FOR TEACHERS AND CAREERS LEADS

Dentistry mock interview

A sixth seven station MMI circuit for dentistry applicants, built around what the job gives back day to day, and no interviewer needs to be a dentist.

MOCK INTERVIEW 6 MMI CIRCUIT 7 STATIONS 7 MINUTES PER STATION

BEFORE YOU START

How to run this mock

1. Set up seven stations, one room or clearly separated space each, with a door card from the back of this pack on the door and one interviewer holding the matching station page.
2. Run students round in order: 7 minutes in the station, 2 minutes to move on. Seven students fit in one 63 minute circuit, twenty one if you start three at different points.
3. Interviewers mark all four domains at every station on the 1 to 4 scale, and write one line of evidence before the next student comes in, while it is still fresh.
4. Collect the station pages, copy the marks onto the scoring summary, and give every student one strength and one thing to work on. The debrief is the part that changes results.

MARKED THE SAME WAY AT EVERY STATION

The four scoring domains

M Motivation and insight

Knows what a dentist does all day, the practical and repetitive parts included.

1 Reasons that would fit any health course.
4 Specific, and clear about the real job.

C Communication

Explains clearly to someone anxious or in pain, and listens to what worries them.

1 Talks at the listener, or hides in jargon.
4 Plain, warm, and checks it has landed.

R Reflection and self awareness

Learns from experience rather than listing it, and knows the limits of their skill.

1 Describes what happened, learns nothing.
4 Says what changed, and what needs practice.

V Professional values and ethics

Puts the patient's health before what is quickest, cheapest or most wanted.

1 Gives the patient whatever they ask for.
4 Weighs need against want, and says why.

MOTIVATION FOR DENTISTRY

What do you think a dentist finds genuinely rewarding on an ordinary day, rather than on a dramatic one, and why does that appeal to you?

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- Where did that impression come from?
- What would you find unrewarding about the same day?

WHAT A STRONG CANDIDATE COVERS: A LISTENING AID, NOT A MODEL ANSWER. DO NOT READ IT OUT.

- Reaches for the ordinary rather than the dramatic: a nervous patient who sat still, a filling that fitted first time, a child who came back willingly.
- Knows the satisfaction is often small and repeated, and says why that would suit them rather than wear them down.
- Connects the reward to the craft as well as to the person, so the hands-on side of the job is not left out.
- Says where the picture came from, whether that is a practice, a family dentist or a dental student, rather than guessing.
- Honest that some days give very little back, and does not claim every appointment is meaningful.

NOTE FOR THE INTERVIEWER

Most students reach for rescuing someone in pain. Push gently for a Tuesday morning rather than an emergency. A candidate who can find something worthwhile in a routine check up has thought about the job as it is actually lived.

MARK ALL FOUR DOMAINS

	Little evidence	Some evidence	Clear evidence	Strong evidence
Motivation and insight	1	2	3	4
Communication	1	2	3	4
Reflection and self awareness	1	2	3	4
Professional values and ethics	1	2	3	4

EVIDENCE: ONE LINE, IN THEIR WORDS, BEFORE THE NEXT STUDENT COMES IN

WORK EXPERIENCE AND REFLECTION

Describe a time you watched someone handle a worried person well or badly, in a dental practice, a pharmacy, a surgery or a shop. What made the difference?

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- What did the worried person do that showed you how it had landed?
- What would you have said in that moment instead?

WHAT A STRONG CANDIDATE COVERS: A LISTENING AID, NOT A MODEL ANSWER. DO NOT READ IT OUT.

- One occasion told concretely, with enough detail that they were clearly present and watching rather than reconstructing it afterwards.
- What was actually said and done: the pace, the words avoided, whether the person was allowed to finish a sentence.
- Attention to the worried person as well as the professional, including what their face and their questions gave away.
- A learning point stated plainly, and carried across into how they would want to speak to someone in a dental chair.
- Keeps everyone involved anonymous without being asked, which matters as much at a pharmacy counter as on a ward.

NOTE FOR THE INTERVIEWER

A shop, a care home or a pharmacy counter earns full marks here. No dental placement is needed. Mark what the candidate noticed about the exchange, not the setting they happened to see it in.

MARK ALL FOUR DOMAINS

	Little evidence	Some evidence	Clear evidence	Strong evidence
Motivation and insight	1	2	3	4
Communication	1	2	3	4
Reflection and self awareness	1	2	3	4
Professional values and ethics	1	2	3	4

EVIDENCE: ONE LINE, IN THEIR WORDS, BEFORE THE NEXT STUDENT COMES IN

ETHICAL REASONING

A patient comes to you with a crown fitted elsewhere last year that has already failed. They ask you straight out whether the other dentist did a bad job. How would you handle that?

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- What if you privately thought the work was poor?
- Does anything change if the patient says they want to complain?

WHAT A STRONG CANDIDATE COVERS: A LISTENING AID, NOT A MODEL ANSWER. DO NOT READ IT OUT.

- Starts with the patient in front of them: what has failed, what it needs now, and what putting it right will cost them in time and discomfort.
- Recognises they cannot judge another clinician's work from the end result alone, without knowing what the mouth looked like at the time.
- Avoids both traps: running a colleague down, and covering for one out of professional loyalty.
- Finds wording that is neither an accusation nor a brush off, and says roughly what they would actually say out loud.
- Knows the patient has every right to raise a concern, and that helping them do that is not the same as taking sides.

NOTE FOR THE INTERVIEWER

There is no correct verdict here and no knowledge of complaints procedures is expected. Mark whether they can be honest with a patient without condemning someone they have never met, and whether the treatment the patient still needs stays in view.

MARK ALL FOUR DOMAINS

	Little evidence	Some evidence	Clear evidence	Strong evidence
Motivation and insight	1	2	3	4
Communication	1	2	3	4
Reflection and self awareness	1	2	3	4
Professional values and ethics	1	2	3	4

EVIDENCE: ONE LINE, IN THEIR WORDS, BEFORE THE NEXT STUDENT COMES IN

DENTISTRY AND THE PUBLIC

What does the state of someone's mouth have to do with the rest of their health? Why might that matter to the wider health service?

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- Which groups of people would you expect this to affect most?
- If you could change one thing to improve the nation's oral health, what would it be?

WHAT A STRONG CANDIDATE COVERS: A LISTENING AID, NOT A MODEL ANSWER. DO NOT READ IT OUT.

- Names real links rather than a vague claim: infection and pain, difficulty eating, sleep and work lost, and conditions such as diabetes that run both ways.
- Sees the social side too, including appearance, confidence and being able to smile in an interview.
- Follows untreated dental problems through to pressure elsewhere, such as people arriving at a GP or an emergency department in pain.
- Argues for prevention, and can say what prevention consists of beyond telling people to brush more.
- Is willing to mark which parts they are confident about and which they are reasoning towards.

NOTE FOR THE INTERVIEWER

Candidates often stop at the claim that teeth matter. Prompt for the mechanism. A student who can explain how a painful mouth changes what someone eats, and what that does over years, is reasoning rather than reciting.

MARK ALL FOUR DOMAINS

	Little evidence	Some evidence	Clear evidence	Strong evidence
Motivation and insight	1	2	3	4
Communication	1	2	3	4
Reflection and self awareness	1	2	3	4
Professional values and ethics	1	2	3	4

EVIDENCE: ONE LINE, IN THEIR WORDS, BEFORE THE NEXT STUDENT COMES IN

COMMUNICATION ROLE PLAY

Someone is complaining loudly in the waiting area about how long they have been kept. You are on reception today. Speak to them.

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- What would you do if the whole waiting room went quiet to listen?
- What would you say afterwards to the colleague who caused the delay?

BRIEF FOR THE PERSON PLAYING THE PART

Your part	You have waited fifty minutes and you are loud about it. You are really worried about missing a shift and losing the pay, but you lead with the waiting. If the candidate is calm and asks what the wait is costing you, you say so and quieten down.
Open with	Fifty minutes. Does anybody here actually work to a clock?
If handled well	Drop your voice, explain the shift you are about to miss, and accept a firm time or another day.
If handled badly	Get louder and appeal to the other people waiting. Never abusive, just harder to ignore.

WHAT A STRONG CANDIDATE COVERS: A LISTENING AID, NOT A MODEL ANSWER. DO NOT READ IT OUT.

- Moves the conversation somewhere less public before trying to fix anything.
- Apologises for the wait itself without inventing an excuse or blaming a colleague.
- Finds out what the delay is actually costing this person today.
- Offers something real and specific, and says what happens next.

NOTE FOR THE INTERVIEWER

Two run this station: one marks, one plays the patient from the brief. Mark the handling of the room as well as of the person.

MARK ALL FOUR DOMAINS

	Little evidence	Some evidence	Clear evidence	Strong evidence
Motivation and insight	1	2	3	4
Communication	1	2	3	4
Reflection and self awareness	1	2	3	4
Professional values and ethics	1	2	3	4

EVIDENCE: ONE LINE, IN THEIR WORDS, BEFORE THE NEXT STUDENT COMES IN

DATA AND PROBLEM SOLVING

Look at the table. Describe what it shows about getting seen, and say what it does not tell you.

ADULTS SAYING THEY TRIED AND FAILED TO GET AN NHS DENTAL APPOINTMENT, ONE REGION

Year	Adults surveyed	Could not get seen (%)	Waited over 3 months (%)
Year 1	2,000	11	9
Year 2	2,050	14	12
Year 3	1,980	22	19
Year 4	2,100	26	24
Year 5	2,040	25	28

These figures are invented for this exercise. They are not data from any real survey and should not be quoted as such.

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- What could explain the change in the middle years?
- What would you want to see alongside this before you were confident?

WHAT A STRONG CANDIDATE COVERS: A LISTENING AID, NOT A MODEL ANSWER. DO NOT READ IT OUT.

- Reads the table before judging it, including the fact that a similar number of adults was asked each year.
- Describes the shape rather than one number: a steep rise through the middle years and a flattening at the end.
- Notices that the last row moves in two directions at once, so fewer turned away does not mean faster treatment.
- Asks who was surveyed and how, since people who gave up looking may never appear in the count at all.
- Thinks about what sits behind the trend, such as how many practices in the region were taking new NHS patients.

NOTE FOR THE INTERVIEWER

Print this station page so the candidate can see the table while they talk. There is no right answer. Mark whether they read carefully and notice what a percentage alone cannot tell them.

MARK ALL FOUR DOMAINS

	Little evidence	Some evidence	Clear evidence	Strong evidence
Motivation and insight	1	2	3	4
Communication	1	2	3	4
Reflection and self awareness	1	2	3	4
Professional values and ethics	1	2	3	4

EVIDENCE: ONE LINE, IN THEIR WORDS, BEFORE THE NEXT STUDENT COMES IN

PERSONAL INSIGHT

Tell us about a time someone criticised the detail of something you had made or done. What did you do with that criticism?

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- What did you think in the first ten seconds, and what did you do instead?
- How would you want a tutor to tell you your work was not accurate enough?

WHAT A STRONG CANDIDATE COVERS: A LISTENING AID, NOT A MODEL ANSWER. DO NOT READ IT OUT.

- A real example with the criticism actually stated, rather than a vague mention of having had feedback.
- Honest about the first reaction, defensiveness included, without dressing it up as instant gratitude.
- Says what they did next, and whether the work itself changed as a result.
- Separates criticism that was useful from criticism that was not, and gives a reason for the distinction.
- Sees why this matters in dentistry, where work is checked closely and small inaccuracies end up in someone's mouth.

NOTE FOR THE INTERVIEWER

Dental training means having work marked to fractions of a millimetre, week after week. Mark whether the candidate can take that kind of correction without collapsing or arguing, not whether the example itself is impressive.

MARK ALL FOUR DOMAINS

	Little evidence	Some evidence	Clear evidence	Strong evidence
Motivation and insight	1	2	3	4
Communication	1	2	3	4
Reflection and self awareness	1	2	3	4
Professional values and ethics	1	2	3	4

EVIDENCE: ONE LINE, IN THEIR WORDS, BEFORE THE NEXT STUDENT COMES IN

Scoring summary

One row per student. Copy each mark across from the station sheets, then total the row. Every station is marked out of 16, so the circuit totals 112.

M Motivation and insight C Communication R Reflection and self awareness V Professional values and ethics

	Station 1				Station 2				Station 3				Station 4				Station 5				Station 6				Station 7				Total
STUDENT	M	C	R	V	M	C	R	V	M	C	R	V	M	C	R	V	M	C	R	V	M	C	R	V	M	C	R	V	/ 112

THE SCALE, AT EVERY STATION

1	Little evidence	Barely addressed, or addressed in a way that raises a concern. Would need substantial work before a real interview.
2	Some evidence	Touched on it, but thinly or only when prompted. The material is there and the answer is not.
3	Clear evidence	Covered it well and unprompted. The kind of answer that does the candidate no harm at a real interview.
4	Strong evidence	Covered it with insight and specifics, and made the interviewer want to hear more. Rare, and should stay rare.

Briefing for interviewers

Read this once before the circuit starts. It takes about three minutes, and it is the difference between a mock that flatters everyone and one that tells a student something they can act on.

You do not need to be a dentist to interview

You are not judging dental knowledge. You are judging whether a seventeen year old can think out loud, listen, reflect honestly and hold more than one side of a problem, which is what a dental school is looking for too. Everything you need is on your station page, and the four domains mean the same thing at every station in the circuit.

Before the circuit starts

- Read your station page twice, including the two follow up prompts, and check the door card outside matches your station.
- Have the page, a pen and a watch or a phone timer in front of you. Someone will call the changeover, but keep your own eye on the time.
- Decide with the coordinator who calls time if you are running the role play station, because that station needs two people.

Running your station

- Ask the question exactly as written, so every student gets the same station.
- Then stop talking. Let a silence run for a good five seconds before you prompt: thinking time is not a fault.
- Use a follow up only if the candidate has stalled or has finished early. Two prompts is the maximum.
- Do not teach, correct or react. Nodding along warmly to one student and sitting stony faced with the next is the most common way a circuit becomes unfair.
- Keep the listening aid beside you, not in front of the candidate. It is there to help you hear a thin answer, and it is not a checklist to tick off or read aloud.

Marking

- Mark all four domains, every time, even at a station that leans on two of them. A candidate who communicates beautifully and says nothing can score 4 and 1 on the same answer.
- Mark immediately, before the next student walks in. Marks written at the end of the afternoon are memories of the strongest and the weakest, and nothing in between.
- Write one line of evidence per student, in their words if you can. That line is what makes the debrief useful, and it is the part students remember.
- Use the whole scale. If everyone gets a 3, the circuit has told the student nothing.

Afterwards

- Hand your station pages to the coordinator with every mark and evidence line filled in.
- Flag anything that worried you, for example a student who was very distressed or an answer that raised a safeguarding concern, to the member of staff running the day rather than to the student.
- If you can stay for ten minutes, the students get far more from hearing one strength and one improvement from you directly than from a score.

STATION 1 OF 7

MOTIVATION FOR DENTISTRY

What do you think a dentist finds genuinely rewarding on an ordinary day, rather than on a dramatic one, and why does that appeal to you?

Take a moment to think before you answer. The interviewer may ask you more.

STATION 2 OF 7

WORK EXPERIENCE AND REFLECTION

Describe a time you watched someone handle a worried person well or badly, in a dental practice, a pharmacy, a surgery or a shop. What made the difference?

Take a moment to think before you answer. The interviewer may ask you more.

STATION 3 OF 7

ETHICAL REASONING

A patient comes to you with a crown fitted elsewhere last year that has already failed. They ask you straight out whether the other dentist did a bad job. How would you handle that?

Take a moment to think before you answer. The interviewer may ask you more.

What does the state of someone's mouth have to do with the rest of their health? Why might that matter to the wider health service?

Take a moment to think before you answer. The interviewer may ask you more.

STATION 5 OF 7

COMMUNICATION ROLE PLAY

Someone is complaining loudly in the waiting area about how long they have been kept. You are on reception today. Speak to them.

Take a moment to think before you answer. The interviewer may ask you more.

Look at the table. Describe what it shows about getting seen, and say what it does not tell you.

Take a moment to think before you answer. The interviewer may ask you more.

STATION 7 OF 7

PERSONAL INSIGHT

Tell us about a time someone criticised the detail of something you had made or done. What did you do with that criticism?

Take a moment to think before you answer. The interviewer may ask you more.