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RESEARCH ARTICLE

THEY MAY FORGET YOUR NAME BUT THEY WILL NEVER FORGET HOW YOU MADE THEM FEEL - AN ORIGINAL RESEARCH TO EVALUATE THE SATISFACTION OF PARENTS AS WELL AS PATIENTS AND CORRELATE SATISFACTION LEVEL OF THE PARENTS WITH THEIR EDUCATION LEVEL

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ARTICLE INFO	ABSTRACT
Article History: Received 28 th August, 2018 Received in revised form 06 th September, 2018 Accepted 02 nd October, 2018 Published online 30 th November, 2018	 Background: Satisfaction is the health care recipients' reaction to their service experiences. According to pediatric treatment triangle given by Wright, treating a child patient involves a 1:2 transaction. But unfortunately, most studies concerning dental patients' satisfaction in pediatric dentistry have focused on the parent or care giver's satisfaction & not on the child's satisfaction. Objectives: To evaluate the level of parents' and the child's satisfaction with pediatric dental care provided at PG clinic of Pedodontics department & correlate both of them.
Key Words:	Methods: A cross-sectional study was conducted among parents $(n = 61)$ whose children received pulpectomy and also among the treated children for 2 months. They were asked to fill a self-administered double of the self
Parent, Education level, Patient, Pulp therapy, Satisfaction.	 dental satisfaction questionnaire. Data were recorded and analyzed statistically. Results: Overall average percent mean score of satisfied parents-76.26 ±5.91 &Overall average percent mean score of satisfied patient (5 ITEMS) - 73.14 % ± 10.07 . 16.4% children have given VAS SCORE - 5 Conclusion: Result of our study will help us to satisfy parents'& patients' expectations & to catch better standards in health care.

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INTRODUCTION

The term Satisfaction denotes health care recipients' reaction to salient aspects of the context, process and result of their service experience. When a patient is adequately served, then he or she should always have a voice in the process of care. All over the world, the major concern of health care agencies is now the quality of treatment. If patients reported any dental complaint, it may cause a great deal of anxiety and stress among dental surgeons. Being considerate in dental care is a vital feature of the value of care and affects the future utilization of the facility. Because clinical outcomes are dependent on patient cooperation and the latter relies on their satisfaction, patient satisfaction with health care is essential.

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Hence, it can be said that, without satisfied patients, health care is not qualified. Dissatisfaction ultimately results in patients changing their dental surgeon, which might have change the family and friends' perceptions of the dental practice. Therefore, to access patients' view regarding health care programs is very much necessary nowadays because patients are the primary source of data collection regarding the quality and effectiveness of care services, and because paying attention to their viewpoint during care planning is their right and should be considered. According to pediatric treatment triangle given by Wright in 1966, treating a child patient involves a 1:2 transaction. The dentist has to make communication with the child as well as the parents. But unfortunately, most studies concerning dental patients' satisfaction in pediatric dentistry have focused on the parent or care giver's satisfaction & not on the child's satisfaction. So the aim of the study is to evaluate the satisfaction of parents as well as patients to pulpectomy provided by the dental

postgraduate students and correlate satisfaction level of the parents with their education level.

MATERIALS AND METHODS

A cross-sectional descriptive observational study was conducted among parents (n = 61) whose children received pulpectomy and also among the treated children. At α probability type (A1 error) or level significant 0.05=5% and estimate percentage of satisfaction 73% from previous study with power 0.095, sample size should be at least 55. The parents & the children were asked to fill a self-administered dental satisfaction questionnaire between july and September 2018. Data were recorded and analyses using the Statistical Package for the Social Sciences Version 24 (SPSS Inc., Chicago, IL, USA) and GraphPad Prism version 5.

Inclusion Criteria

Patients & parents were interviewed when they last visited the dentist to ensure that they received the full pulpectomy therapy.

Exclusion Criteria

Patients, who did not finish their treatment plans or refused to participate in this study& their parents, were excluded from the study. The modified closed ended dichotomous survey questionnaire was based on Manal A. AlMutairi questionnaire and Mohamed Saad Mahrous & Tamer Hifnawy questionnaire to measure the criteria affecting parents' satisfaction. To ignore any standard format for answering, mixtures of negative and positive statements were set. So each participant has to read each item carefully before responding. In addition to the education level, Questionnaire of parent satisfaction consisted of 7sections: access (3 items); availability (2 items); pain (2 items) quality of treatment (9 items); clinic setup (2 items), continuity (2 items) and general satisfaction (2 items). Similarly self administered questionnaire was made for the patients. Simple language was used for easy understanding of the children. It was consist of 5 closed ended questionnaires and a VAS scale. Descriptive analysis followed by inferential statistics was done. Percentages, means, and standard deviations were calculated for qualitative and quantitative data. Chi-square test or Fischer's exact test was used to compare unpaired proportions, as appropriate. p-value ≤ 0.05 was considered for statistically significant.

RESULTS

When we had observed the percentage value, we noticed, 67.2% parents were satisfied because they don't have to wait for long time in the waiting area before the treatment procedure proceeds, 77.0% parents had mentioned that getting an appointment for their kids was not any troublesome procedure. 80.3% parents said that office hours were quite good and appointed doctors always asked about their preference before scheduling any appointment (Table 1). 63.9% parents came to our hospital due to inadequate pedodontists in their region & for 77.0% parents; our hospital was very conveniently located (Table 2). 67.2% parents didn't ever avoid bringing their child here due to any fear of pain &75.4% parents were quite satisfied with the pain management

Table 1. Parent's satisfaction on access

Item	Disagree $N(\%)$	Agree $N(\%)$
1) have to wait for long time in the waiting area	41 (67.2%)	20 (32.8%)
2) not easy to get an appointment for my child for dental care	47 (77.0%)	14 (23.0%)
3) Office hours are not good	49 (80.3%)	12 (19.7%)

Table 2. Parent's satisfaction on availability

Item	Agree N (%)	Disagree N (%)
1) I came here due to inadequate pedodontists in my region	47 (77.0%)	14 (23.0%)
2) hospital is very conveniently located	39 (63.9%)	22 (36.1%)

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ITEM	DISAGREE N (%)	AGREE N (%)
1) avoid bring my child here due to my fear of pain	41 (67.2%)	20 (32.8%)
2) Appointed doctors must do more to reduce pain	46 (75.4%)	15 (24.6%)

Table 4. Parent's Satisfaction on Quality of Treatment

Item	Agree N (%)	Disagree N (%)
1) Appointed doctors are quite alert while checking my child	48 (78.7%)	13 (21.3%)
2) always treat my child with respect	55 (90.2%)	6 (9.8%)
3) as thorough as they should be	50 (82.0%)	11 (18.0%)
4) They are able to treat most dental problems	57 (93.4%)	4 (6.6%)
5) inform you about the prescribed medicine	43 (70.5%)	18 (29.5%)
6) inform you about the progression & prevention	48 (78.7%)	13 (21.3%)
7) usually explain what they will do to my child	36 (59.0%)	25 (41.0%)
8) filling did not dislodged or broken	52 (85.2%)	9 (14.8%)
9) instrument were properly sterilized	52 (85.2%)	9 (14.8%)

Item	Agree N (%)	Disagree N (%)
1) Comfortable waiting area	50 (82.0%)	11 (18.0%)
2) Privacy of treatment was ensured	51 (83.6%)	10 (16.4%)

(Table 3) 78.7% informed that appointed doctors are quite alert while checking their child, 90.2% reported that here dental surgeons always treat their child with respect, 82.0% felt that doctors here are as thorough as they should be, 93.4% thought that they were able to treat most dental problems &70.5%

stated that they wereinformed about the prescribed medicine by the doctors (Table 4). 82.0% parents felt that the waiting area is pretty comfortable & according to 83.6% parents, dental surgeons are quite successful here to meet their expectations of maintaining the privacy of treatment (Table 5).

Table 6	. Parent's satisfaction	on on continuity	of treatment

Item	Agree N (%)	Disagree N (%)
1) same doctor check my child every time I come to the college	51 (83.6%)	10 (16.4%)
2) Information was given about what to do, if the same problem occurs after admission or discharge.	47 (77.0%)	14 (23.0%)

Table 7. Parent's satisfaction on general satisfaction

Item	Agree N (%)	Disagree N (%)
1) This dental hospital is very modern & up to date	44 (72.1%)	17 (27.9%)
2)Dental care at this college need to be improved	14 (23.0%)	47 (77.0%)

Item	Mean %	SD	
Access (3 items)	74.83	±6.81	
Availability (2 items)	70.45	± 9.26	
Pain management(2 items)	71.3	±5.79	
Quality of treatment (9 items)	79.6	± 10.30	
Clinic set up (2 items)	82.8	±1.13	
Continuity (2 items)	80.3	± 4.66	
General satisfaction (2 items)	74.55	±3.46	
Overall average percent mean score (22 items)	76.26	±5.91	

Table 8. Overall satisfaction for the 7 main disciplines

Item	Agree N (%)	disagree N (%)
1)fearful before coming to the dental hospital & after talking to the dentist did your fear decrease	48 (78.7%)	13 (21.3%)
2)want to come here again for your dental treatment	50 (82.0%)	11 (18.0%)
3) Did the doctors do something to relieve your pain	42 (68.9%)	19 (31.1%)
4) Did they explain you the procedure	35 (57.4%)	26 (42.6%)
5) was your chief complain treated	48 (78.7%)	13 (21.3%)

Table 9. Patient Satisfaction

ITEM	EDUCATION LEVEL					TOTAL	р
	UE (N=5)	PS (N=8)	IS (N=14)	HS (N=16)	UN (N=18)	(61)	VALUE
1.have to wait for long time in the waiting area	1	3	9	13	15	41	0.87288
2) not easy to get an appointment	2	2	10	15	18	47	0.28014
3) Office hours are not good	2	4	10	16	17	49	0.33706
AVAILIBILITY							
1) inadequate pedodontists in my region	1	2	12	14	18	47	0.12114
2) hospital is very conveniently located	2	3	9	11	14	39	0.5485
PAIN							
1.avoid bring my child here due to my fear of pain	2	3	9	12	15	41	0.5485
2) doctors must do more to reduce pain	2	4	10	14	17	47	0.4777
QUALITY							
1) doctors are quite alert	2	4	12	14	6	48	0.0192
2) treat my child with respect	2	6	14	14	18	54	0.0004
3) as thorough as they should be	1	8	10	16	15	50	0.0065
4) able to treat most dental problems	2	7	14	16	18	57	0.0004
5) inform you about the prescribed medicine	1	3	12	13	14	43	0.0164
6) inform you about the progression & prevention	2	5	12	14	15	48	0.0511
7) usually explain what they will do to my child	1	2	10	9	13	35	0.034*
8) filling did not dislodged	3	7	12	15	15	52	0.2627
9) instruments were properly sterilized	4	8	12	13	11	48	0.4354
CLINIC							
1)Comfortable waiting area	4	7	10	14	16	51	0.6030
2)Privacy was ensured	4	6	12	14	16	52	0.6030
CONTINUITY							
1) same doctor check my child every time	2	3	13	16	17	51	0.0045
2)Information was given about what to do, if the same problem							
occurs after admission or discharge.	1	2	13	14	17	47	0.0003
GEN SAT.							
1)hospital is very modern & up to date	4	7	10	11	13	45	0.7263
2)Dental care at this college need to be improved	4	8	9	13	13	47	0.7263

83.6% parents observed thatsame doctor check their child every time they came to the college to maintain the continuity of treatment .77.0% parents were informed about what to do, if the same problem occurs after admission or discharge (Table 6). As reported by 72.1% parents, infrastructure of this dental hospital was very modern & up to date. 77.0% parents said dental care at this college was up to the mark (Table 7). 74.83 $\pm 6.81\%$ parents were satisfied with the access of treatment, 70.45 ± 9.26 % with availability of pediatric dental surgeons, 71.3 \pm 5.79 % with the pain management, 79.6 \pm 10.30 with the quality of treatment, 79.6 ± 10.30 % with quality of treatment, 82.8 ± 1.13 % with clinic set up, 80.3 ± 4.66 % with continuity of treatment procedure &74.55 ±3.46 % showed general satisfaction (Table 8). By calculating Overall satisfaction for the 7 main disciplines, we have got the average percent mean score of satisfied parents, the value is, 76.26 ± 5.91 %. 78.7%child patients stated that they werequite fearful before coming to the dental hospital & after talking to the dentist their fear level decreased. 82.0% of themwanted to come here again for their dental treatment.68.9% informed thatdoctors did some procedure to relieve your pain.57.4% said that they were well informed about the whole procedure beforehand and according to 78.7%, their chief complaint was treated (Table 9).Overall average percent mean score of satisfied patients (5 items) -73.14 % \pm 10.07.16.4% children have given VAS score - 5 When we correlate the satisfaction level with the education level of satisfied parents, we have seen, most of the satisfied parents to quality & continuity of treatment are either high school passed or educated up to university level and the result is statistically significant (Table 10).

DISCUSSION

The average percent mean score for satisfaction of parents shows a mean percentage of 76.26 ± 5.91 . Although this is considered high, it was still lower than that reported by Mohamed Saad Mahrous et al.[1] (79.5± 10.93%) & Bedi et. al. [2] (89%) but better than the satisfaction response reported by Othamn and Abdel-razal [3] (61.7%). Parents satisfaction level almost correlates with the patient's satisfaction (73.14 % \pm 10.07). But the overall results on satisfaction can't point out the weaknesses of the service. Only further investigation on the specific aspect of care will tell us the exact causes of expressed dissatisfaction. Dentists should explain the procedures before the treatment, which is a very important aspect in the patientdentist satisfaction domain represented with only 59.0% of satisfaction among the studied sample, which is much lower to what was found by Mahrous et al. [1] (78%) and so we should put high priorities on educating the students on and about the ideal way of communication and patient-dentist interaction. Rankin and Haris [4] reported that patients dislike having a dentist who begins treatment without any explanation. Parents, who were highly satisfied to the quality & continuity of treatment, mostly had high school education or graduated. Increased level of understanding & overall increased healthcare awareness was seen among parents with high standard of living. Fear is still considered to be a major cause for noncompliance in dentistry, value of parents are satisfied with the pain management is quite high in this study (71.3 ± 5.79) which is contrary to the study done by Manal A. AlMutairi et al. [5], where 76 % parents sometimes avoid bringing their children due to fear of pain. Strong relationships between dental anxiety and refusal of dental care have been previously reported. [6,7,8]. But when we had recorded the child's perspective of pain, most of the children gave VAS

score 5, which denotes distressing pain. May be the child only can recollect the painful memory of local anaesthetic injection of their 1^{st} appointment. This study found that most of the items under technical competency were acceptable, which similar to other studies [9,10]. This can also be explained by the fact that the facility offering the service at our college is of high quality and modern for providing dental care services to the community.

Conclusion

Finally, our pediatric department has been successful in achieving parents' satisfaction regarding their treatment and other operational aspects. Such studies related to patient & parent satisfaction will definitely help us to increase our standard of treatment. Future follow up studies are expected with larger sample size so that we can quantify our improvement by comparing with the previous records as the satisfied patients can only give us a successful practice.

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Source of funding: Nil

Glossary of Abbreviations

HS: High school IS: Intermediate school PS: Primary school UE: Uneducated UN: University VAS: Visual Analogue Scale.

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