

# Reaching the finish line

In a continuation of the series, **Preetee Hylton** shares her thoughts on the final week of the Smile Revolution course

## Preetee Hylton

General/restorative dental nurse at The No.8 Partnership in London



In autumn 2020, Preetee Hylton started a five-week course being run by dental educator Victoria Wilson (best known for the Smile Revolution podcast series).

The course aims to help dental professionals plan the launch of an oral health promotional venture.

Preetee's place was sponsored by Philips Oral Healthcare, which is also supporting the training course as part of its ongoing commitment to education for the dental professionals.

Following on from her introduction to the course, in the March issue of *Dentistry*, Preetee shared what she'd learnt on the course in weeks three and four.

In a continuation of the interview series, we speak to Preetee after the final week of the course – week five.

**Dentistry:** What did you learn from this last week's content that will contribute to the success of your project?

Preetee Hylton (PH): This week we covered the financial/costs of our potential projects. I learnt that there are companies willing to fund researches and projects for better oral health.

**Dentistry:** Has week five's content contributed to the development of your oral health promotional project? If yes, how?

PH: My project has evolved over the five weeks of the course. The more research I do, the more information I uncover; therefore, my potential project is being constantly modified. Finding concrete evidence to support my project is going to be absolutely key.

**Dentistry:** Is there any part of the content you would have liked to have learnt more about?

PH: On further thought, yes, I would like to learn about the technical process and legalities involved in starting a project or a business.

**Dentistry:** If you could make the course longer or shorter, how many weeks do you think the course would ideally be?

PH: I definitely think longer – eight to 10 weeks would have been even better. We need time to research and to gather information and evidence to support our project as well as devising surveys. In addition, awaiting responses from other medical/dental professionals requires further time – we don't always get the answers from them as soon as we request them.

**Dentistry:** Would you change any aspect of the structure of the course?

PH: No, I don't think I would. The course was well delivered and Victoria never stopped pushing us to keep working.

I found that discussing matters with Victoria and the other delegates helped me week on week to improve my project

**Dentistry:** How could you use the content shared in week five to impact the public's/patient's oral health?

PH: Victoria helped me word my project summary more effectively, so that it has a more welcoming tone and will positively impact the way the public will perceive it. My communication style is rather direct, I tend to get straight to the point and this may not always be the best approach to take.

This week I have learnt about aligning my ideas to that of the public's oral health needs and modifying my communication style, without having to let go of my authenticity.

**Dentistry:** Do you feel the content shared in the course this week could be of benefit to your whole team. If so how? And why?

PH: I think yes. We always tend to discuss things when it comes to promoting better oral health, we learn more by sharing. We can collectively focus on elements that continuously inspire the team to deliver excellence in dentistry and work on delivering better oral health.

This may also benefit team members individually and inspire them to start their own oral health project/business.

**Dentistry:** Did the course trigger any other areas that could be of interest for you to explore further this week?

PH: It has. These five weeks have triggered many areas, but what I have learnt from Victoria is the ability to break up my project in various phases.

It's about implementing the idea, observing and assessing what works and what doesn't, and learning about how to engage with my target audience to see how I can support them in a more constructive way.

**Dentistry:** Do you feel any tasks required more time to complete? If so, what tasks and how long would you have like to complete the named tasks?

PH: I do believe yes, I think to contact other healthcare professionals and waiting for a response (if any) takes time.

As we were told, our project matters the most to 'us' and therefore may not be top of mind for others. I also learnt that some projects may be successful and others may fail. Market research takes a huge amount of time, therefore that would have been the one task I would have preferred to have spent more time on, as the more prepared one is the less likely one is to fail.

**This week I have learnt about aligning my ideas to that of the public's oral health needs and modifying my communication style, without having to let go of my authenticity**

**Dentistry:** What could be changed to improve the course this week?

PH: Nothing that I can think of.

I have been provided with one-to-one mentoring sessions and helped throughout the five-week course, which added to my appreciation of every facet.

**Dentistry:** How would you rate your overall experience of the course for week five?

PH: 10, without a doubt. This is week five and it is sad to know that it is the end of the course already.

I have enjoyed the other delegates' company and have appreciated their positive input in my project.

The most significant challenge that I faced was my request for support for my project being turned down by one of the institutions I approached. That was quite disappointing, but Victoria was there, as my mentor, and constantly encouraging me.

I am also grateful to Philips as it sponsored my place on the course and without that I would have had to find the funding to enable me to attend. **D**

## PREETEE'S PROJECT CONCEPT

I used to think that delivering oral health meant giving presentations and lectures, creating and distributing oral health leaflets or pamphlets.

What I have realised throughout my journey on this course is that oral health education is not only about delivery. It is about creating pathways amongst various healthcare professionals to provide a better service to the public. My final oral health project, 'Mother of molars', is about creating an effective, sustainable and defined pathway between midwives and dental care professionals, and aiming to include oral healthcare/education as an integral part of antenatal support to provide better care and service to expectant mothers.

The body undergoes a number of changes during pregnancy and so does the oral cavity. Yet there is a lack of awareness and motivation for mums-to-be to access dental care, in spite of them knowing that they are entitled to free NHS dental care during pregnancy.

My intention is to encourage expectant women to not feel embarrassed and be able to talk openly and seek assistance about their oral health.

I would like midwives to play a part in this as they are most likely to be the professionals who see them on a regular basis.

My target group is currently expectant mothers, however in time, I hope to extend this and hopefully reach women who are in the process of trying to conceive as well.

Watch this space, as I hope to be able to report back about my project as it is rolled out.

**FOR MORE INFORMATION** about Smile Revolution courses, with delegate places sponsored by Philips for 2021, visit [www.smile-revolution.net](http://www.smile-revolution.net).

