



Interface Update (8 December 2025, 10.45am)

In this edition of the [Interface](#) update, we dive into new patient pathways launched in the Flow Navigation Centre Plus (FNC+Plus), continue our recruitment drive, and welcome new members to the team.

New pathways enhancing care for patients at the FNC+Plus

It's been a busy time for the team at the FNC+Plus as we roll out new patient pathways at scale and pace.

These new pathways have been designed to turn unplanned care, such as presentations at emergency departments, into planned care, such as pre-booked appointments and scans. This means that we can give patients the option to continue their care at home, rather than lengthy waits in hospital.

In their first week, 20-27 November, **99 patients** used these alternative pathways reducing their length of stay in hospital by an average of **2-3 days**.

The team has handled **thousands of calls** so far through these new pathways, routing patients to the right care, at the right time, in the right place for their needs. The number of patients is set to increase rapidly as our FNC+Plus and Virtual Hospital services expand, and these pathways will continue to play an important role in 2026 and beyond.

Discharge to Scan

Thanks to the new Discharge to Scan pathway, wards can identify inpatients for a virtual pathway, refer them to the FNC+Plus, and let the team coordinate diagnostics and follow up. A clinician from the FNC+Plus then calls the patient

with their results, discharging them from the virtual ward and organising any next steps.

Associate Chief Nurse Ashleigh Irons speaks with Orthopaedic Lead Nurse Erin Lees and Senior Charge Nurse Marie Allan at the GRI about how they've embraced this new pathway as part of the System Reset.



Launched: 20 November 2025

Patients since launch: 116

OPAT Expansion

The OPAT service treats patients with infections who require IV antibiotics either on a short or long-term basis but who are otherwise suitable for outpatient treatment. This might include, for example, patients suffering cellulitis or a range of other difficult to treat infections, for example, complicating diabetes, chronic lung disease or surgery.

We already have a successful OPAT service at NHSGGC, with the QEUH and RAH continuing to care for numerous patients each week. The new GRI OPAT pathway is key to expanding this service to more patients, with 48 referrals since launch.

Launched: 10 November 2025

GRI OPAT patients since launch: 60

Urgent Headache and Hypertension

Thanks to the Urgent Headache pathway, patients can now have a pre-planned CT appointment booked in by the FNC+Plus and be admitted to a virtual ward to wait for their result, rather than stay in a physical bed at an NHSGGC site.

The Hypertension pathway deals with patients presenting with an office blood pressure of $\geq 180/120$ mmHg at their GP and that need urgent medical follow up. If these patients are stable, with no life-threatening or ocular symptoms, they can be referred to the FNC+Plus, be reviewed by a Hypertension Specialist at an arranged outpatient slot, and avoid long waits and admissions to hospital.

Launched: 17 November 2025

Patients since launch: 14

We will publish more information on our pathways as they go live on [Staffnet](#).

Our recruitment drive continues

Staff will be at the heart of our success as we expand the FNC+Plus and improve care for our patients. Be part of the team and bring real transformative change to NHSGGC.

Current opportunities to join the team

- [Advanced Nurse Practitioner](#) - Internal secondment opportunity

Opportunities to get involved with Interface

Interested in virtual pathways and the benefits that these can bring to patients and staff? We want to hear from you!

You can contact us to register your interest in virtual pathways here: ggc.interfacecare.admin@nhs.scot

New nursing additions to the Interface Division

We'd like to welcome Lead Nurse Fiona McCracken and Interim Lead Nurse Lynn Marotta to the Interface Division, playing an important role in how we transform care for our patients.

Fiona said: "As the lead nurse I am responsible for guiding the team, keeping communication clear and supporting patients through each step of their care journey."

I am excited to join this team because I love the idea of working together across different services to make care smoother for patients. I am looking forward to learning, growing and contributing to a supportive and collaborative environment."



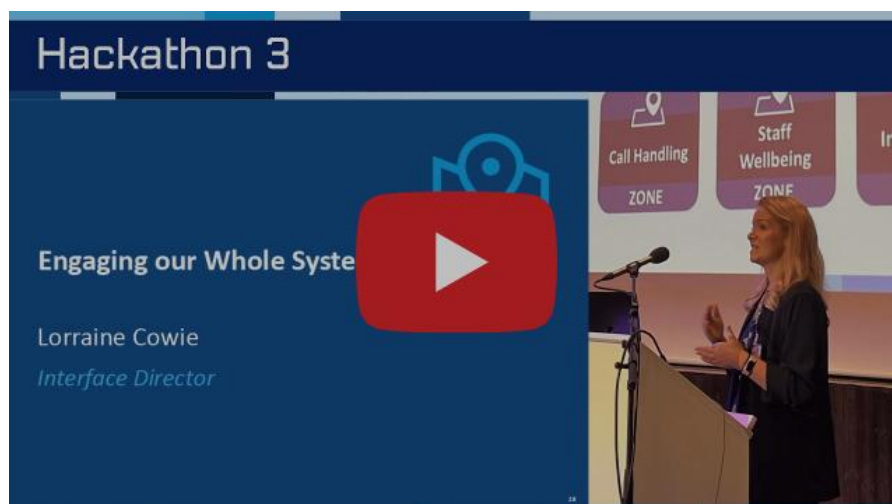
Lynn said: "I'm delighted to take on the interim Lead Nurse role. The Interface Division plays a vital role in connecting services and ensuring patients experience seamless transitions across care settings. Strong governance underpins this work, and I'm committed to clear accountability, robust decision-making, and empowering our teams within that framework. Together, we can deliver safe, consistent, and high-quality care while strengthening collaboration across the Interface."



In Case You Missed It: Director of Interface presents at Hackathon 3

Director of Interface Lorraine Cowie spoke about how new digital pathways will be transformative for NHSGGC and our HSCPs at our recent Hackathon.

Hear the team's update in Lorraine's presentation from the day below.



Next steps

You'll be hearing more about Interface Care, the Virtual Hospital and FNC+Plus through Team Talk, local updates and intranet features. In the meantime, if you're curious or think your team could link in, speak with your local lead, visit the Interface [intranet page](#) or head to the [NHSGGC website](#).

Got a question?

We welcome any questions you might have in relation to Interface Care. Please submit your questions via [this form](#).



It is important to share Core Brief with colleagues who do not have access to a computer.

A full archive of printable PDFs are available on the [website](#)