

Inspection Report

29 July 2026



Gumshields2Go Ltd

Type of service: Independent Hospital (IH) – Dental Treatment

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Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>, [The Independent Health Care Regulations \(Northern Ireland\) 2005](#) and the [Minimum Standards for Dental Care and Treatment \(March 2011\)](#)

1.0 Service information

Organisation/Registered Provider: Gumshields2Go Ltd	Registered Manager: Dr Cathy Robinson
Registered Person: Dr Cathy Robinson	Date registered: 4 September 2018
Person in charge at the time of inspection: Dr Cathy Robinson	Number of registered places: 1 (Mobile Dental Chair)
Categories of care: Dental Treatment	
Brief description of how the service operates: Gumshields2Go Ltd is registered with the Regulation and Quality Improvement Authority (RQIA) as an independent hospital (IH) with a dental treatment category of care. Gumshields2Go Ltd is a mobile service that travels to community venues such as sporting facilities and schools. The service has one registered mobile dental chair and provides a gum shield service only and does not provide conventional dental care and treatment. This service had previously also been offered in-house, in a dental surgery, in combination with the mobile service however, the in-house service has ceased to operate.	

2.0 Inspection summary

This was an announced inspection undertaken by a care inspector on 29 July 2026 from 10.30 am to 1.30 pm.

It focused on the themes for the 2026/27 inspection year and assessed progress with any areas for improvement identified during the last care inspection.

There was evidence of good practice in relation to staff training; management of medical emergencies; infection prevention and control (IPC); management of complaints and incidents; and governance arrangements.

No immediate concerns were identified regarding the delivery of front line patient care.

3.0 How we inspect

RQIA is required to inspect registered services in accordance with legislation. To do this, we gather and review the information we hold about the service, examine a variety of relevant records, meet and talk with staff and management and observe practices on the day of the inspection.

The information obtained is then considered before a determination is made on whether the practice is operating in accordance with the relevant legislation and minimum standards.

Examples of good practice are acknowledged and any areas for improvement are discussed with the person in charge and detailed in the quality improvement plan (QIP).

4.0 What people told us about the care and treatment?

We issued posters to the registered provider prior to the inspection inviting patients and members of the dental team to complete an electronic questionnaire.

No completed staff or patient questionnaires were received prior to the inspection.

5.0 The inspection

5.1 What action has been taken to meet any areas for improvement identified at or since last inspection?

The last inspection to Gumshields2Go Ltd was undertaken on 4 April 2024; no areas for improvement were identified.

5.2 Inspection findings

5.2.1 Do recruitment and selection procedures comply with all relevant legislation?

There were recruitment and selection policies and procedures in place that adhered to legislation and best practice guidance.

Dr Robinson confirmed that she had a clear understanding of the legislation and best practice guidance.

Dr Robinson confirmed that no new staff had been recruited since the previous inspection and should staff be recruited in the future all recruitment documentation as outlined in Schedule 2 of The Independent Health Care Regulations (Northern Ireland) 2005, as amended, would be sought and retained for inspection.

The arrangements in place regarding recruitment of the dental team complies with the legislation and best practice guidance to ensure suitably skilled and qualified staff work in the practice.

5.2.2 Is the dental team appropriately trained to fulfil the duties of their role?

Dr Robinson takes part in ongoing training to update her knowledge and skills, relevant to her role.

A record is kept of all training (including induction) and professional development activities undertaken by Dr Robinson.

The care and treatment of patients is being provided by a dental team that is appropriately trained to carry out their duties.

5.2.3 Is the practice fully equipped and is the dental team trained to manage medical emergencies?

The British National Formulary (BNF) and the Resuscitation Council (UK) specify the emergency medicines and medical emergency equipment that must be available to safely and effectively manage a medical emergency. Systems were in place to ensure that emergency medicines and equipment are immediately available as specified and do not exceed their expiry dates.

There was a medical emergency policy and procedure in place and a review of this evidenced that it reflected legislation and best practice guidance. Protocols were available to guide the dental team on how to manage recognised medical emergencies.

Managing medical emergencies refresher training is undertaken annually.

Dr Robinson was able to describe the actions she would take in the event of a medical emergency, and ensures that medical emergency medicines and equipment are readily available at each venue she attends.

Sufficient emergency medicines and equipment were in place and Dr Robinson is trained to manage a medical emergency as specified in the legislation, professional standards and guidelines.

5.2.4 Does the dental team provide dental care and treatment using conscious sedation in line with the legislation and guidance?

Conscious sedation helps reduce anxiety, discomfort, and pain during certain procedures. This is accomplished with medications or medical gases to relax the patient.

Dr Robinson confirmed that conscious sedation is not offered in Gumshields2Go Ltd.

5.2.5 Does the dental team adhere to infection prevention and control (IPC) best practice guidance?

The IPC arrangements were reviewed throughout the practice to evidence that the risk of infection transmission to patients, visitors and staff was minimised. Dr Robinson has overall responsibility for IPC.

The IPC measures in the practice were discussed with Dr Robinson. It was confirmed that IPC measures in place were in keeping with the Health and Social Care Public Health Agency guidance and Infection Prevention and Control Manual for Northern Ireland. Dr Robinson confirmed arrangements are in place to check the Department of Health (DoH) websites for further advisory information, guidance and alerts in this regard.

There was an overarching IPC policy and associated procedures in place. Gumshields2Go Ltd provides a mobile service that can travel to community venues such as sporting facilities and schools. Policies and procedures to minimise the risk of cross infection when taking dental impressions were in place. A review of these documents demonstrated that they were comprehensive and reflected legislative and best practice guidance in all areas.

The arrangements for personal protective equipment (PPE) were reviewed and it was noted that appropriate PPE was readily available in accordance with the treatments provided.

Using the Infection Prevention Society (IPS) audit tool, IPC audits are routinely undertaken to self-assess compliance with best practice guidance. The purpose of these audits is to assess compliance with key elements of IPC, relevant to dentistry, including the arrangements for environmental cleaning; the use of PPE; hand hygiene practice; and waste and sharps management. This audit also includes the decontamination of reusable dental instruments however. Dr Robinson confirmed that all dental instruments are single use and disposed of following use, therefore this section of the audit does not apply to Gumshields2Go Ltd.

A review of the most recent audit evidenced that the audit was completed on a six monthly basis.

Hepatitis B vaccination is recommended for clinical members of the dental team as it protects them if exposed to this virus. Dr Robinson confirmed that she is the only clinical member of staff working in Gumshields2Go Ltd and is aware that should she recruit any clinical members of the dental team, she will ensure that they have received this vaccination. It was confirmed that the vaccination history will be checked during the recruitment process and retained in the staff member's personnel file.

Discussion with Dr Robinson confirmed she had received IPC training relevant to her role and responsibilities and demonstrated good knowledge and understanding of IPC procedures.

Review of IPC arrangements evidenced that Dr Robinson adheres to best practice guidance to minimise the risk of infection transmission to patients, visitors and staff.

5.2.6 Does the dental team meet current best practice guidance for the decontamination of reusable dental instruments?

Robust procedures and a dedicated decontamination room must be in place to minimise the risk of infection transmission to patients, visitors and staff in line with Health Technical Memorandum 01-05: Decontamination in primary care dental practices, (HTM 01-05), published by the DoH.

Dr Robinson confirmed that all dental instruments are single use and disposed of in keeping with best practice; therefore, a decontamination room is not required in this practice.

5.2.7 How does the dental team ensure that appropriate radiographs (x-rays) are taken safely?

Dr Robinson confirmed that no radiology services are provided by Gumshields2Go Ltd.

5.2.8 Are complaints and incidents being effectively managed?

The arrangements for the management of complaints and incidents were reviewed to ensure that they were being managed in keeping with legislation and best practice guidance.

The complaints policy and procedure provided clear instructions for patients and staff to follow. Patients and/or their representatives were made aware of how to make a complaint by way of the patient's guide.

Dr Robinson confirmed that no complaints had been received since the previous inspection.

Arrangements were in place to record any complaint received in a complaints register and retain all relevant records including details of any investigation undertaken, all communication with complainants, the outcome of the complaint and the complainant's level of satisfaction.

Dr Robinson confirmed that an incident policy and procedure was in place which includes the reporting arrangements to RQIA. No incidents have been recorded since the previous inspection. Dr Robinson is aware that incidents should be effectively documented, investigated and reported to RQIA and other relevant organisations in accordance with legislation and RQIA Statutory Notification of Incidents and Deaths.

Arrangements were in place to audit complaints and adverse incidents to identify trends and improve service provided.

Dr Robinson was knowledgeable on how to deal with and respond to complaints and incidents in accordance with legislation, minimum standards and the DoH guidance.

Systems were in place to ensure that complaints and incidents were being managed effectively in accordance with legislation and best practice guidance.

5.2.9 How does a registered provider who is not in day to day management of the practice assure themselves of the quality of the services provided?

Where the business entity operating a dental practice is a corporate body or partnership or an individual owner who is not in day to day management of the practice, unannounced quality monitoring visits by the registered provider must be undertaken and documented every six months; as required by Regulation 26 of The Independent Health Care Regulations (Northern Ireland) 2005.

Dr Robinson was in day to day management of the practice, therefore the unannounced quality monitoring visits by the registered provider are not applicable.

5.3 Does the dental team have suitable arrangements in place to record equality data?

The arrangements in place in relation to the equality of opportunity for patients and the importance of staff being aware of equality legislation and recognising and responding to the diverse needs of patients was discussed with Dr Robinson.

6.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Dr Robinson, Registered Person as part of the inspection process and can be found in the main body of the report.



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