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Original research article

The satisfaction with health care quality in dental clinics in the Slovak Republic



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ABSTRACT

In this work, the overall degree of satisfaction with the health care quality of dentists is analyzed in terms of general satisfaction, technical quality, communication, interpersonal and financial aspects, time spent with the doctor, and health care accessibility and convenience. We have used a standardized questionnaire: "Patient Satisfaction Questionnaire" (PSQ III, long-form). The questionnaire collection was realized in dentists' waiting rooms from November 2014 to April 2015. Completed questionnaires were obtained from 433 subjects (53.6% were men and 46.4% women). We compared two groups of respondents. In the first group were respondents who had not changed their dentist over the past year ($n = 349$), and in the second were respondents who had changed them ($n = 84$). The highest degree of overall health care satisfaction was seen in males (2.80 ± 0.18), and in the age group of 30–49 years (2.70 ± 0.27). A higher degree of satisfaction with the technical health care quality was seen in subjects who changed their dentists (2.71 ± 0.36). The highest degree of satisfaction with the health care quality was related to the interpersonal aspect (3.29 ± 0.47) and to communication (3.11 ± 0.52). The comparison of the overall health care satisfaction between the two groups of respondents has been confirmed as statistically significant. According to our results, we recommend the national developmental team provide support by implementing positive changes in health care quality, and by performing an approach known as "advanced access".

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Introduction

The health care quality (HCQ) is a summary of the results achieved in prevention, diagnostics and treatment, based on medical science and practice. It is determined by the needs of the population. New information and communication technologies rank among the key tools for the improvement of HCQ [1]. According to Article 2.1a of Act No. 576/2004 Coll. on health care services related to health care and on amendments to certain laws, the goal of health care is lifespan extension, improving the quality of life and ensuring the healthy development of future generations. National health policy that respects the attributes of quality development also ensures the long-term and continuous HCQ improvement. However, health care institutions are solely responsible for implementing specific actions of the management and continuous improvement of HCQ [2].

Demographic characteristics, previous experiences, expectations, and cultural and social aspects of private life are the main factors with the greatest impact on patient satisfaction in the provision of health care [3].

A clinical audit is the most important tool for HCQ increasing. It is one of the major components that are generally considered to provide an essential contribution to improving the quality of patient care [4]. The time factor is the additional determinant of the HCQ. Successful HCQ programs should be planned for long periods, last up to several decades, and use the experiences from the continuous process of health care improvement.

The aim of the study is to determine the overall level of patient satisfaction with the health care quality at the dentist, and to find out how patients who have/have not changed their dentist in the last year evaluate it. Another objective of the study is to determine the level of satisfaction with the HCQ in terms of general satisfaction, technical quality, communication, interpersonal and financial aspects, time spent with the physician, health care accessibility and comfort.

Materials and methods

This study analyzed both the overall satisfaction with the HCQ in dental clinics and also the particular categories of satisfaction with the health care provided.

The standardized questionnaire, "Patient Satisfaction Questionnaire," PSQ III, long-form was used [5]. The questionnaire itself was preceded by several questions regarding basic demographic data and questions about the reasons for changing dentist. The standardized questionnaire, PSQ III, consists of 51 statements focusing on the quality of the health care provided. Respondents were free to choose an answer on a scale from 1 to 5, which signified to what extent they agreed with each statement (1 – strongly agree, 2 – agree, 3 – not sure, 4 – disagree, 5 – strongly disagree). The statements in the standardized questionnaire were divided into groups: general satisfaction (questions 1–6), technical quality (questions 7–16), interpersonal aspects (questions 17–23), communication (questions 24–28), financial aspects (questions 29–36), time spent with the dentist (questions 37–38), overall attitude of the

dentist (questions 39–43), comfort (questions 44–51) and overall satisfaction (questions 1–51). Answers to some questions, where strong agreement means the maximum satisfaction with the HCQ, had to be rescaled (strongly agree – 5, agree – 4, disagree – 2, strongly disagree – 1) to obtain a unified HCQ score: 1 = maximum dissatisfaction with the HCQ, 5 = maximum satisfaction with the HCQ. Individual groups of questions reflecting the degree of satisfaction with the HCQ were evaluated as mean scores for each category. The highest average value means the highest level of satisfaction with the HCQ.

Questionnaires were collected in dentists' surgeries from November 2014 to April 2015. The selection criterion for patients' inclusion in the study was being over 18 years of age, and their diagnosis was not taken into account. Incomplete questionnaires were rejected. In total, 433 completed questionnaires were collected and the response rate was 93%. The questionnaire was anonymous and a privacy policy was respected.

The sample of respondents was divided into two groups. The first group consisted of patients who had not changed their dentist in the last year. The second group consisted of patients who had changed their dentist in the last year.

The basic characteristics of the sample are presented in Table 1. The sample consisted of 433 respondents (53.6% men, 46.4% women) with a mean age of 35.8 ± 14.8 years. The majority of respondents were in the age group of 30–49 years (41.6%). In terms of employment, most subjects were classified as skilled workers (58.4%), students (22.4%) and pensioners (7.8%). In terms of the level of education, the largest group was represented by subjects with a secondary education (55.2%), this was followed by a university education (25.1%) and elementary education (9.7%). Over the last year, 19.4% of respondents have changed their dentist. The most common

Table 1 – Basic characteristics of the sample (n = 433).

Parameters	N	(%)
Sex		
Male	232	53.6
Female	201	46.4
Age (years)		
<30	176	40.6
30–49	182	41.6
≥50	75	17.8
Occupation		
Student	97	22.4
Unemployed	7	1.6
Not qualified	13	3.0
Qualified	253	58.4
Pensioner	34	7.8
Other	29	6.8
Education level		
Elementary	42	9.7
Secondary without school-leaving exam	39	9.0
Secondary with school-leaving exam	239	55.2
University	109	25.1
Other	4	0.9
Dentist change		
Yes	84	19.4
No	349	80.6

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