FOR TEACHERS AND CAREERS LEADS

Medicine mock interview

A fifth seven station MMI circuit for medicine applicants, weighted towards the answers a candidate would rather not give: doubts, refusals and criticism. Interviewers do not need to be doctors.

MOCK INTERVIEW 5 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 the job really involves, hard parts included, and why it suits them.

1 Generic reasons that would fit any career.

4 Personal and specific, honest about the hard parts.

C Communication

Clear, structured and pitched at the listener. Listens as well as talks.

1 Rambling or memorised, or talks over the interviewer.

4 Plain, structured, and answers what was actually asked.

R Reflection and self awareness

Learns from experience rather than listing it. Honest about limits.

1 Describes what happened, with no learning attached.

4 Says what changed, and what still needs work.

V Professional values and ethics

Puts the patient first, weighs both sides, and knows when to ask for help.

1 Jumps to one answer, ignoring who it affects.

4 Weighs both sides, and knows where their authority ends.

MOTIVATION FOR MEDICINE

What would have to be true for you to decide, three years from now, that medicine had been the wrong choice for you?

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- What would you do at that point?
- Is there anything you have already seen that gave you doubts?

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

- Engages with the question rather than insisting that nothing could ever change their mind.
- Names something plausible: the length of training, the hours set against a life outside, or finding that patient contact drains them rather than sustains them.
- Shows they have looked at the real job, because nobody can name a deal breaker for work they have not examined.
- Treats changing course as a decision rather than a disaster, and can say who they would talk to about it.
- Comes back to what does hold them, without turning the answer into a speech about loving medicine.

NOTE FOR THE INTERVIEWER

Some candidates think that admitting doubt loses marks. Say once that there is no trap here, then leave them to it. An honest answer to this question is one of the strongest signals in the circuit.

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 a team you were part of where you were not the leader. What did you contribute, and how did you know it was useful?

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- What did the person leading it do that helped you contribute?
- When did you disagree with them, and what did you do about it?

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

- Picks a real team with a shared task, which may be a shift rota, a kitchen, a sports side or a group project.
- Describes a contribution that is not leadership: doing the dull part, noticing someone struggling, keeping the record straight.
- Has evidence that it mattered, from what changed or from what somebody said, rather than simply asserting it.
- Talks about the leader without competing with them, and can disagree without undermining.
- Sees the link to a ward, where most of a doctor's working life is spent in somebody else's team.

NOTE FOR THE INTERVIEWER

A job in a shop or a cafe answers this as well as anything organised by a school, and is often more convincing. Mark the contribution, not the setting.

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

You are on a placement and a member of staff arrives smelling strongly of alcohol. What are the issues here, and what would you do?

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- What if they are far more senior than you?
- Does it change anything if they seem to be working perfectly well?

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

- Puts patient safety first and says so plainly, ahead of loyalty, embarrassment or rank.
- Does not act as judge: smelling of alcohol is not the same as being unfit to work, and finding that out is somebody's job.
- Takes a proportionate step, which is telling a responsible member of staff at the time rather than confronting or ignoring.
- Recognises the person may be unwell or in trouble, and that raising it can be the kindest thing available.
- Knows exactly where a student stands: pass it to someone who can act, and do not try to manage it alone.

NOTE FOR THE INTERVIEWER

Candidates often want to speak to the person directly, as they would with a friend. This is the case where that is the wrong first move, so use the first follow up and see whether they can say why seniority changes nothing.

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

THE NHS AND ITS PRESSURES

Should the NHS spend more on preventing illness than on treating it? Make the case, then tell us what is wrong with the case you have just made.

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- Who loses out while a prevention programme takes years to work?
- How would you know in ten years whether it had worked?

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

- Argues the prevention side properly: illness avoided is cheaper and better than illness treated.
- Then argues against themselves honestly, which is the harder half of the question and the reason it is asked.
- Sees the timing problem: the saving arrives years later, and the person needing treatment is here today.
- Notices that prevention is not only campaigns, and takes in housing, food, income and working conditions.
- Avoids blaming individuals for becoming ill, and says who a prevention push would be hardest on.

NOTE FOR THE INTERVIEWER

The instruction to argue against themselves is the station. A candidate who only makes one case has answered half of it, so prompt once and mark what comes back.

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Professional values and ethics	1	2	3	4

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

COMMUNICATION ROLE PLAY

You work weekend shifts. The new rota gives you one you genuinely cannot work. Your manager is here, and busy. Speak to them.

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- What would you do if they simply said no?
- What could you have done earlier to avoid this?

BRIEF FOR THE PERSON PLAYING THE PART

Your part	You manage the candidate. You are short staffed and behind, so you are not unkind, just harried, and your first instinct is to say the rota is done. If they are clear, brief and offer a swap, you look at it properly and find a way.
Open with	If this is about the rota, it went out yesterday and it is done.
If handled well	Stop, look at the rota properly, and agree to the swap they suggest.
If handled badly	Keep half an eye on your screen and repeat that the rota is done. Never shout.

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

- Says clearly and early what they need, instead of apologising their way around it.
- Gives the reason once, without over explaining or inventing a better one.
- Reads that the manager is busy, and keeps it short and calm.
- Brings a solution such as a swap, and can accept an answer they dislike.

NOTE FOR THE INTERVIEWER

Two people run this station: one marks, one plays the manager. Mark whether they stay clear and polite under a brush off.

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

DATA AND PROBLEM SOLVING

Look at the table comparing two treatments. Which would you choose for yourself, and what would change your mind?

TWO TREATMENTS FOR THE SAME CONDITION, ONE TRIAL

Treatment	Patients	Improved at 6 months	Had a side effect
A	480	71%	34%
B	460	58%	9%

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

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- Would you give the same answer for a patient of eighty?
- What would you want to ask the people who ran this trial?

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

- Reads both columns before choosing, and notices that the better success rate comes with far more side effects.
- Asks what the side effects actually are, because a rash and a stroke are not the same thing.
- Asks what the numbers are out of, and over how long the patients were followed up.
- Recognises that the choice depends on the patient, and that a different person could reasonably choose the other one.
- Says what the table leaves out, such as how each treatment is taken, how often, and who was studied.

NOTE FOR THE INTERVIEWER

Print this station page so the candidate can see the table. Either treatment can be defended. Mark the reasoning, and whether they realise the answer depends on whose life it is.

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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 criticism you did not want to hear and acted on anyway. What did you do with it?

IF THEY STALL OR FINISH EARLY, YOU MAY ASK

- How long was it before you could take it seriously?
- What criticism have you had that you decided not to act on?

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

- Picks a criticism with a sting in it, rather than a compliment dressed up as feedback.
- Admits the first reaction honestly, defensiveness included, before describing what came next.
- Describes a specific change and how long they kept it up, which is what separates a real answer from a tidy one.
- Says something about the person who gave it, and why they came to trust it.
- Knows that not all criticism is right, and can say how they tell the difference.

NOTE FOR THE INTERVIEWER

The second follow up is the interesting one. A student who takes every criticism equally seriously is not reflecting, they are complying. Give silence before you prompt.

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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 doctor to interview

You are not judging medical 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. 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 MEDICINE

What would have to be true for you to decide, three years from now, that medicine had been the wrong choice for you?

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

Tell us about a team you were part of where you were not the leader. What did you contribute, and how did you know it was useful?

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

STATION 3 OF 7

ETHICAL REASONING

You are on a placement and a member of staff arrives smelling strongly of alcohol. What are the issues here, and what would you do?

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

Should the NHS spend more on preventing illness than on treating it? Make the case, then tell us what is wrong with the case you have just made.

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

STATION 5 OF 7

COMMUNICATION ROLE PLAY

You work weekend shifts. The new rota gives you one you genuinely cannot work. Your manager is here, and busy. Speak to them.

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

Look at the table comparing two treatments. Which would you choose for yourself, and what would change your mind?

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

STATION 7 OF 7

PERSONAL INSIGHT

Tell us about a criticism you did not want to hear and acted on anyway. What did you do with it?

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