

Dentistry mock interview

An eighth seven station MMI circuit for dentistry applicants, built around precision, access and who dental care actually reaches, and no interviewer needs to be a dentist.

MOCK INTERVIEW 8 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

Imagine a parent in the waiting room asks why you chose dentistry. Answer them the way you would answer them, not the way you would answer an examiner.

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- What would you leave out of that answer, and why?
- What would you say if they asked why not medicine?

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

- Speaks like a person rather than a personal statement, and lands the reason inside a sentence or two.
- Gives something only they could say: a particular experience, a particular pull towards working with their hands.
- Pitches it for a parent in a waiting room, so no jargon and no list of achievements.
- Carries warmth as well as content, since the parent is really asking whether they would be safe to trust.
- Holds up under the follow up, so the reason does not change shape the moment it is pushed.

NOTE FOR THE INTERVIEWER

The framing is the test. Many candidates recite a written answer whatever they are asked. Mark whether they can drop the register and talk to a real person while still saying something worth hearing.

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

Tell us about something you have done that needed you to be careful and accurate for a long stretch of time. How did you keep that up?

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- What happened on the occasion your concentration slipped?
- How did you know whether the finished result was good enough?

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

- A genuine example with the duration made clear, whether that is baking, model making, nails, hair, sport or a stock count.
- Says what the accuracy actually consisted of, so the standard is visible to somebody who has never done it.
- Describes how they sustained it: breaks, checking as they went, slowing down, setting up properly first.
- Honest about the point where it went wrong, and what they did about the result afterwards.
- Judges their own work against a standard rather than against the praise they received for it.

NOTE FOR THE INTERVIEWER

No dental or laboratory experience is needed here and none should be expected. A part time job counting stock scores as well as a craft hobby. Listen for a described standard, not for an impressive activity.

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ETHICAL REASONING

Some practices want to charge patients who repeatedly miss appointments without warning. Do you think that is fair? Argue both sides.

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- Who would a charge like that fall hardest on?
- What else could a practice try first?

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

- Understands why it is a real problem, since an empty chair still costs the practice and the slot could have gone to somebody in pain.
- Makes a serious case for the other side, including people who cannot control their working hours or their transport.
- Notices that the patients most likely to miss appointments are often the ones who most need seeing.
- Suggests alternatives such as reminders, easier cancelling, or a conversation before any penalty at all.
- Reaches a position and says what would change their mind, rather than sitting on the fence to be safe.

NOTE FOR THE INTERVIEWER

There is no expected answer and no policy knowledge is required. Mark whether they can argue the side they disagree with as well as their own, and whether they think about who a rule like this lands on.

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DENTISTRY AND THE PUBLIC

Why do you think some groups of people in this country have far worse teeth than others, and what would you do about it?

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- Is that mainly about how people behave, or about the circumstances they live in?
- Where would you spend the effort first, and why there?

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

- Names causes beyond brushing: income, sugary food being cheap and everywhere, where practices are, time off work, fear passed down a family.
- Understands that access and behaviour feed each other rather than competing as explanations.
- Avoids blaming individuals, while still leaving room for what people can change for themselves.
- Picks a target and defends it, whether that is young children, prevention in schools, or getting practices to where the need is.
- Is clear about which parts of the answer are evidence and which are their own opinion.

NOTE FOR THE INTERVIEWER

This station can drift into politics, so stay neutral in your face as well as in your words. Mark whether the candidate can hold structural causes and personal ones together without dismissing either.

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COMMUNICATION ROLE PLAY

You are helping at an open evening at a dental practice. A parent wants their child's crooked teeth straightened now. Speak to them.

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- What would you do if they pushed you for a number of months?
- How would you bring the child into the conversation?

BRIEF FOR THE PERSON PLAYING THE PART

Your part	You are the parent of a twelve year old whose front teeth overlap. You are pushing for it to be sorted this year and you want somebody to say yes. Your real worry is that your child is being teased. You soften if the candidate asks about them.
Open with	So can it just be done over the summer? Somebody must be able to tell me.
If handled well	Mention the teasing, and accept a name and a next step rather than an answer tonight.
If handled badly	Press harder for a yes, and say nobody ever gives you a straight answer. Never rude.

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

- Finds out what is actually worrying the parent, and whether the child minds.
- Is honest about not being able to give clinical advice.
- Explains who can answer this properly and how to reach them.
- Does not promise a timescale or a result to escape the conversation.

NOTE FOR THE INTERVIEWER

Two run this station: one marks, one plays the parent from the brief. The test is holding a warm limit, not knowing any orthodontics.

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DATA AND PROBLEM SOLVING

Four areas report their orthodontic waits. Which figure worries you most, and what would you need to know before acting on it?

WAIT FOR A FIRST ORTHODONTIC APPOINTMENT AFTER REFERRAL, FOUR AREAS, ONE YEAR

Area	Children referred	Median wait (months)	Longest wait (months)
North	1,400	9	21
East	2,100	14	30
South	900	7	26
West	1,650	16	19

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

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- Which area would you look into first?
- What would a longer wait actually mean for a twelve year old?

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

- Reads both wait columns together rather than picking whichever single number looks worst.
- Notices that the area with the shortest median has one of the longest tails, so somebody there is waiting a very long time.
- Sees that the area with the highest median is also the most predictable, and asks which of the two they would rather have.
- Relates the figures to the number of children referred, since the same wait means more children in a bigger area.
- Names what is missing, such as how urgent each referral was and how many families simply gave up.

NOTE FOR THE INTERVIEWER

Print this station page so the candidate can see the table. Mark whether they notice that a median and a longest wait tell different stories, and whether they say what they do not know.

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PERSONAL INSIGHT

Tell us about a time you had to be patient with someone who was hard to help. What did you do, and what did it take out of you?

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- What were they actually finding difficult, do you think?
- What would you do differently if it happened again tomorrow?

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

- A specific person and situation, described without contempt for them.
- Says what made it hard, honestly, rather than presenting themselves as endlessly calm.
- Shows a genuine attempt to work out what was going on underneath the difficulty.
- Names the cost to themselves, which is what the second half of the question is asking for.
- Connects it to a chair side reality, such as an adult who cancels twice before finally arriving.

NOTE FOR THE INTERVIEWER

Candidates often answer only the first half. Ask the second half again if they skip it. A student who admits they were irritated and stayed kind anyway is showing more than one who claims they felt nothing at all.

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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.

Imagine a parent in the waiting room asks why you chose dentistry. Answer them the way you would answer them, not the way you would answer an examiner.

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

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something you
have done that
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How did you keep
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Take a moment to think before you answer. The interviewer may ask you more.

**You are helping at
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A parent wants
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Speak to them.**

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