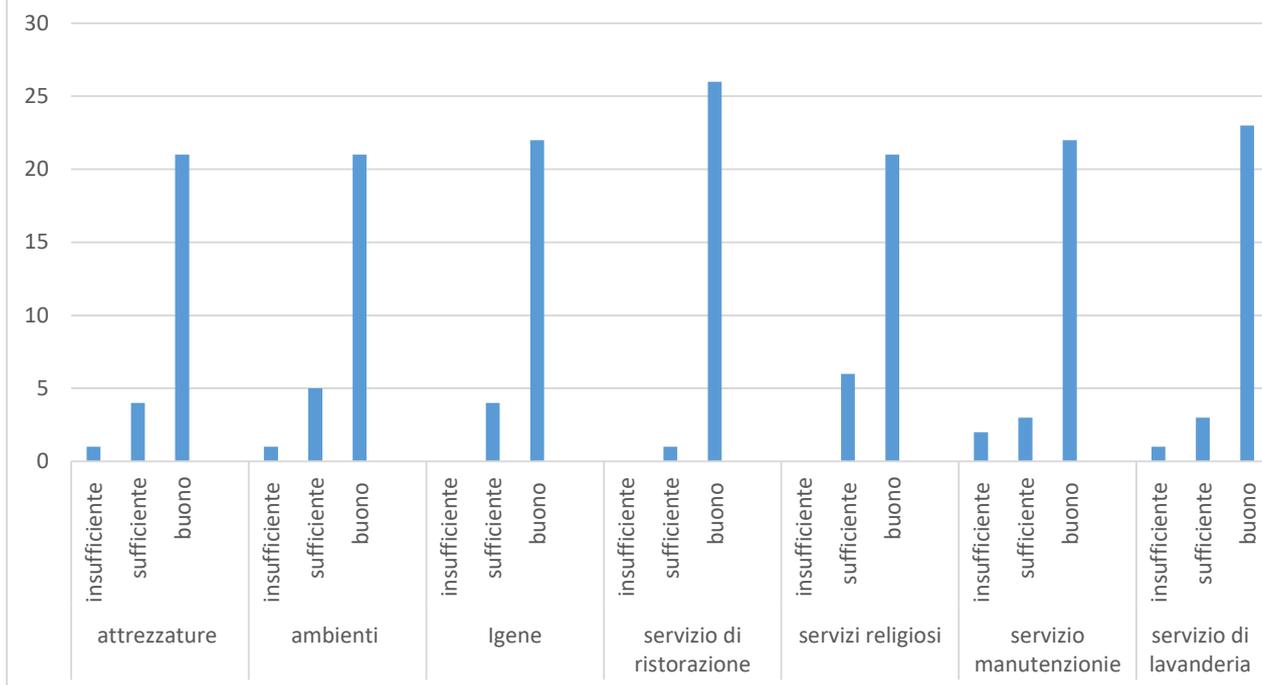
COME RITIENE SIANO CURATI DAL PERSONALE SOCIO ASSISTENZIALE I SEGUENTI ASPETTI RIGUARDO AL SUO FAMILIARE



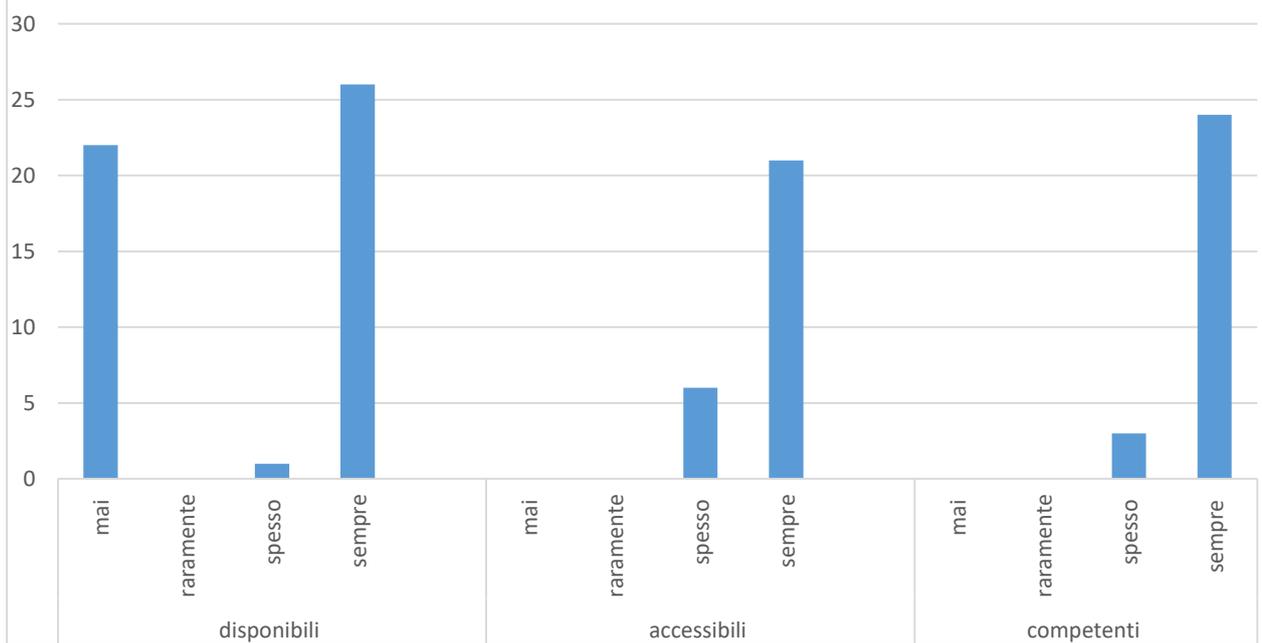
RITIENE CHE IL TEMPO DEDICATO DAL PERSONALE ALL'ASSISTENZA E AI BISOGNI QUOTIDIANI DEL SUO FAMILIARE SIA ADEGUATO

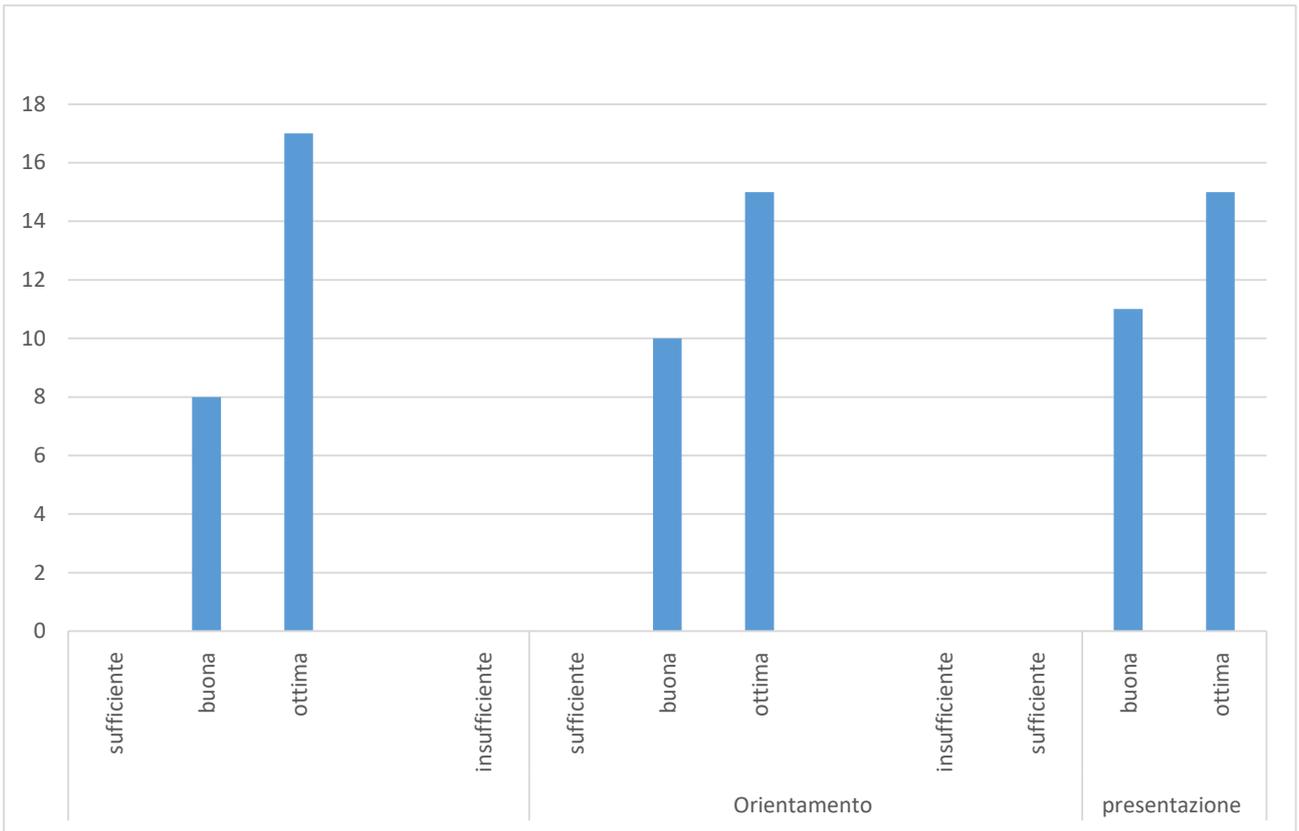


COME VALUTA I SEGUENTI ASPETTI

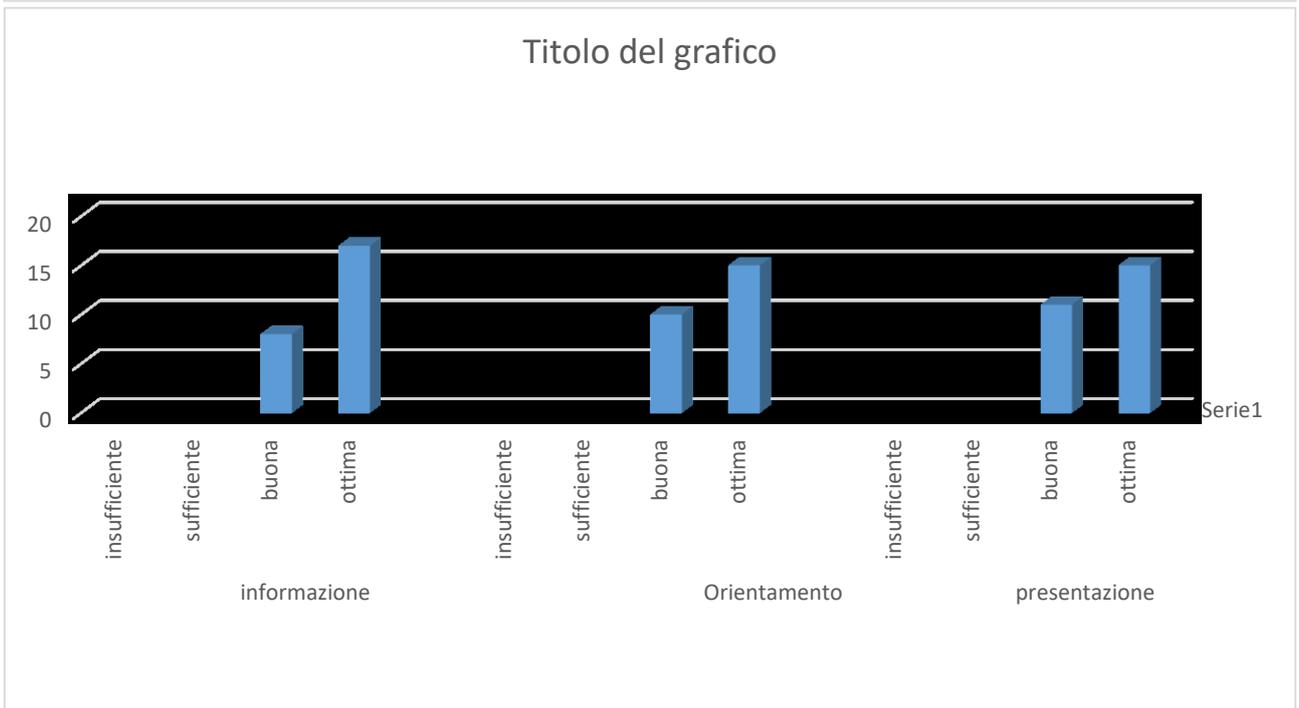


SERVIZI AMMINISTRATIVI

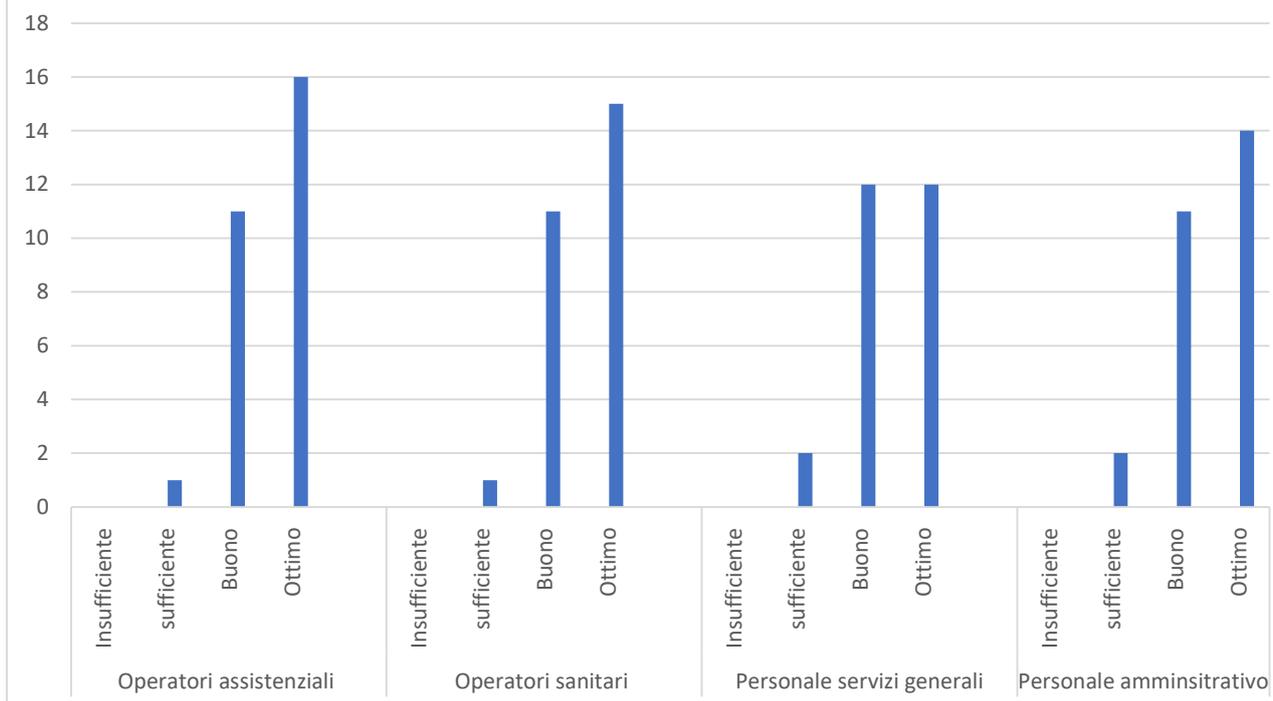




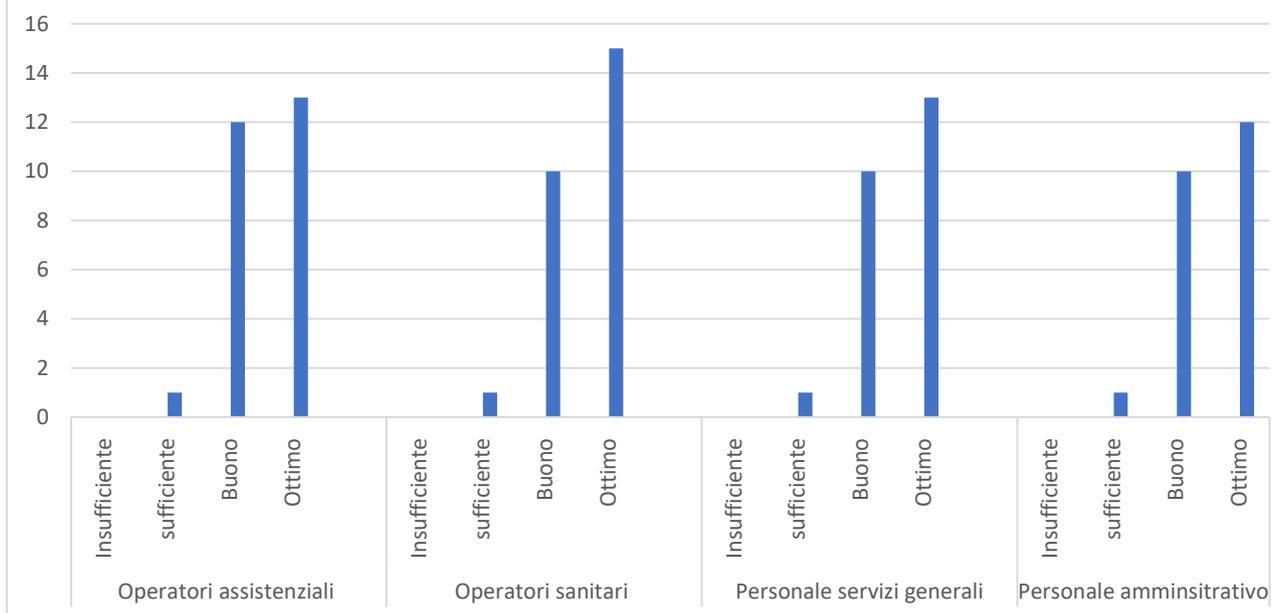
Titolo del grafico

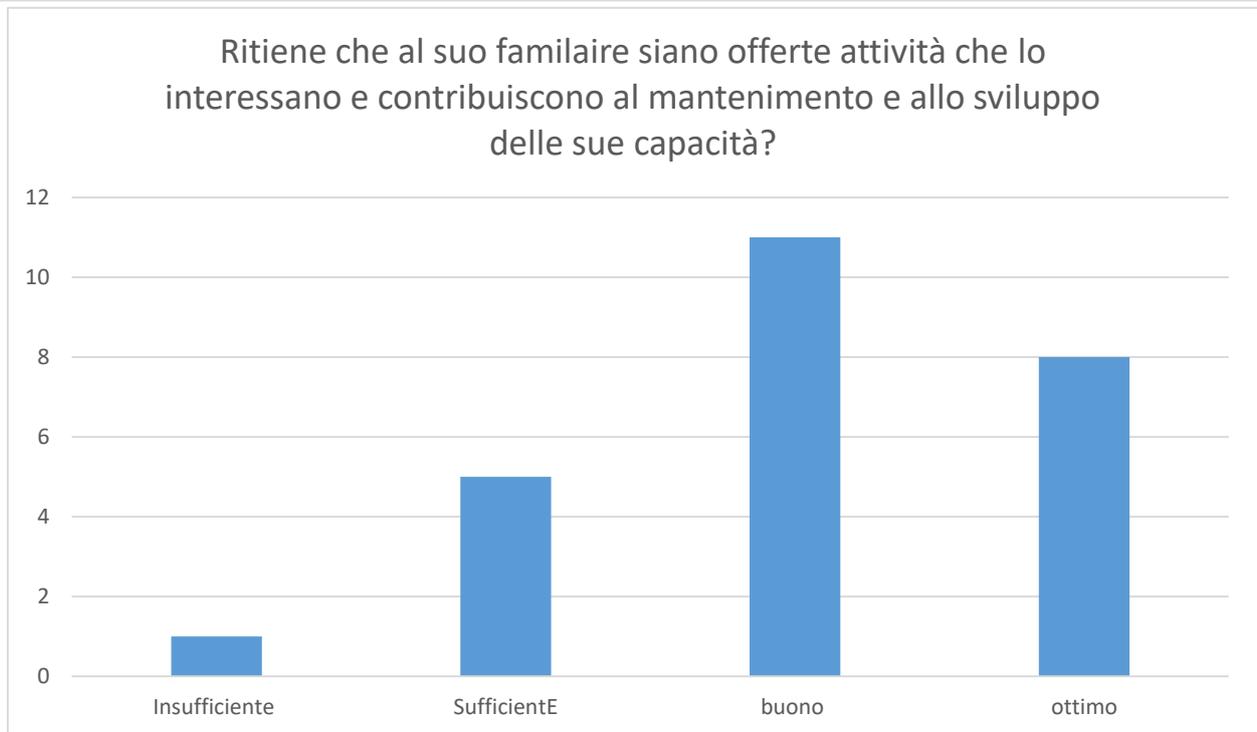
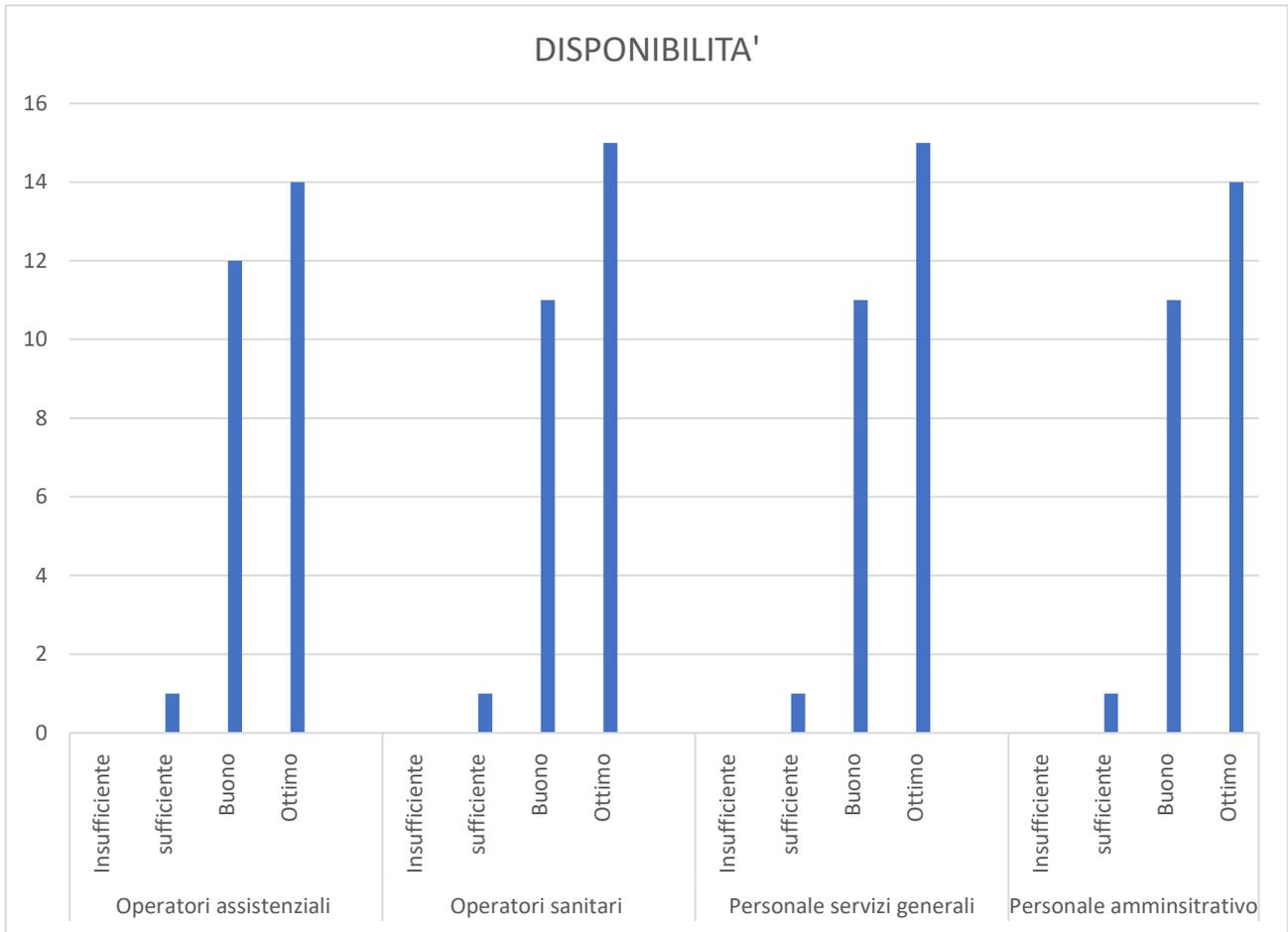


GENTILEZZA

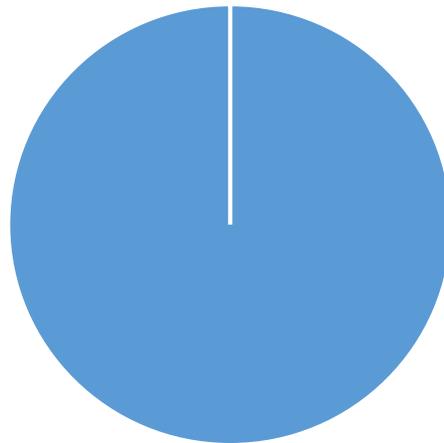


ATTENZIONE



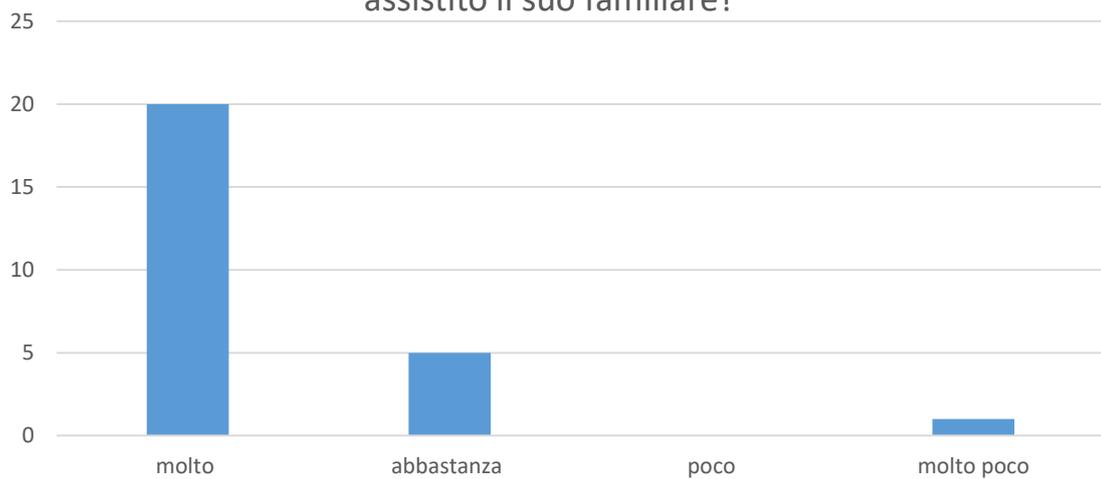


Consiglierebbe il servizio?



■ Si ■ No

Completivamente, quanto è soddisfatto di come viene assistito il suo familiare?



Completivamente, come valuta i servizi forniti?

