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Satisfaction Survey of Patients Treated at the Joint Prosthesis Service of the Dental Consultation and Treatement Center, CCTD, of Casablanca, Morocco

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Abstract: Respect for patients' needs and wishes is central to all health systems with patient satisfaction increasingly being used as a measure of quality of care. Every patient expects to be treated according to current scientific data and in the most humane reception and care conditions possible.1,8 The main objectives of our study were: To evaluate the satisfaction level of the patients treated at the joint prosthesis service of the Dental Consultation and treatement Center, CCTD, of Casablanca, with regard to: Reception, care, care environment, communication, information and interpersonal relationship.14,15 To deduct, based on the results, recommendations to improve our services for better care.

Keywords: Joint Prosthesis Service, Dental Consultation

1. Introduction

Respect for patients' needs and wishes is central to all health systems with patient satisfaction increasingly being used as a measure of quality of care. Every patient expects to be treated according to current scientific data and in the most humane reception and care conditions possible. The main objectives of our study were: To evaluate the satisfaction level of the patients treated at the joint prosthesis service of the Dental Consultation and treatement Center, CCTD, of Casablanca, with regard to: Reception, care, care environment, communication, information and interpersonal relationship. To deduct, based on the results, recommendations to improve our services for better care.

2. Material and Methods

- In order to achieve our objectives, we conducted a 3 months descriptive cross-sectional survey.
- Before starting the actual survey, we conducted a presurvey to assess the comprehension, acceptability, calibration among the interviewers, the duration of the interview and the validity of the questionnaire.
- The sample size was 169 patients. We were interested in all the patients followed by 5th year students at the end of the 2017/2018, and treated in the joint prosthesis service.
- Otherwise, we excluded patients who were unable to respond or who could not be contacted.
- The data was collected using a direct questionnaire and via phone calls.
- Data analysis and all statistical calculations were carried out using Microsoft Excel software.

3. Results

In our sample we noted a predominance of:

- The age range between 30 and 50 years with a percentage amounting to 53.9%.
- Female gender with a percentage of 72.2% against 27.8% for the male gender

Regarding professional activity, 64% of patients were without profession

In terms of medical coverage, 76.4% of patients were covered, the vast majority, 66.9%, of whom benefited from the Medical Assistance Plan for the Poorest patients, called RAMED.

Regarding the distribution according to the knowledge of the CCTD, 64.5% of patients were referred by a doctor from the public sector.

The reasons for choosing the CCTD revealed that 41.4% of patients chose it for the quality of care while 39.7% chose it for the lower cost of care.

As for the reception, the results that we were able to draw from the survey are as follows:

- 58% of patients judged the quality of reception received in the joint prosthesis service to be good.
- For the waiting time, 43.2% of patients waited between 15 and 30 minutes.

In terms of hygiene measures, 68.6% of patients rated it as excellent, while 31.4% rated it as good.

The items dealing with interpersonal relationships show:

- 88.2% of patients rated the trainees' behavior as excellent.
- 75.7% of patients reported that the behavior of the supervisors was excellent.

We also noted that 40.8% of patients found the staff members to be always friendly and polite, while 31.4% did not have contact with the staff.

The results also showed that:

50.9% of patients said that they had always received explanations during treatment while 29% had received them only often.

As shown in the second graph (n° graph), 46.2% of the patients were involved in the various therapeutic decisions whereas 6.5% were very rarely to never involved.

For the time management component:

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- The survey found that 36.7% of patients rated the time spent in the dental chair as normal while 32% rated it a bit long.
- Concerning the interval between appointments, 36.7% of patients judged it as normal while 31.3% considered it to be too long.
- Regarding the total duration of treatment, it turned out that 37.9% of patients found it very long while 32.5% found it normal.

The last items of our survey related to the evaluation of the overall satisfaction of the participants:

- 90.5% of patients were satisfied or very satisfied with the final result obtained, while 6% were not satisfied.
- Finally, 84.6% of patients said they would certainly recommend the CCTD to a loved one, while 10.1% of patients said they would probably recommend it

4. Discussion

The predominace of patients aged 30 to 50 years in our population can be explained by the concern of this age group for their dental aesthetics. It is at this age when patients are active professionally and socially. A similar study carried out in Senegal² on a sample of 400 participants, also revealed that 66.3% are young patients and the average age is 30.1 years.

We found that 66.9% of patients consulting our joint prosthesis service are of a low socio-economic level and are beneficiaries of the RAMED regimen (Medical Assistance Plan for the Poorest Patients). This result is logical since our center, CCTD, offers a basket of treatments free of charge to RAMED card holders.

A similar result was reported by a study conducted at the Department of Conservative Odontology and Endodontics at Cocody University in Abidjan in 2006 which shows that 90% of patients are uninsured.¹²

It has been found that 64.5% of patients are referred by public health professionals. This result shows, on the one hand, that the CCTD by its competence panel is a pole of excellence, and on the other hand that health centers and outlying hospitals do not have the necessary equipment and materials to perform joint prosthetic procedures. As a result, the CCTD is clearly complementary to the liberal care offer.

Our study revealed that:

- 41.4% of patients consulted the CCTD for the quality of care.
- 39.7% of patients came to the CCTD because of lower cost of the traitements.

Indeed, the CCTD is a multidisciplinary university-hospital center known for its professional skills and specialized staff. It offers quality dental care to all of its patients at affordable prices. In addition, holders of the RAMED card can benefit from free dental healthcare.

We note that the majority of patients, 90%, were satisfied with the reception. While it has been found that in France⁷,

on a sample of 260 patients, 75% are completely satisfied with the 'welcome' received, and the friendliness score is excellent (92.5%).

A good welcome helps reassure and put the patient immediately in good conditions for his treatment.

The rate of dissatisfied patients reached 47.9% with regard to the waiting time in the waiting room. This parameter was noted by several authors^{16,25} who found that the waiting time is a very important factor of dissatisfaction.

For the respect of hygiene procedures: the satisfaction rate of our patients was 68.6%. This result is due to the efforts of our center to apply international standards in terms of hygiene ans asepsis, and also to the supervision of works by the professors and specialists, which reassures patients and guarantees quality care. To compare, the survey of the Nancy University Hospital gives a result of 43.8% satisfaction with respect for hygiene rules.

The majority of patients are satisfied regarding the relations with their treating practitioners, as prooved by the recorded percentages which exceed 90% for items concerning the behavior of supervisors, student trainees and staff.

70% of patients are satisfied with the explanations provided to them and their participation in therapeutic decisions.

The majority of patients were dissatisfied with the length of the dental care, as evidenced by the percentages presented:

- 62.7% are dissatisfied with the time spent in the dental chair.
- 63.4% are dissatisfied with the time between two appointments.
- 66.9% are dissatisfied with the total duration of the dental care.

The lengthned « duration of treatment »factor depends on several parameters which remain time-consuming in working time, including:

- The lack of a dental assistant. Pair work is not always operational.
- The number of repetitive « go & returns » trips by trainees from the dental chair to the sterilization place consumes a great deal of time
- The distance between the dental chairs and the sterilization place.
- The existence of complex cases requiring pre-prosthetic care in other services
- The frequency of treatment sessions reduced to one vacation per fortnight given the large number of trainees per group and sometimes by the use of the same work box (dental chair) by two trainees.
- The delivery time of the prosthetic works requested by the laboratory which is at least a week.
- The vocation of a university hospital center which remains firstly the training of trainees beside the dispensation of care.

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The last part of our survey deals with the assessment of overall satisfaction of care: the majority of patients, 90.5%, were satisfied with the care they received at the CCTD. This result remains proof of the good quality of care received in this center. Other authors, such as BENJAMIN and al¹⁴report a similar score of 87.1% satisfaction with their study in a prosthesis department as well.

Upcoming recommendations to a relative: the majority of patients (84.6%) will definitely recommend the prosthesis service to those around them, a much lower portion of 10.1% will probably recommend it, and a minority which does not exceed 5% formally advise against it.

5. Recommendations

Through the results of this study, we found that some steps in the patient management process need to be improved:

- Concerning reception of the patients and interpersonal relations, it is wise to organize training workshops for the benefit of all actors and operators working in and with the service.
- Review the semiannual distribution of the joint prosthesis internships to allow an appointment frequency of once a week which would reduce the total duration of treatment.
- Better management of appointments through online or internet computerization.
- The reception of patients' complaints through e-mail, phone call or suggestion box.

6. Conclusion

Despite the overall very positive results of our study, the percentage of dissatisfaction obtained, although very low, should push us to provide more efforts to correct certain shortcomings noted by our study such as the frequency between appointments or the total duration of treatment. It would be very interesting to regularly renew this satisfaction survey, to assess the improvements implemented, preferably using computer applications, and this for better responsiveness to our patients complaints, always with the concern of continuously improving the quality of our services.

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