



VOICE OF THE DENTAL PATIENT IN BRITISH COLUMBIA

Summary

Jan 18, 2023

BCCOHP

British Columbia College of
Oral Health Professionals



PIVOTAL RESEARCH Inc.™

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SUMMARY OF FINDINGS



Dental patients are highly satisfied with their dental care providers across all health regions. Overall, 76% of dental patient respondents are either satisfied or extremely satisfied.



Prioritization of oral health and consent are drivers of satisfaction. Putting oral health above all interests, as well as not feeling pressured to proceed with a treatment or procedure, are attributes that have the greatest impact on the overall dental care experience.



Dental care is perceived to be expensive and cost-prohibitive to many residents in BC. Cost and lack of dental insurance coverage are primary reasons why one-in-four residents in BC have not visited a dental office in the last 12 months.



Indigenous BC residents view discrimination as a serious issue in dental care. Indigenous respondents were much more likely than non-Indigenous respondents to agree that race-based and other types of discrimination are serious issues for patients in BC.



Satisfaction is correlated with age, disability, race, Indigenous identity and English language fluency. Age, English language proficiency, disability, race and Indigenous identity are the main determining factors of satisfaction with dental care, irrespective of geographic location.



Socio-economic factors influence access to and reception of dental care. A large proportion of non-recent patient respondents are low-income, unemployed, have not attained university or college education, have disabilities, identify as Indigenous or live away from major urban centres in the province.



Improved dental comfort is the most typical outcome of a dental visit. One-third of respondents (35%) said they commonly feel their dental comfort is improved after visiting a dental clinic.



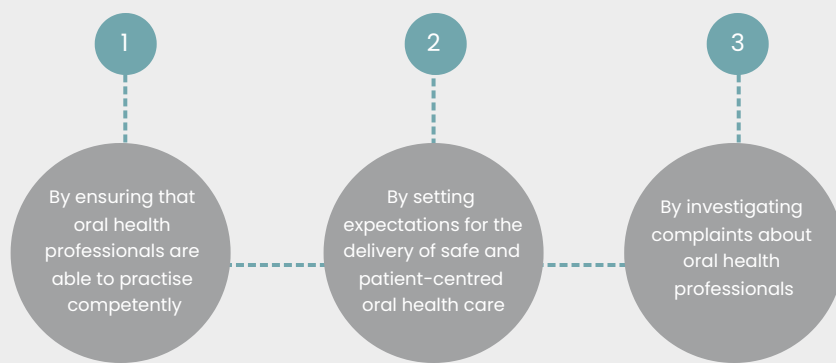
Awareness of regulation and the regulator is low. While awareness levels of industry regulation, the role of the regulator, and BCCOHP is higher among patient respondents than their non-recent patient counterparts, overall awareness is still low. Awareness is lowest among younger respondents under the age of 45.

RESEARCH BACKGROUND AND METHODOLOGY

Background and Research Objectives

The British Columbia College of Oral Health Professionals (BCCOHP or College) is the regulatory body for certified dental assistants (CDAs), dental hygienists, dental therapists, dental technicians, dentists and denturists in BC.

The College’s mandate is to serve and protect the public by regulating oral health professionals. Specifically there are three main ways:



As part of its strategic plan and the focus on accountability through measurement, the College is conducting a survey through a Voice of the Dental Patient in British Columbia (Voice of Patient) research study among BC residents to measure public experience and perceptions. This study will be shared with oral health professionals to enhance the delivery of safe, effective and competent team-based oral health care.

Research Methodology

The College contracted Pivotal Research Inc., a third party research consulting firm based in Edmonton, Alberta, to execute the requirements of the research initiative.

A survey instrument which relied on a previous questionnaire developed by the legacy College of Dental Surgeons of British Columbia was updated and refined in collaboration with the College. The online survey was fielded province-wide to a panel of 2,000 BC residents. Respondents included those who had visited the dental office in the last 12 months, defined as patients, and those who had not and are defined as non-recent patients. The sample was representative of BC’s population according to health regions and demographics (age and gender), with 5% of respondents self-identifying as Indigenous. Survey research uncovered perspectives on dental care experience and awareness and understanding of oral health care regulation.

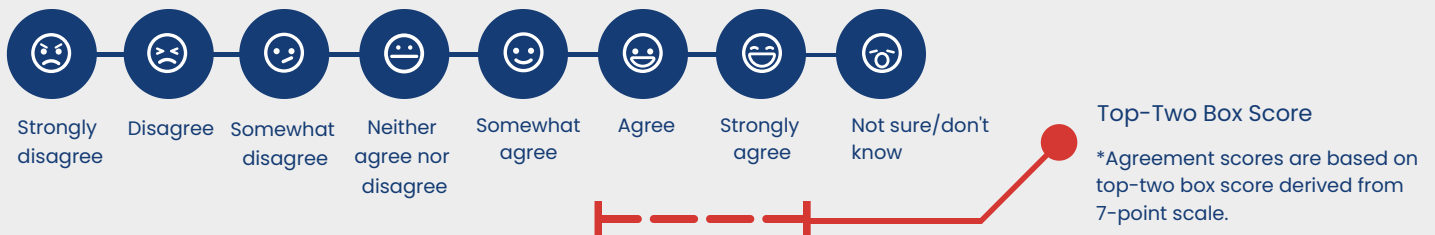


PERCEPTIONS OF DENTAL CARE IN BC

Respondents rated their level of agreement with several statements pertaining to dental care and oral health regulation in BC for the following categories:

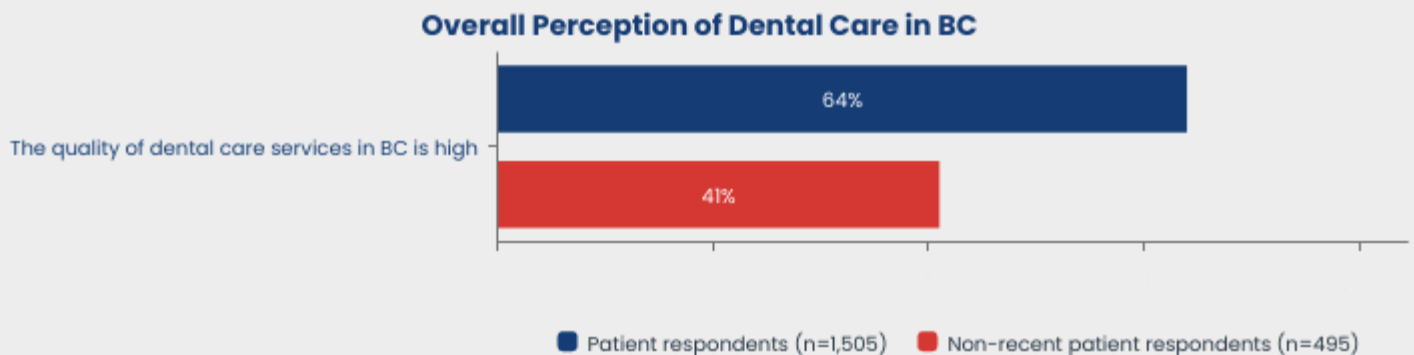
- Overall perceptions of dental care;
- Access to dental care services;
- Patient agency;
- Discrimination; and
- Dental care costs.

For each statement, respondents were presented with a seven-point scale ranging from strongly disagree to strongly agree as shown in the graphic below.



Overall Perceptions of Dental Care

In general, patient respondents have more favourable perceptions of dental care in BC than non-recent patients. Two-thirds (64%) of patient respondents agreed that the quality of dental care in BC was high while two-in-five (41%) non-recent patient respondents agreed.



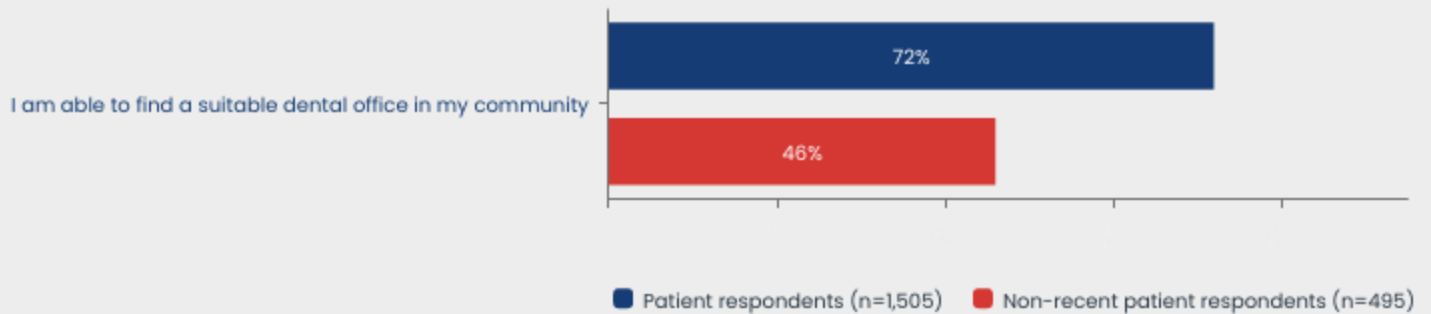
PERCEPTIONS OF DENTAL CARE IN BC

Access to Dental Services

About three-quarters (72%) of patient respondents and under half (46%) of non-recent patients agreed or strongly agreed with the statement assessing their ability to find a suitable dental office in their community.

Indigenous respondents are less likely to agree (51%) than their non-Indigenous counterparts (69%) that they have access to a suitable dental office in their community. It may be useful to further investigate whether this discrepancy is due to a low number of dental care providers or due to unsuitability of dental care providers.

Access to Dental Services in BC



Access Perceptions by Health Region

Patient respondents who live in lower-density health regions agreed less than other respondents that they are able to find suitable dental providers in their communities.

While overall agreement with the statement: *I am able to find a suitable dental office in my community* garnered a 68% top two-box agreement score, Northern Health region agreement scores were lower at 56%. Notably, patient respondents residing in the Island Health region had the highest agreement score for this statement (74%).



PERCEPTIONS OF DENTAL CARE IN BC

Patient Agency

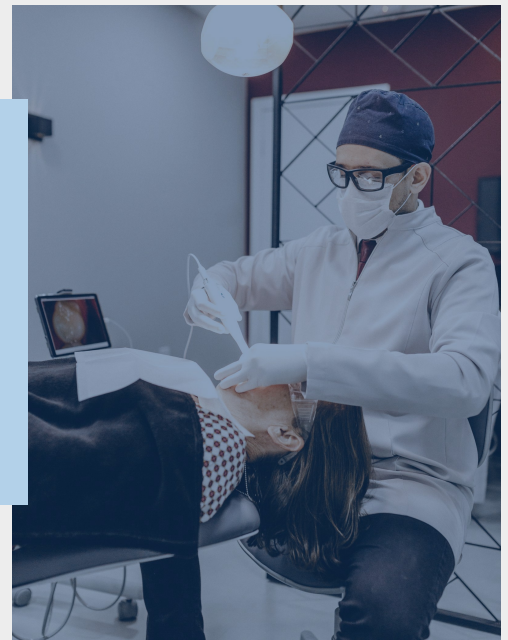
Respondents were asked to state their level of agreement with a set of statements pertaining to patient agency. Between two-thirds (62%) and three-fourths (73%) of patient respondents agreed or strongly agreed with the various Patient Agency statements.



Respondents most agree or strongly agree with feeling comfortable raising concerns about their treatment. Respondents least agree with the statement that they have access to tools or resources to make informed decisions about dental care.

Patient Agency by Age

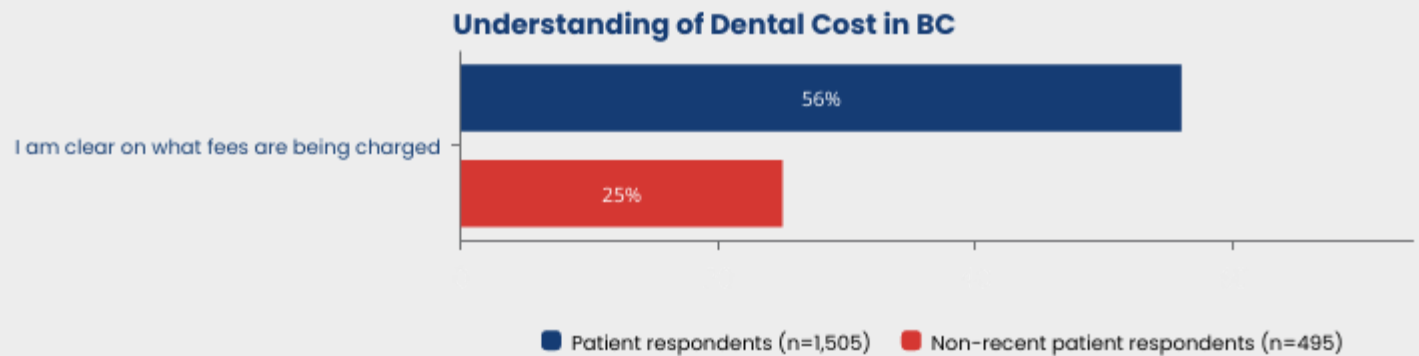
Patient agency is positively correlated with age. Patient respondents over age 55 feel comfortable raising concerns about their treatment (73%), while agreement levels of those between the ages of 18 and 34 ranged between 53% and 56%. Similar trends are observed for the other patient agency statements.



PERCEPTIONS OF DENTAL CARE IN BC

Dental Care Costs

While patients are more likely than non-recent patients to access dental care services, price is a common concern among all respondents. Around one-half of patients (56%) and one-in-four non-recent patients (25%) agreed or strongly agreed that they are clear on what fees are being charged.



KEY TAKEAWAYS

1

In general, patients have a much more positive view of the dental care profession in BC than non-recent patients.

2

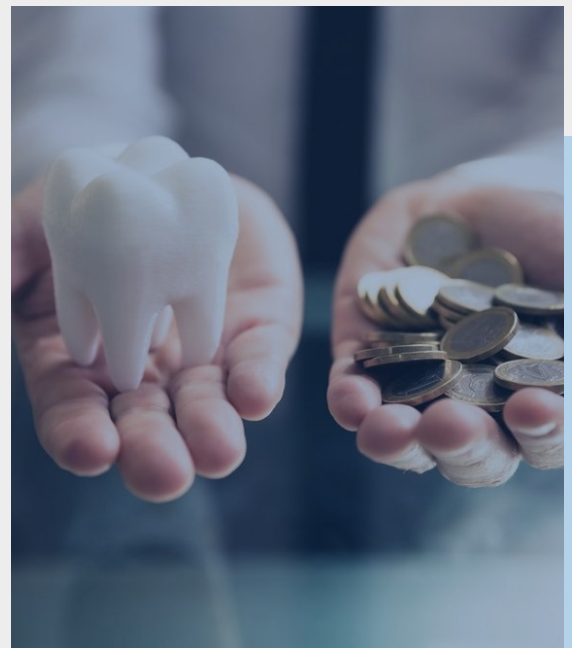
Concerns about discrimination while accessing dental care are relatively low; however, patients who are Indigenous are much more likely than their non-Indigenous counterparts to express this concern.

3

Respondents who believe that discrimination is a serious issue value a strong rapport with their oral health care provider.

4

While patients are more likely than non-recent patients to access dental care services, affordability is a shared concern.



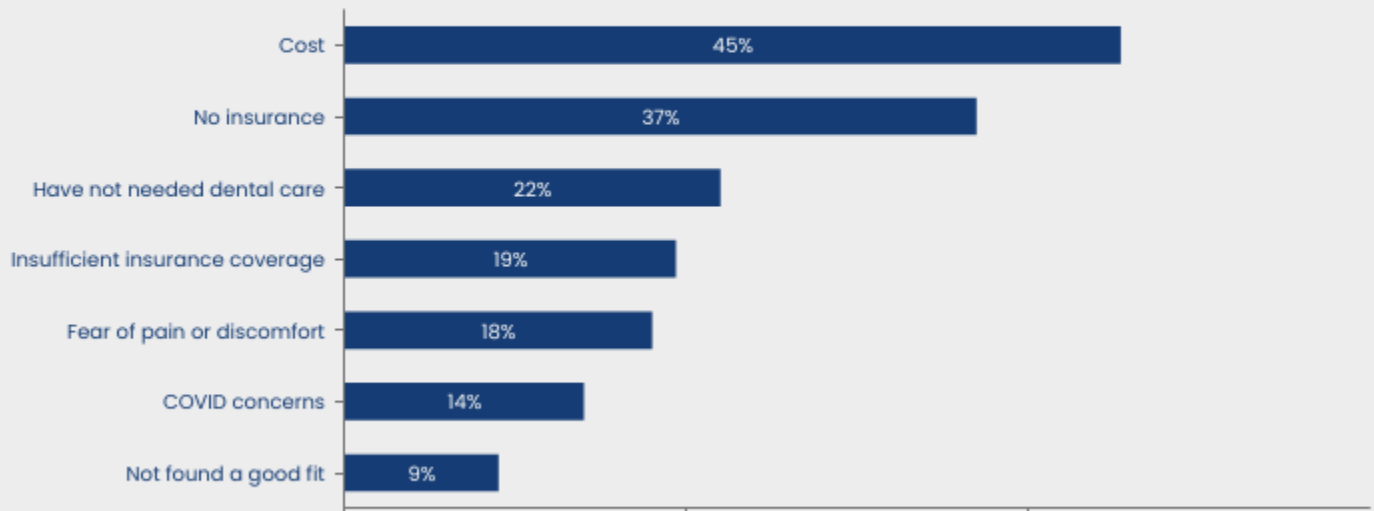
VISIT TO DENTAL OFFICE

Reasons for Not Visiting Dental Office in Past 12 Months

Those who either did not visit or did not recall their most recent visit to the dental office indicated cost (45%) and lack of dental insurance coverage (37%) as the top two reasons. Other reasons include not needing dental care, insufficient dental coverage, fear of pain or discomfort, COVID-19 concerns, and not having found a good fit. Respondents with disabilities were more likely to report that they did not access dental care due to lack of insurance (43%) or insufficient insurance coverage (24%).

Top Reasons for Not Visiting Dental Office in Last 12 Months

n=495



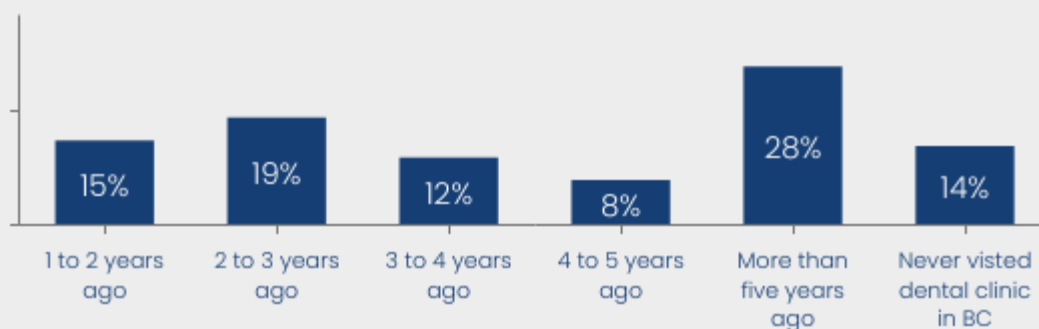
When asked to pick the most important reason why they did not visit a dental clinic in the past 12 months, non-recent patients listed cost (35%), not needing dental care (16%) and not having dental insurance (15%) as the most important reasons.

Non-Recent Patient Respondents' Last Visit to a Dental Office

Three-in-ten non-patients (28%) indicated that their last visit to the dental office was more than 5 years ago while 15% have never visited a dental office in BC. Respondents who had a household income of less than \$20,000 per year were most likely to have never visited a dental office in BC (25%).

Non-Recent Patient Respondents' Last Visit to Dental Office

n=421



VISIT TO DENTAL OFFICE

Patient Respondents' Last Visit to a Dental Office

One fifth (21%) of patient respondents last visited a dental office between six and twelve months ago. Most patient respondents (54%) had visited a dental office within the last three months.

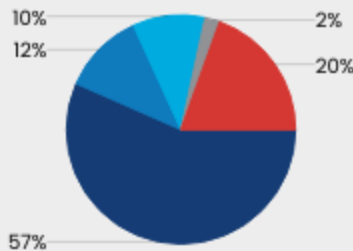


Dental Care Insurance Coverage

The majority of dental patient respondents (81%) indicated they have access to dental care insurance mostly through their employer (57%). A small portion of patient respondents have dental care insurance coverage which they purchased themselves, through Social Services, or through First Nations health insurance. One-in-five patient respondents indicated they did not have dental care insurance at all (20%). Respondents over the age of 65 were more likely to have no insurance coverage (37%).

Dental Care Insurance Coverage

n=1,505



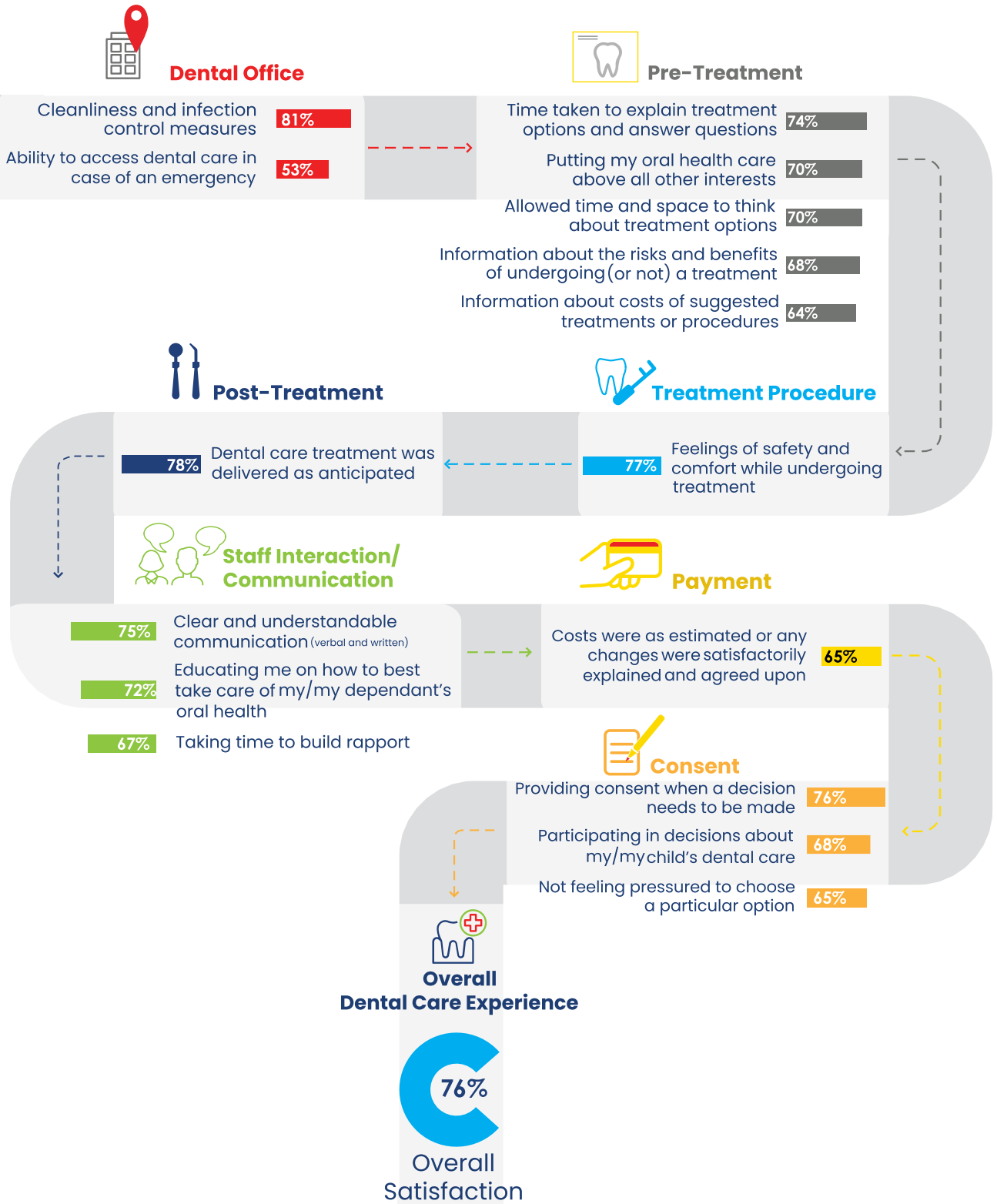
- Yes, through employer 57%
- Yes, purchased myself 12%
- Yes, through Social Services 10%
- Yes, through First Nations health insurance 2%
- No 20%

KEY TAKEAWAYS

- 1 Large portion of BC residents have barriers to accessing dental care services.
- 2 BC residents who are Indigenous, low-income, or who have disabilities are less likely to access dental care services.
- 3 Treatment costs and insurance coverage are top barriers to accessing dental care.
- 4 Dental care insurance is primarily accessed through employers.

DENTAL PATIENT JOURNEY

SATISFACTION ALONG THE DENTAL JOURNEY



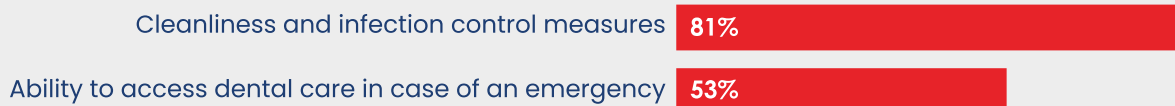
DENTAL PATIENT JOURNEY

Satisfaction with Dental Office

Cleanliness and infection control measures received a satisfaction score of 81% while the ability to access dental care in case of emergencies scored 53%.



Dental Office



Patient respondents with disabilities (71%) and Indigenous patient respondents (64%) were less satisfied with cleanliness and infection control measures than all patient respondents.

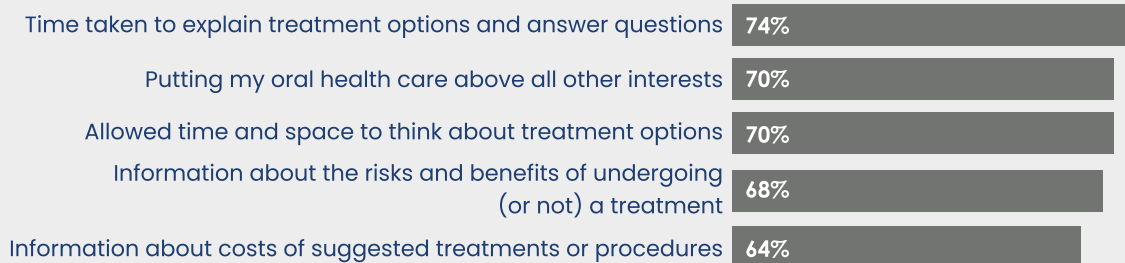
Younger patients (47%) and patients with lower household income (47%) were slightly less satisfied with the ability to access dental care in case of an emergency.

Satisfaction with Pre-Treatment

Satisfaction with pre-treatment was assessed along five statements. Top-two box scores ranged from 64% for information about costs of suggested treatments or procedures to 74% for time taken to explain options and answer any questions.



Pre-Treatment



Overall, younger patient respondents (ages 18-34) are less satisfied with the aspects of dental care pre-treatment as compared to older patient respondents (ages 55+). Patient respondents who are Indigenous, racially marginalized or who speak basic/intermediate English were also less satisfied across all five attributes.

DENTAL PATIENT JOURNEY

Satisfaction with Treatment/Procedure

Satisfaction with safety and comfort while undergoing treatment received a satisfaction score of 77%. Respondents who identified as Indigenous (57%) or as racially marginalized (67%) were less likely to be satisfied with their feelings or safety and comfort while undergoing treatment. Similarly, patient respondents with a basic or intermediate knowledge of English were less satisfied (44%) than fluent speakers or those whose first language is English.



Treatment Procedure



Satisfaction with Post-Treatment

Satisfaction with the statement that dental care treatment was delivered as anticipated performed received 78% satisfaction.



Post-Treatment



Regionally, satisfaction was lowest among respondents who reside in the Vancouver Coastal Health region (73%).

DENTAL PATIENT JOURNEY

Satisfaction with Staff Interaction/Communication

Staff interaction and communication was rated along three metrics: time building rapport, verbal and written communication and education. Respondents were least satisfied with the time taken to build rapport (67%) while they were most satisfied with the clarity of verbal and written communication (75%).



Staff Interaction/Communication



Respondents of older ages (ages 55+) were more satisfied than younger respondents (ages 18-34). Language barriers may also contribute to a breakdown in communication as respondents who spoke basic or intermediate English were less likely to be satisfied with all three staff interaction or communication metrics. Patients who are Indigenous, part of a racial minority or have a disability were also less satisfied with all three attributes.

Satisfaction with Payment

Overall, costs being as estimated or having changes explained and agreed upon received a 65% satisfaction score.



Payment

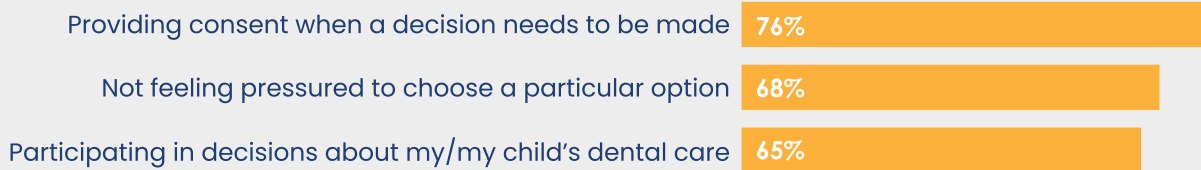


Regionally, respondents residing in the Northern Health region were most satisfied while those residing in Vancouver Coastal Health were least satisfied.

DENTAL PATIENT JOURNEY

Satisfaction with Consent

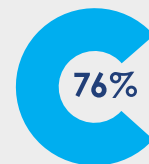
Satisfaction with three statements pertaining to consent hovered around the 70% mark. While a score of 70% is generally acceptable in similar surveys, it is important to note that oral health professionals are required to obtain informed consent from their patients to provide treatment. As such, this presents an area that should be further investigated to understand from a regulatory standpoint and to assess whether consent is consistently obtained by the dental care provider.



Access to funds may contribute to pressure on an individual to provide their consent as respondents with a household income of \$40,000 or less were much less satisfied with all three consent outcomes than respondents with a household income of \$80,000 or above. Language barriers may also contribute to lower satisfaction with consent as patients who spoke intermediate English were significantly much less satisfied (42%) with providing consent than patients who spoke English as a first language (80%). Respondents who identify as Indigenous also report lower satisfaction with consent than their non-Indigenous counterparts. Notably, Indigenous patient respondents were less satisfied with providing consent when a decision needs to be made (61%), and participating in decisions about their child's dental care (51%).

Overall Satisfaction with Dental Care Experience

The majority (76%) of patient respondents were satisfied with their dental experience overall. Generally, satisfaction was similar among all levels of household incomes with the exception of a household income less than \$20,000 (69%). Among regions, Vancouver Coastal health (73%) and Fraser Health (74%) had the lowest overall satisfaction. Residents in the Island Health region were the most satisfied (84%).



Overall Satisfaction

Patient respondents who identified as Indigenous, racially marginalized, disabled, spoke English as a second language or were between the ages of 18-24 were less satisfied with their overall dental experience. The most satisfied groups were respondents over the age of 65 (84%) and respondents making more than \$80,000 per year (81%).

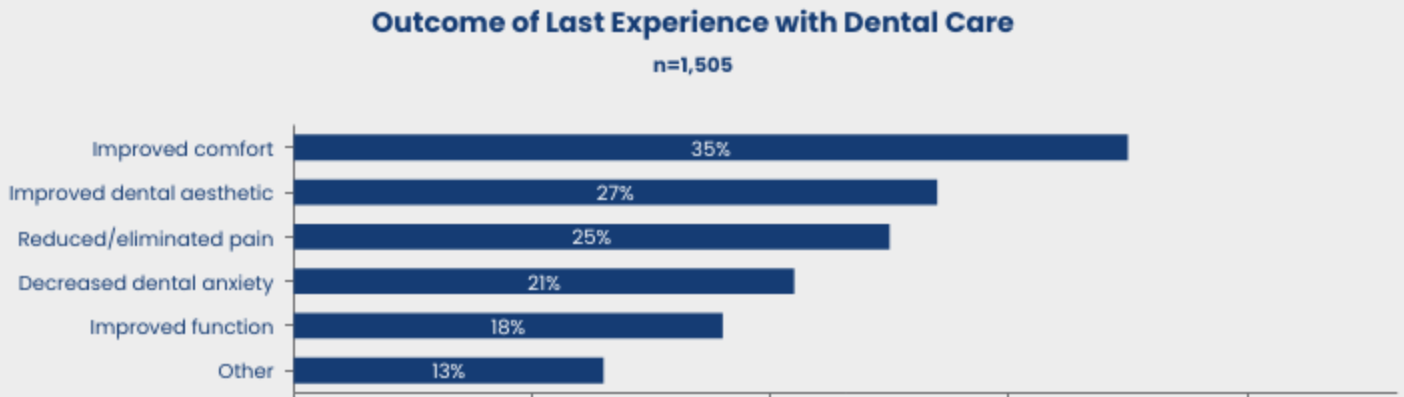
Satisfaction Scores by Demographic Characteristics

	Overall n=1,505	Has a disability n=316	Indigenous n=67	Racially marginalized n=297	English as a second language n=405	Ages 18- 24 n=181
Overall Satisfaction	76%	71%	66%	66%	63%	61%

DENTAL PATIENT JOURNEY

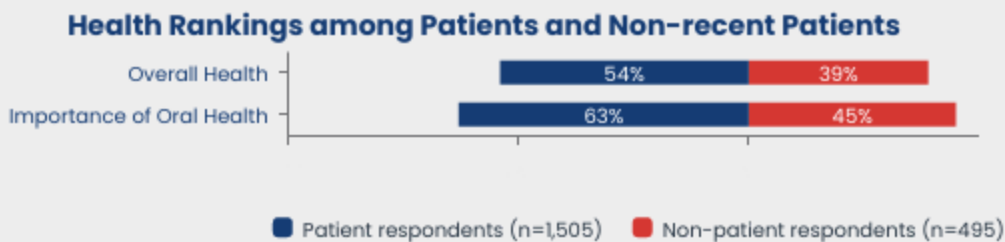
Outcome of Last Experience with Dental Office

Just over one-third of patient respondents (35%) experienced improved comfort as an outcome of their most recent visit to a dental office. Over one-quarter (27%) said their visit resulted in an improved dental aesthetic, and exactly one-quarter (25%) had their pain reduced or eliminated. Approximately one-fifth of respondents (21%) said their visit reduced their dental anxiety and just under one-fifth (18%) said that their visit improved functions such as chewing or jaw mobility.



Overall Health Indicators

All respondents were asked to rank their overall health on a seven-point scale from very poor to excellent. Half (50%) of all respondents rated their overall health as good or excellent. All respondents were also asked to rank the importance of oral health to their overall health on a seven-point scale from not at all important to extremely important. Three-in-five (59%) of all respondents rated the importance of oral health as important or extremely important. Non-patients ranked both their overall health, and the importance of oral health lower than patient respondents.



Health Indicators by Demographic Characteristics

	Overall n=2,000	Indigenous Identity n=96	Racially marginalized n=364	English as a second language n=454	Has a disability n=442	Ages 18-24 n=229
Overall Health	50%	38%	45%	49%	39%	51%
Importance of Oral Health	59%	49%	57%	59%	70%	37%

The Northern Health region had the lowest rating for their overall health (46%) and overall oral health importance (52%). While racially marginalized groups rated their overall dental experience satisfaction lower, their health and importance of oral health were similar to the satisfaction scores overall.

DENTAL PATIENT JOURNEY

Drivers of Satisfaction with Dental Providers in BC

To further understand the dental patient experience in British Columbia, an advanced key driver analysis was performed to identify service attributes that have high impact on the overall dental experience to inform performance enhancements. Regression analysis was conducted on all 16 service attributes along the dental patient journey. The key driver analysis was followed by ranking all service attributes from high to low based on patient satisfaction.

KEY TAKEAWAYS

- 1 Overall, just over three quarters of BC residents are satisfied or extremely satisfied with the dental care they and/or their dependant(s) receive.
- 2 Cleanliness and infection control measures, feelings of safety and comfort, and treatments/procedures being delivered as expected were aspects that earned the highest satisfaction scores.
- 3 Dental patients demand more from their provider in terms of transparency around treatment costs, and time and ability to make decisions in partnership with them.
- 4 Age, income, Indigenous identity and English language proficiency bear the largest gaps in satisfaction with dental care.
- 5 Satisfaction with patient consent ranks low and impacts informed decision-making. Pressure about choosing a particular option is a key driver for satisfaction.

The model identified two attributes that have a high impact on satisfaction and where the performance of oral health professionals can possibly be further enhanced as shown in the table below. The key driver analysis shows that patients appear to demand more from their dental care team in terms of prioritizing their patients' oral health without pressuring them to choose a particular option.

Key Drivers of Satisfaction for Patient Respondents

Attribute	Patient Journey	Satisfaction Score
Putting my oral health above all interests.	Pre-treatment	70
Not feeling pressured to choose a particular option.	Consent	68