



A questionnaire-based study on parental satisfaction with a universal newborn hearing screening program in Kuala Lumpur, Malaysia



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ABSTRACT

Objectives: The present study aimed to determine levels of parents' satisfaction associated with the universal newborn hearing screening process in a university hospital setting in Kuala Lumpur, Malaysia. **Methods:** Parents whose babies had undergone a hearing screening test at the Pusat Perubatan Universiti Kebangsaan (Universiti Kebangsaan Malaysia Medical Center), Kuala Lumpur, Malaysia, participated in this study. In this study, the original English version of the Parent Satisfaction Questionnaire with Neonatal Hearing Screening Program (PSQ-NHSP) was translated and adapted into Malay language. Thus, this self-administered Malay version of PSQ-NHSP was used to measure parents' satisfaction on information of newborn hearing screening program, personnel in charge of the hearing testing, hearing screening activities, and overall satisfaction.

Results: Of the 200 questionnaires distributed, 119 parents (59.5%) responded. Overall, more than 80% of parents were satisfied with the program. The highest percentage of satisfaction (95.6%) was related to the contents of an information leaflet. However, parents were not satisfied with items measuring communication aspect of personnel in charge of the hearing screening. In specific, 38.1% of parents were not satisfied with the explanations and information provided by the screeners on the test procedures, while 26.1% of parents found that the information they received on the test results was insufficient.

Conclusions: The findings of the present study revealed that parents were generally satisfied with the UNHS program. However, further intervention is required to improve the communication aspects of the personnel in charge of the hearing testing. Results suggest that the questionnaire is easily employed and effective tool for assessing parental satisfaction with newborn hearing screening programs. Additionally, this study has demonstrated the survey tool to be useful in identifying areas that need changes or improvements.

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1. Introduction

Parent satisfaction with treatment is particularly important in the case of young children. Parents are seen as their representatives and, therefore, represent the child's point of view. The differences between the perception of parents and health care providers, as reported in [1], indicate the need for parental satisfaction measurement in the health care setting. This study maintains that health care providers often under or overestimate parent needs and satisfaction, which further stresses the need to assess parent satisfaction.

To date, parent satisfaction has been accepted as an important outcome measure to evaluate the success of the programs in many pediatric health care service programs [2,3]. According to Bernheimer et al. [4], measuring parent satisfaction is important in pediatric health care service programs because parents play a major role in their child's life. Their decisions are fundamental to the success or failure of the child's treatment in many cases. For example, there is evidence that satisfied parents will co-operate more effectively, show greater compliance with their child's treatment and are more likely to return to the service [5]. Moreover, information obtained from parental satisfaction measurement has been proved as useful in identifying service shortfalls, monitoring and guiding service developments.

Measuring parent satisfaction has been recommended by the Joint Committee on Infant Hearing (JCIH) as one of the important outcome measures when evaluating and monitoring the success of universal newborn hearing screening programs (UNHSPs) [6]. Despite this recommendation, many investigators

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have concentrated on achieving other outcomes measures recommended by the JCIH such as conducting hearing screening on at least 95% of infants during their birth admissions or before one month of age, keeping the referral rate less than 4% following the initial screening, and having at least 70% of infants who fail hearing screening return for follow-up [7,8]. However, there is a growing interest in assessing parent satisfaction with UNHSPs in recent years [9–13]. Fox and Minchom [9] surveyed 177 women whose babies had their hearing screened with the Newborn Hearing Screening Wales, Wales, United Kingdom. In this study, a close-ended questionnaire with a Likert-type response scale, ranging from strongly agree to strongly disagree was utilized to measure mother's satisfaction with the information provision given by the screeners, the staff attributes, the test, and the overall satisfaction. In general, the majority of parents (>90%) reported high level of satisfaction with the program. However, findings from this particular study revealed that mothers were less satisfied with the information provision than the staff attributes and the test itself. In 2007, MacNeil et al. [10] conducted a satisfaction survey on families whose children received hearing screening in Massachusetts. They reported that 88% of 748 families whose babies passed the initial hearing screening test were satisfied with the overall service they received from the program. In another study conducted by Mazlan et al. [11], the majority of parents (>95%) were satisfied with all aspect of the Infant Hearing Screening Program provided by The Hear and Say Centre in Brisbane, Australia (i.e. information, personnel in charge of the hearing testing, appointment activities, and overall satisfaction). Using the translated version of the questionnaire used in Mazlan et al. [11], Nunez-Batalla et al. [12] and Shojaee et al. [13] evaluated their UNHS programs at Spain and Iran, respectively. Nunez-Batalla et al. [12] found that more than 90% of 112 Spanish parents reported high level of satisfaction with each measured dimension in their study. Similarly, Shojaee et al. [13] reported that the majority of 138 parents in their study were satisfied with the aspects of overall satisfaction (90.6%), personnel in charge of hearing testing (60.1%) and appointment activities (58%). In summary, it is apparent that parent satisfaction is rapidly becoming an important outcome measure, as well as an indicator of the success of UNHSPs. Moreover, the application of a questionnaire that has been specifically developed for UNHSPs provides valuable information regarding features of the program that most meet parent needs and those aspects that require change or improvement.

As of yet, assessing parent satisfaction with UNHSPs remains a largely neglected area in Malaysia. Therefore, the present work aims to evaluate parents' satisfaction with a UNHSP that their babies received in a university hospital in Kuala Lumpur, Malaysia.

2. Methods

2.1. Participants

The participants were the parents whose babies had received hearing screening at the maternity wards, Department of Obstetrics and Gynecology, Pusat Perubatan Universiti Kebangsaan Malaysia (National University of Malaysia Medical Center, UKMMC), Kuala Lumpur, Malaysia. In this study, only the parents of well babies born between January and March 2012 were included. Parents whose babies have not been screened were excluded from the study. In total, 119 parents voluntarily participated in this study. During the 3 months data collection period, the UNHS in UKMMC screened 1127 well nursery newborns with an average screening rate of 90%.

UKMMC established its UNHSP in 2003 [14]. All babies born in this hospital will receive hearing screening prior to hospital discharge using distortion product otoacoustic emission (DPOAE) test. Babies who passed the initial DPOAE screening will be

discharged from the program and those with refer results will be scheduled for re-screening within a month at the Audiology Unit of UKMMC using DPOAE and automated auditory brainstem response tests. Those who failed the re-screening will be immediately scheduled for a diagnostic auditory brainstem response test.

2.2. The survey instrument

The satisfaction survey was carried out using a previously published questionnaire, the Parent Satisfaction Questionnaire with Neonatal Hearing Screening Program (PSQ-NHSP) developed by Mazlan et al. [11]. The development and validation process of the PSQ-NHSP are described in detail elsewhere [11]. Briefly, the original PSQ-NHSP comprised 22 close-ended items that measures four dimensions of parents' satisfaction: information (3 items), personnel in charge of hearing testing (8 items), hearing screening activities (7 items), and overall satisfaction (4 items). Five response options from strongly disagree to strongly agree, were provided for these close ended items. Scoring of the items ranged from 1 to 5, with 1 being attributed to the most negative response, and 5 to the most positive. Apart from the close-ended items, the PSQ-NHSP also contained a dichotomous, two multiple-choice items, and three open-ended items.

Before the actual study started, the questionnaire was translated and adapted into the Malay language through the standard "forward-backward" procedure. Two independent audiologists translated the items and the response categories and a provisional version was provided. Subsequently, it was back translated into English by two linguists, and following a careful cultural adaptation the final version was provided. An initial version of the questionnaire was then created, which was pilot tested on a group of 20 mothers to analyze the comprehensibility and clarity of items and features related to the psychometric properties of the instrument.

Results from the pilot study showed the questions and response options were easy to understand and simple to complete by all participants. However, removal of one item in the domain of hearing screening activities, 'I was satisfied with the waiting time for the appointment', was recommended because all participants commented that they had not experienced such situation during the hearing screening process. After eliminating this particular item, the Malay version of PSQ-NHSP consists of 27 items. In specific, the Malay version of PSQ-NHSP contains one dichotomous, two multiple-choice, 21 close-ended and 3 open-ended items which follow in chronological order of the hearing screening process.

2.3. Procedure

This study was approved by the human ethics committees of the Universiti Kebangsaan Malaysia. Participants were approached to participate only after their babies completed the screen. The researcher described the survey study to all potential participants and provided them with an information sheet, a consent form and the translated questionnaire. Participants were asked to complete the questionnaire immediately post screening or before the hospital discharge, and returned it in a seal envelope to their attending midwives. Participants were also informed that their participation was voluntary and that their decision would not affect their babies' future management.

2.4. Data analysis

In this study, data were analyzed using the Statistical Package for the Social Sciences (SPSS 17.0) software. During the data analysis, all negative items in the Malay version of PSQ-NHSP

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