

Letters to the editor

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Dental education

Microteaching

Sir, the use of microteaching is well-documented as a technique used to prepare teachers for the real classroom and allows for systematic training and experimentation in desired teacher behaviours.¹ Microteaching has made an impact in various areas of education, including the health sciences.² Today's university educators are also expected to be able to utilise twenty-first century technologies in their classrooms as they facilitate the learning of millennials who appreciate the use of innovative technologies to enhance the teaching and learning experience. Healthcare providers such as dental surgeons, paediatricians or other health professionals can also use these technologies in their practices as they seek to educate clients on various healthcare topics.

We employed Prezi as a presentation tool for the microteaching activity of the Certificate in University Teaching and Learning (CUTL) postgraduate course offered to faculty members by the University of the West Indies (UWI), Mona. Prezi was chosen as an alternative to PowerPoint as it allowed for a graphic detailing of the outline of the lesson and seamless inclusion of the embedded videos and vox-pop interviews.³ The presentation was delivered to a group of peers under the supervision of the facilitator of the Teaching with Technology module. The microteaching consisted of a 15 minute lecture presented by both authors, each focusing on their area of specialty (dentistry and paediatrics). Opportunity was given at the end for questions from the peer audience who were also asked to give written feedback.

The ADDIE model of instructional design (representing the phases of Analysis, Design, Development, Implementation, and Evaluation) was integrated in the discussed lesson plan. The lesson focused on the

Public Health topic titled Periodontitis, Pregnancy and Preterm Birth (BC's Triple P), with content on periodontal/gum disease in pregnancy and its influence in causing preterm birth. Feedback from peer evaluators indicated that the content was educational and provided information that lay persons would find useful. Constructive criticism included suggestions such as using more class interaction and the use of simpler terms geared toward lay persons. There was also helpful feedback on the quality of the audio and visual technology embedded in the presentation.

A. Babu Santosh, C. Gabbadon, by email

1. Brent R, Wheatley EA, Thomson WS. Videotaped microteaching: Bridging the gap from the university to the classroom. *Teach Educ* 1996; **31**: 238–247.
2. Remesh A. Microteaching, an efficient technique for learning effective teaching. *J Res Med Sci* 2013; **18**: 158–163. Prezi presentation retrieved from: <https://prezi.com/j8vhlndqhdq/relationship-of-periodontitis-with-pregnancy-and-preterm-birth/>.
3. Periodontal disease and pregnancy. MilesMadisonDDS. YouTube video retrieved from: <https://www.youtube.com/watch?v=zg2jHSnHRT8>.

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Foundation training alternative

Sir, I am writing to discuss my experiences after recently completing General Professional Training (GPT) in the North East since graduating from the University of Manchester in 2015.

Many undergraduates and dentists to my knowledge are not aware of what GPT is or what it offers to new graduates. The majority of jobs available after national recruitment and graduation are one-year foundation posts; however, there are some longer two-year GPT schemes available.

GPT is a two-year longitudinal training programme which encompasses Foundation Training and Dental Core Training Level 1. As of 2017, there are only two remaining GPT schemes available, one in the North East and the other in Yorkshire & Humberside.

Over the two-year post, GPTs spend 50% of their time in a primary care (dental practice) setting and the other 50% in a secondary care (hospital) setting. Essentially, this means trainees spend alternate weeks in practice and hospital.

The hospital proportion was split into two halves:

1. The restorative year
2. A year split between paediatric dentistry and orthodontics/dental emergency clinic/oral surgery rotations.

I have found many positives to GPT. It has offered a wide exposure to all aspects of dentistry and close supervision from experienced consultants, boosting my practical experience following on from undergraduate level. The expected future GPT pay is 50% FD pay (£31,044), and 50% hospital pay (£36,461), therefore roughly £33,750, which is more than an FD salary. GPT offered separate MFDS study days in addition to FD study days. I believe this further guidance and mentoring allowed me to perform well in MFDS/MJDF examinations, which subsequently has led to me successfully completing MFDS Parts 1 and 2, and being awarded the TC White Medal Award from the Royal College of Physicians and Surgeons of Glasgow for my performance. Being employed for two years also allowed easier access and continuation of case reports/audits/papers/posters, boosting my overall CV and chances of gaining further hospital posts.

There are of course negatives to any job, and GPT provided a very steep learning curve at the beginning by exposing new graduates to complex procedures that are not usually performed at undergraduate level. A large amount of time was dedicated to note taking and dictation of letters, and due to the split between practice and hospital, patients sometimes have to wait