

Real-life story - Maria Morgan

Initially Maria wanted to be a cookery teacher and so her first degree was in home economics. However, after a postgraduate certificate in education, she declined a job as a cookery teacher and studied for an MPhil in nutritional education.

Maria Morgan

Senior lecturer dental public health

Employer or university

Cardiff University school of dentistry

Salary range

£55k-£65k

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How I got into the role

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In 1991, I started working as research officer in public health medicine and studied for my master of public health (MPH). After that, I worked for one year in commissioning and then in 1997 I became a lecturer in dental public health. I then wrote up my portfolio for the generalist specialist public health training programme and secured specialist status in 2007. In 2012 I became a senior lecturer in public health dentistry.

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What I do

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Being called a lecturer is a slight misnomer because I only teach for about 10% of my time. I teach on both the undergraduate and postgraduate programmes for dental students, dental hygienists and dental therapists. Other aspects of my role include:

- leading the work of the Welsh Oral Health Information Unit (WOHIU). This is an information service for Public Health Wales. Engagement with other organisations is key to this role, and I work with colleagues from the Welsh Government, Public Health Wales, NHS dentistry, the British Association of Community Dentistry and the Department of Health
- undertaking public health research focusing on dental public health, nutrition and dental [epidemiology](#) [1]
- monitoring the 'Designed to Smile' campaign. This is a Welsh national oral health promotion programme. It focuses on the promotion to schools and nurseries of supervised tooth brushing with a fluoride toothpaste, and the application of fissure sealants (plastic coatings painted on to the grooves of the back teeth) or fluoride varnish (a pale yellow gel that provides extra protection against tooth decay). I monitor the campaign and make sure that everything we do is recorded, and then I analyse the information (eg, looking at: how many schools and nurseries decided to take part in the project compared with the number we targeted; and whether the schools and nurseries taking part are in more wealthy or more deprived areas)
- working on service reviews and health needs assessments, eg I get involved in reviewing the quality of the dental services that are provided by the NHS or others, and in assessing the dental health needs of the local population
- researching and writing papers for publication in peer-reviewed academic journals. A recent study was titled: "A qualitative study of children's understandings and motivations surrounding novelty sweets"
- workforce development at a national level. I act as an academic verifier for the UK Public Health Register. The verifier ensures that there is fairness and equity in the assessment of the portfolios and agrees whether candidate should go through to validation. I feed my report back to UKPHR

Most of my work, about half, focuses on vulnerable groups such as children, people with special needs and older people who are in care homes, to ensure that they get access to the very best dental health support that is possible.

The best bits and challenges

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I feel privileged that I have been able to work in dental public health and develop my role. I enjoy the challenges my role presents, the variety, and the people I meet. In 1997, when I started, there was nothing in place in terms of a national approach to oral health information. I have been able to put in the foundations and then develop the role to what it is today. It has been like slowly putting the pieces together in a big jigsaw and it has all come to fruition so that in Wales we now have an effective oral health information service that is embedded in dental academia.

I enjoy learning and have learnt along the way. I don't ever want to stop learning. I enjoy passing on my knowledge and experience to the students and others that I work with. Working in a small country is very positive because I'm involved at many levels. I'm involved in developing projects, implementing them, gathering and analysing the data and then reporting back my findings to Public Health Wales and the Welsh Government, so helping to drive policy forward.

The volume of work is the biggest challenge, there is only me and I get many requests. I do have some administrative support, but still there is a great deal of work. People seem to value and respect what I do, so they keep coming back and I find it difficult to say no. It is sometimes difficult to manage people's expectations.

Sometimes people struggle to see the importance of oral health because it's rarely a life-or-death situation. However it's so intertwined with general health and deprivation that it really is key. Even the undergraduate dental students struggle. Sometimes they just want to get on with learning about the clinical and practical aspects of dentistry, the "drilling and filling" so to speak; they find audit, clinical governance and the evidence base etc. less exciting. However, they see the relevance more as they mature in their careers.

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**Career plans
and top tips for
others**

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I would like to do more work at a United Kingdom level, focusing on nutrition and oral health. I think working across the UK would broaden my horizon; we can all learn from each other. I have done some work in Scotland and I learnt about their older people's campaign 'Caring for Smiles', it made me think about what we could do for older people

in Wales.

I think I would tell young people to get a good broad-based degree that has an element of health included, eg geography, history, environmental studies, public health, nutrition, something like that. The role needs people who can think outside the box; good communicators; people who have good writing skills; good all-rounders, with determination; people who can engage others and bring people together.

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Links

[1] <https://www.healthcareers.nhs.uk/glossary#Epidemiology>