# CASAS DE ASISTENCIA
# PROGRAMA OPERATIVO ANUAL 2021.

**INSTITUCION: CENTRO DE ASISTENCIA SOCIAL ROSARIO CASTELLANOS**

**MUNICIPIO: SAN LUIS POTOSI**

**LOCALIDAD: SAN LUIS POTOSI**

**INVERSIÓN: 13'835,883.44**

**FUENTE DE FINANCIAMIENTO: SUBSIDIO GESLP**

| ACCION | Unidad de Medida | TIPO DE SERVICIO | | META ANUAL | AVANCE | PROGRAMACION DE METAS 2021 | | | | | | | | | | | | BENEFICIARIOS | | | | | | TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | | | | MENORES DE 0 A 11 AÑOS | | ADOLESCENTES DE 12 A 17 | | ADULTOS DE 18 A 59 | | |
| | | ABIERTO | CAUTIVO | | | ENE | FEB | MAR | ABR | MAY | JUN | JUL | AGO | SEP | OCT | NOV | DIC | HOMBRES | MUJERES | HOMBRES | MUJERES | HOMBRES | MUJERES | |
| **ATENCIÓN SOCIAL** | | | | | | | | | | | | | | | | | | | | | | | | |
| ESTUDIOS SOCIOECONÓMICO | ESTUDIO | * | | 0 | | 0 | 0 | 0 | 0 | | | | | | | | | | | | | | | 0 |
| VISITAS DOMICILIARIAS | VISITA | * | | 0 | | 0 | 0 | 0 | 0 | | | | | | | | | | | | | | | 0 |
| VISITAS DE SEGUIMIENTO | VISITA | * | | 2 | | 0 | 0 | 0 | 0 | | | | | | | | | | | | | | | 0 |
| **POBLACION ALBERGADA Y MOVIMIENTOS** | | | | | | | | | | | | | | | | | | | | | | | | |
| INGRESO | PERSONA | * | | 12 | 108% | 3 | 2 | 6 | 2 | | | | | | | | | | | | | | | 13 |
| EGRESO | ADOPCION | * | | 2 | 50% | 0 | 0 | 1 | 0 | | | | | | | | | | | | | | | 1 |
| | REINT. FAM | * | | 12 | 17% | 2 | 0 | 0 | 0 | | | | | | | | | | | | | | | 2 |
| | CANALIZACION | * | | 0 | 0% | 0 | 0 | 0 | 0 | | | | | | | | | | | | | | | 0 |
| | DEFUNCIÓN | * | | 0 | | 0 | 0 | 0 | 0 | | | | | | | | | | | | | | | 0 |
| **ALIMENTACIÓN ASISTENCIAL** | | | | | | | | | | | | | | | | | | | | | | | | |
| OTORGAR ALIMENTACIÓN A ALBERGADOS | PERSONA | | * | 18 | | 20 | 17 | 23 | 24 | | | | | | | | | | | | | | | 84 |
| | RACION | * | | 33,390 | 24% | 2,750 | 1,386 | 1,755 | 2,043 | | | | | | | | | | | | | | | 7,934 |
| **ATENCIÓN MÉDICA** | | | | | | | | | | | | | | | | | | | | | | | | |
| GENERAL | CONSULTA | * | | 36 | 17% | 2 | 2 | 0 | 2 | | | | | | | | | | | | | | | 6 |
| ESPECIALIDAD | CONSULTA | * | | 120 | 14% | 5 | 4 | 4 | 4 | | | | | | | | | | | | | | | 17 |
| INMUNIZACIONES | DOSIS | * | | 18 | 33% | 0 | 0 | 6 | 0 | | | | | | | | | | | | | | | 6 |
| ATENCIÓN ODONTOLOGICA | CONSULTA | * | | 14 | 0% | 0 | 0 | 0 | 0 | | | | | | | | | | | | | | | 0 |
| **TERAPIA REHABILITATORIA** | | | | | | | | | | | | | | | | | | | | | | | | |
| ESTIMULACIÓN TEMPRANA | SESION | * | | 0 | | 0 | 0 | 0 | 0 | | | | | | | | | | | | | | | 0 |
| TERAPIA FISICA | SESION | * | | 240 | 24% | 18 | 20 | 20 | 0 | | | | | | | | | | | | | | | 58 |
| TERAPIA OCUPACIONAL | SESION | * | | 75 | 68% | 16 | 8 | 8 | 19 | | | | | | | | | | | | | | | 51 |
| TERAPIA DE LENGUAJE | SESION | * | | 0 | | 0 | 0 | 0 | 0 | | | | | | | | | | | | | | | 0 |
| **ATENCIÓN PSICOLOGICA** | | | | | | | | | | | | | | | | | | | | | | | | |
| TERAPIA PSICOLOGICA INDIVIDUAL | SESION | * | | 720 | 38% | 46 | 66 | 68 | 90 | | | | | | | | | | | | | | | 270 |
| TERAPIA PSICOLOGICA GRUPAL | SESION | * | | 132 | 36% | 12 | 12 | 12 | 12 | | | | | | | | | | | | | | | 48 |
| **ATENCIÓN EDUCATIVA** | | | | | | | | | | | | | | | | | | | | | | | | |
| INICIAL | MENOR | | * | 0 | | 0 | 0 | 0 | 0 | | | | | | | | | | | | | | | 0 |
| PREESCOLAR | MENOR | | * | 0 | | 0 | 0 | 1 | 1 | | | | | | | | | | | | | | | 0 |
| PRIMARIA | MENOR | | * | 10 | 90% | 9 | 9 | 10 | 10 | | | | | | | | | | | | | | | 9 |
| SECUNDARIA | ADOLESCENTE | | * | 1 | 100% | 1 | 1 | 1 | 2 | | | | | | | | | | | | | | | 1 |
| BACHILLERATO | ADOLESCENTE | | * | 1 | 100% | 1 | 1 | 1 | 2 | | | | | | | | | | | | | | | 1 |
| **ATENCIÓN DE ENFERMERÍA** | | | | | | | | | | | | | | | | | | | | | | | | |
| SERVICIOS OTORGADOS | SERVICIO | * | | 840 | 55% | 138 | 106 | 108 | 108 | | | | | | | | | | | | | | | 460 |
| **RECREACIÓN Y CULTURA** | | | | | | | | | | | | | | | | | | | | | | | | |
| EVENTOS A LOS QUE SE ASISTIÓ | EVENTO | * | | 12 | 25% | 0 | 0 | 1 | 2 | | | | | | | | | | | | | | | 3 |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | |

**OBSERVACIONES:**

* PRESUPUESTO ANUAL AUTORIZADO PARA EL RUBRO DE ALIMENTACION, SUBSIDIO ESTATAL GESLP

** SE CONSIDERAN 5 RACIONES DE ALIMENTO PROPORCIONADAS DIARIAMENTE (DESAYUNO COMIDA Y CENA Y 2 COLACIONES)

CLAUDIA DEL ROCIO ROSALES FERNANDEZ
DIRECTORA GENERAL

CLAUDIA PALOMARES AZUA
ADMINISTRADORA DE CASA DE ASISTENCIA