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## Original Research Article

# Patient's satisfaction with the treatment provided in Basrah Dental College between July 2022 and April 2023

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### ABSTRACT

**Objective of the Study:** This study aimed to assess patients' satisfaction with the dental care provided by undergraduate students, identify factors affecting satisfaction with the treatment, and gather recommendations for improving dental services.

**Materials and Methods:** An observational study was conducted at the University of Basrah College of Dentistry between the first of July 2022 and the first of April 2023. The study involved patients who consented to participate and provided written informed consent. Ethical clearance was granted by the institution's Ethics Committee, and 348 participants were randomly selected from dental clinics to respond to the questionnaire.

**Result:** Forty per cent of the study participants were aged between 20-29, with 146 (41.9%) being male and 202 (58.1%) being female. One hundred and sixty-six (33.3%) of the patients were housewives, 324 (92%) were low to moderate-income earners, and 199 (57%) lived in the city center, while 149 (42.8%) lived in district and subdistrict areas. Two hundred and forty (68.9%) of patients felt that the treatment was either cheap or too cheap. Regarding the waiting room, patients were generally satisfied with all aspects except for the waiting time, with 290 (83.3%) finding it too long. An average of 88.3% of patients were satisfied with the treatment provided by the students, but only 64.4% were satisfied with the length of the treatment period. Only 28 (8%) of patients experienced postoperative complications, with 13 related to dental treatment and 12 expected. Additionally, 24 patients reported their complications to the students, while 12 patients experienced unexpected complications. Finally, 45.4% of patients returned to the college for further treatments.

**Conclusion:** While the patient expressed dissatisfaction with the long waiting and treatment times, most respondents expressed satisfaction with the treatment received, but improvements are necessary in certain areas.

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## 1. Introduction

Patients visit the dentist for a variety of reasons, including pain relief, routine oral health checks, aesthetic improvement, and, frequently, full-mouth rehabilitation for

restoration of normal function. Accessibility, practicality, and cost are factors that patients consider while choosing dental clinics or dental hospitals for their care. While the majority of dental clinics assist patients with their dental issues, dental teaching colleges and affiliated hospitals are the preferred option for comprehensive dental treatments because of their reputation, price, and doctors' professional

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skills.<sup>1,2</sup>

Dental colleges serve as educational institutions, and it is mostly the students who provide patient treatment while being supervised by knowledgeable staff. Clinical training professors are very concerned with the necessity to teach students how to give patients high-quality dental care. Dental colleges serve a sizable portion of the population due to lower treatment prices and a perception of high-quality care, despite the difficulties in scheduling appointments and lengthy clinical settings. Therefore, it is crucial to instill in dentistry students strong standards of professional behavior.<sup>3,4</sup>

It is widely acknowledged that a successful dentistry practice cannot be developed without assuring patient satisfaction and that the outcome of a satisfied patient, thus, determines the quality of a hospital or clinic.<sup>5</sup> This will undoubtedly depend on the quality of dental care and services offered, on confidentiality, on the accuracy of appointments, and the conduct of the personnel.<sup>6</sup>

Enhancing patient satisfaction in dental clinics requires effective communication between patients and dental professionals. More likely to be satisfied with their care are patients who feel that they are being heard and understood. Effective communication between patients and dental professionals enhances patient satisfaction and treatment outcomes, according to a study that was published in the *Journal of Dental Education*.<sup>7</sup>

Another important element that significantly affects patient satisfaction in dental clinics is empathy. Patients want to believe that the people caring for their oral health and meeting their requirements care about them. Dental practitioners who are compassionate are more likely to build rapport and trust with patients, which increases patient satisfaction. A comprehensive review in the *Journal of Dentistry* found that compassionate behavior and communication among dental workers increase patient satisfaction.

In dental clinics, technical proficiency is a crucial component that affects patient happiness. Patients want to believe that the people caring for their oral health are competent, skilled, and capable of delivering high-quality care. Technically skilled dental workers are more likely to inspire patients' confidence, which will increase patient satisfaction. Technical proficiency is a crucial element in patient satisfaction with implant implantation, according to a study published in the *Journal of Oral and Maxillofacial Surgery*.<sup>8</sup>

Patient satisfaction at dental clinics is significantly impacted by access to care, which is another important element. Patients want to believe that they can get the care they need when they need it and quickly. Patients are more likely to be satisfied with dental offices that offer convenient scheduling and simple access to care. A study in the *Journal of the American Dental Association* found that access to

care is essential for determining how satisfied patients are with their dental care.<sup>9</sup>

This study tries to measure and put in figures the level of fulfilment and approval of dental services delivered by the College of Dentistry, exactly with mention to these important aspects of awareness.

### 1.1. Objective of the study

This study aimed to assess patients' satisfaction with the dental care provided by undergraduate students, identify factors affecting satisfaction with the treatment, and gather recommendations for improving dental services.

## 2. Materials and Methods

A cross-sectional analytical observational study was conducted at the University of Basrah College of Dentistry over a period between the first of July 2022 to the first of April 2023. Patients who voluntarily consented to participate in the study provided written informed consent, the institution's ethics committee granted ethical clearances, and 348 participants were chosen randomly from the dental clinics to respond to the questionnaire. Inclusion criteria included both sexes (males and females) who have started their dental treatment at the Basrah dental clinic. Patients who did not receive any dental treatment at Basrah Dental Clinic or refused to participate in this study were excluded from the study.

As part of the data collection procedure for the study, patients filled out a paper questionnaire that sought to ascertain their level of satisfaction with the dental services provided by Basrah Dental College. Age (divided into groups: under 19, 20-29, 30-39, 40-49, 50-59, and above 60) years, gender, nationality, address (divided to the city center, districts and sub-districts), occupation includes (housewife, students, workers, and employers), and income divided according to the monthly income to (under 500000 IQD, between 500000-1500000 IQD, and above 1500000 IQD) are socio-demographic aspects that are also considered in the study. The questionnaire also examined the following seven primary dental service disciplines:

1. Biographic data and visit triggers
2. Reasons for visiting Basrah College of Dentistry include six equations
3. A Waiting period, which involved four questions
4. The examination session There are seven questions
5. Cooperation among dental students, including 12 questions
6. The postoperative period includes five questions
7. The price of care

Microsoft excel was used to list the answers to the questions that were obtained before SPSS version 29 was used to analyze it.

### 3. Result

#### 3.1. Biographic data and visit triggers

A total of 348 patients were selected for the study all of whom were Iraqis nationality. Totaling (41.9%) males and (58.1%) females. The category of patients aged under 20 and between 20 -29 years has the highest proportion of patients (72) 20%, followed by the category with ages 40 to 49, then ages 30-39, ages 50 to 59 and ages greater than 59 (figure 1). In terms of occupation, 116 (33.3%) of the respondents were housewives, followed by 60 (17.2%) workers, 46 (13.2%) employers, 22.1% students, and 49 (14.1%) who did not respond (Figure 2). Most of the responses, 187 (53.7%), were under 500000 IQD; 137 (39.4%) were between 500000 and 1500000 IQD; 20 (5.7%) were over 1500000 IQD; and 4 (1.1%) did not respond (Figure 3).

Patients from the city center are 199 (57.2%) more than those from districts and sub-districts 149 respondents (42.8%) (Figure 4). Most patients (124/35.6%) asked for conservative treatments, followed by 91 (26.1%) who needed tooth extractions, 85 (24.4%) who needed periodontal therapy, 39 (11.2%) who needed prosthodontic services, 9 (2.6%) who need other services (Figure 5). Patients overwhelmingly rated the cost of therapy as "too cheap" in 132 cases (37.9%), "cheap" in 108 cases (31.0%), "suitable" in 95 cases (27.3%), "no answer" in 8 cases (2.3%), and "expensive" in 5 cases (1.4%) (Figure 6) (Table 1).

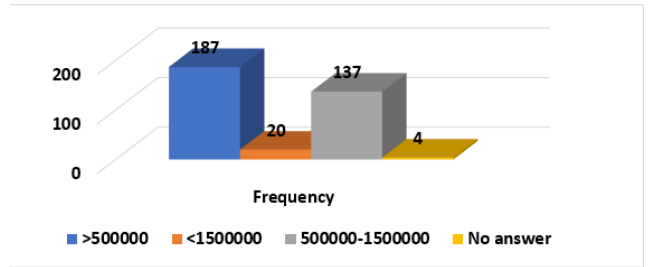


Figure 3: Frequency according to income.

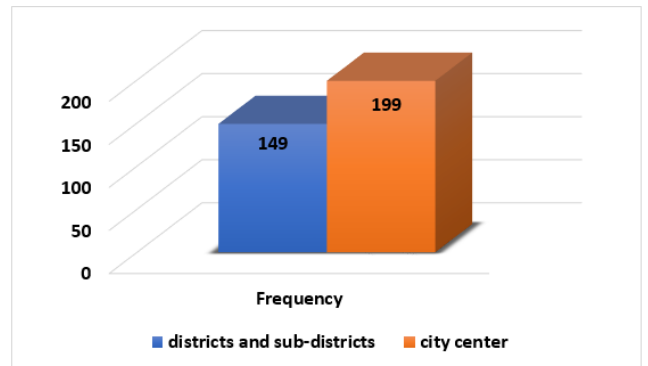


Figure 4: Frequency according to the residency.

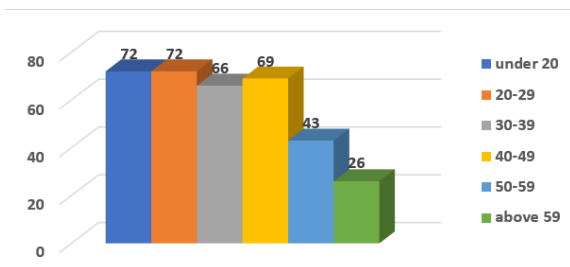


Figure 1: Frequency of age groups.

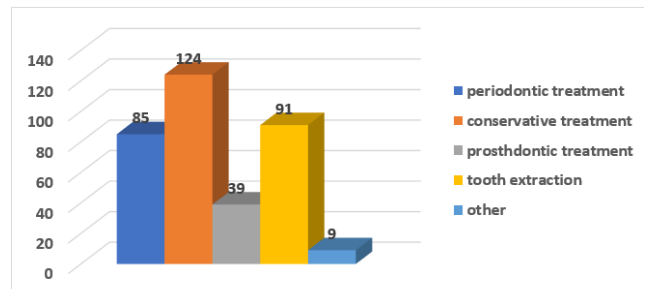


Figure 5: Frequency according to the type of the treatments.

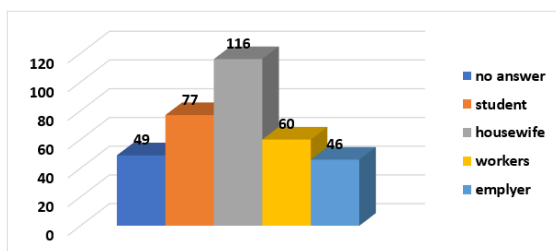


Figure 2: Frequency according to occupation.

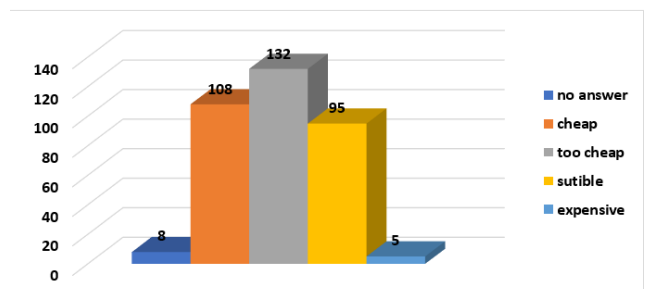


Figure 6: Frequency according to the cost of the treatment.

**Table 1:** The frequency of the biographic data

Data	Answer	Frequency	Per cent
Gender	Male	146	41.9
	Female	202	58.1
Age groups	under 20	72	20.7
	20-29	72	20.7
	30-39	66	19.0
	40-49	69	19.8
	50-59	43	12.4
	above59	26	7.5
	no answer	49	14.1
Occupation	student	77	22.1
	housewife	116	33.3
	Workers	60	17.2
	employer	46	13.2
Income	>500000	187	53.7
	<1500000	20	5.7
	500000-1500000	137	39.4
Address	No answer	4	1.1
	districts and sub-districts	149	42.8
	city center	199	57.2
Type of the treatment	periodontics treatment	85	24.4
	conservative treatment	124	35.6
	prosthodontic treatment	39	11.2
	tooth extraction	91	26.1
	other	9	2.6
Treatment costs	no answer	8	2.3
	cheap	108	31.0
	too cheap	132	37.9
	suitable	95	27.3
	expensive	5	1.4

**Table 2:** The frequency of the question about the reason for choosing the college.

Why do people go to Basrah College of Dentistry	Frequency	Per cent
Treatment is very cheap	157	27%
Treatment is good	119	21%
Close to the residence	66	11%
Not need conversion	36	6%
Appointments are close	95	16%
Lack of service at the nearby health center	110	19%

### 3.1.1. Why people go to Basrah College of Dentistry

Six questions make up the portion. 157 patients (27%) believe the treatment is inexpensive. 119 patients (21%) felt the treatment was effective. Due to its proximity to their homes, 66 (11%) of the patients were selected to receive treatment at Basrah Dental College. 95 patients (16%) feel that the appointments are near, while 36 (6%) say that there is no need for conversion. Due to a lack of services at the nearby health center, 110 patients (19%) decided to receive treatment at the college (Table 2).

### 3.2. The waiting periods

Most of the patients 270 (77.6%) mention how comfortable and spacious the waiting room is, whereas 221 (63.5%) of

patients believe there are enough employees, whereas 271 (77.9%) feel the working system is well-organized. 290 (83.3%) feel the waiting duration is too long (Figure 7) (Table 3).

### 3.3. Examination period

Patients were satisfied with questions related to the examination period and missed rates between 70%-90% as shown in the table. (Table 4).

#### 3.3.1. Treatment periods

Regarding the treatment period, the patients' answers were positive about all the questions except regarding the treatment time, which the patients considered long, for more

**Table 3:** The frequency of answers to the questions related to the waiting period.

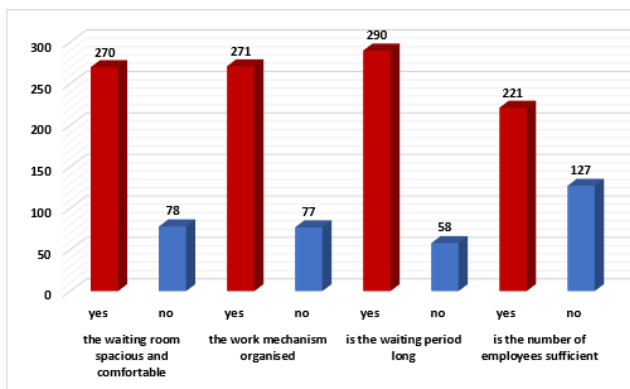
Question	Answer	Frequency	Per cent
Is the waiting room spacious and comfortable?	yes	270	77.6
	no	78	22.4
Is the working mechanism organized?	yes	271	77.9
	no	77	22.1
Is the waiting period long?	yes	290	83.3
	no	58	16.7
Is the number of employees sufficient?	yes	221	63.5
	no	127	36.5

**Table 4:** Frequency of questions about the examination period.

Question	Answer	Frequency	Per cent
Was the receptionist reception good?	yes	302	86.8
	no	46	13.2
The examining dentist was jovial with you?	yes	326	93.7
	no	22	6.3
Have the students examined you properly?	yes	323	92.8
	no	25	7.2
Have you been advised on the appropriate treatment?	yes	310	89.1
	no	38	10.9
Did the treatment agree with the complaint you were experiencing?	yes	331	95.1
	no	17	4.9
Have you had the necessary investigations and radiographical examinations?	yes	250	71.8
	no	98	28.2
Were you aware that students are the ones doing the treatment]	yes	310	89.1
	no	38	10.9

**Table 5:** Frequency of the answers to the questions about the treatment period

Questions	Answer	Frequency	Per cent
Did the student treat you with respect?	yes	341	98.0
	no	7	2.0
Is the student committed to personal protection supplies?	yes	334	96.0
	no	14	4.0
Does the student use sterile instruments?	yes	339	97.4
	no	9	2.6
Does the student ask you about everything related to your problem and listen to you?	yes	333	95.7
	no	15	4.3
Does the student leave you to talk with his or her colleagues?	yes	79	22.7
	no	269	77.3
Does he talk to his colleagues about your condition?	yes	182	52.3
	no	166	47.7
Is the student followed up by the specialist?	yes	336	96.6
	no	12	3.4
Did the specialist deal well with you?	yes	331	95.1
	no	17	4.9
Is the treatment time long?	yes	224	64.4
	no	124	35.6
Are you satisfied with the method of treatment?	yes	331	95.1
	no	17	4.9
Did the student give you post-treatment advice?	yes	331	95.1
	no	17	4.9



**Figure 7:** The frequency of answers to the questions related to the waiting period.

detail see (Table 5).

### 3.4. Post-Operative period

A total of 28 individuals (8.0%) out of 348 had post-operative complications. Of those 13 (3.7%) of patients had complications because of the treatment approach. 15 (4.3%) of patients say that the complications are not related to the treatment methods. patients 12(3.4%) the student had informed them of the complications before the treatment. 24 (6.9%) told the patient about the complications, 4 (1.1%) of the patients did not call the students, while 320 (92.0%) choose none because they didn't have any complication. 158 (45.4%) of the patients visited the college again, 77 (22.1%) of the patients did not come to the college, and 113 (32.5%) did not answer the questions (Table 6).

## 4. Discussion

### 4.1. Biographic database

This study found that a percentage of (58.1%) were females and males (41.9%) this result agrees with other studies, in the United States found that most patients (63.5%) at a dental college clinic were female, while 36.5% were male.<sup>10</sup> Another study found that females were more likely than males to have visited a dentist (75.8% vs. 69.6%), females were also more likely to have received preventive dental care (89.3% vs. 85.1%) and restorative dental care (65.8% vs. 58.1%).<sup>11</sup>

In this study, most patients from age groups under 19, 20-29, and the least age group above 59 years. More probably the reason why the patients in both age groups (under 20) and (20-29) each have the highest percentage of (20.7%) is related to social factors, cultural factors and educational factors. And this finding does not agree with studies showing that the high 50% of patients was old age,<sup>12</sup> or study in United States found that children was forming 60% visited a dental college clinic,<sup>13</sup> while other found that

the majority of patients who visited the dental college clinic were young adults between the ages of 18 and 34.<sup>14</sup>

In this study the greatest percentage is (33.3%) which are housewives. Housewives in Iraq might prefer visiting student dental clinics due to financial constraints. Housewives typically have more flexibility in their schedules compared to individuals who are employed full-time. They may find it easier to visit student dental clinics during weekdays when these clinics are typically open, as opposed to private dental clinics that may have limited operating hours.<sup>15</sup> These finding disagree with study In the United States most common occupations among patients were students and service workers,<sup>14</sup> in Saudi Arabia shows that 45% of the patients are employed and 52% are unemployed.<sup>16</sup> These clinics often offer discounted or subsidized services compared to private dental practices, making them more accessible to individuals with limited financial resources.<sup>17</sup>

With the percentage of (53.7%) of patients with low, (39.4%) are medium income and only 5.7% with high income, agree to a lot of studies (16–22) due to the low cost of dental treatment in the clinics of the college.

The study's finding that (57.2%) of patients come from the city center and (42%) from rural areas this is related to the college's location between the city center and nearby district areas, this facilitates the return of patients to the college, agree with study found that patient home address is an important factor in determining the quality of dental care that they receive.<sup>15</sup> While disagree with study at Kottayam Dental College in India, that found 78% of patients come from rural areas.<sup>18</sup>

Most of the patients (35.6%) received dental fillings followed by periodontal treatment and tooth extraction that's agreeing with studies in Malaysia<sup>19</sup> and study in India,<sup>18</sup> disagreeing with other studies show that the majority received a Fixed-Fixed conventional Bridge (77.7%).<sup>20</sup>

### 4.2. Waiting period

The study agrees with other studies about the organization of the work mechanism, like other studies found that work organization has a significant impact on patient satisfaction and productivity in dental clinics.<sup>21,22</sup>

Results indicated a positive correlation between higher employee numbers and increased patient satisfaction ratings (63.5%) of the patients were satisfied with the number of employees in the clinic. This result agree with other studies.<sup>23,24</sup>

Because the weekly program at the College of Dentistry begins with two hours of scientific lectures before students enter the educational clinics, patients in this survey (83.3%) reported that the waiting period was lengthy and this time was longer if compare with other studies, a study at the University of British Columbia found that the

**Table 6:** The answer frequency to questions in the postoperative period.

Questions	Answer	Frequency	Per cent
Did post-treatment complications occur	yes	28	8.0
	no	320	92.0
Is the cause of complications treatment method	yes	13	3.7
	no	15	4.3
Is the cause of complications expected and the student told you about it before the treatment	yes	12	3.4
	no	16	4.6
Did you call the student to tell him about the complications?	yes	24	6.9
	no	4	1.1
Have you visited the college again for treatment?	yes	158	45.4
	no	77	22.1
	no answer	113	32.5

average waiting time was 36 minutes,<sup>25</sup> other study at the University of Texas Health Science Center in Houston found that the average waiting time for a routine dental appointment was 33 minutes, while for a specialty appointment (such as endodontics or periodontics) was 51 minutes.<sup>26</sup>

#### 4.3. Treatment period

This study shows the satisfaction of the patient with all questions. This agreed with studies showed that patient respect is an important factor in creating a positive and productive work environment. When patients feel respected, they are more likely to trust their dentists and staff, which can lead to better communication and outcomes.<sup>27,28</sup>

In this study, (97.4 %) of the patients were satisfied with the sterilization method followed in dental clinics and the students used sterilized instruments during treatment. Basrah Dental College uses an autoclave to sterilize the student equipment before going to perform any dental treatment agree with other studies.<sup>29,30</sup> Several studies have highlighted the importance of professionalism and effective communication in dental student-patient interactions. This includes aspects such as active listening, empathy, respect, and clear explanations of procedures and treatment plans. Developing these skills is crucial for establishing trust and positive patient experiences.<sup>31</sup> This study found that (95.7%) were satisfied with the student communication, and they asked about everything related to patient problems and were good listeners.

The study showed that the students in the direct supervision group provided significantly higher quality care than the students in the non-direct supervision group. The students in the direct supervision group were more likely to provide complete and accurate diagnoses, select appropriate treatment plans, and perform procedures correctly.<sup>32</sup>

In this study (64.4%) of patients complained of long duration of treatment due to many reasons the specialist must check every single step of the treatment procedure, limited experiences of the student, patient education and cooperation and students take more time to ensure avoiding

treatment complication, agree with other studies.<sup>19,33,34</sup>

The study agrees with the studies suggest that post-treatment instructions are an important part of dental care. About (95.1%) of patients were instructed after treatment. The results of this study showed that patients who were given clear and concise instructions were more likely to comply with their treatment plans. Patients who were given clear and concise instructions were more likely to Follow the instructions they were given, to return for follow-up appointments.<sup>20,35</sup>

#### 4.4. Postoperative period

A study looked at the rates of postoperative complications in dental college patients. The results showed that the rates of postoperative complications were low, study only 28 (8.0%) of patients suffer from post-operative complications, agree with other studies.<sup>36–38</sup>

Only 13(3,7 %) of the patients complained of complications as a result of the treatment method this agrees with the study found that dental college students are well-trained and supervised, and they take steps to minimize the risk of complications.<sup>37,38</sup> In this study 16 (4,6%) of the patients their complications that were unexpected and were not informed about the potential complications because of the lack of experience of some of the students or lack of supervision, and stress, agree with.<sup>39–41</sup> In this study 24 patients out of 28 patients who had complications called the students to tell them about the complications indicating that most of the treatment provided was efficient, agree with study published in the Journal of Dental Education in 2007.<sup>40</sup> This study showed that 158(45,4%) patients answered the question, and visited the college again because of the low cost and satisfaction of the treatment efficiency its lower than study found that the average revisit rate for patients at dental colleges was 65%.<sup>42</sup>

## 5. Conclusion

Over 80% of those surveyed expressed general satisfaction with the care provided by undergraduates. Long wait



periods, poor communication, and lack of knowledge should raise some red flags, as these factors contributed to the treatment taking longer than expected and necessitating numerous visits. Therefore, to prepare undergraduates for their future employment, it is crucial to teach them about patient pleasure.

## 6. Recommendation

Improving patient satisfaction in student dental clinics is crucial for providing quality care and enhancing the learning experience for students. So, the college needs to think about clear communication, appointment management, comfortable waiting areas, patient education, quality of care, pain management, follow-up and feedback, confidentiality and privacy, professionalism and respect, and continuous improvement.

## 7. Source of Funding

None.

## 8. Conflict of Interest

None.

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