NHSGGC System Support / Reset – Staff FAQs

1. What is the System Reset?

System Reset is a focused initiative to help stabilise patient flow, reduce hospital occupancy, and improve the experience for patients and staff.

It brings together teams from across our Whole System to unblock discharge delays, maximise virtual pathways, and ensure patients receive the right care, in the right place, at the right time.

Equally important, the System Reset aims to support staff wellbeing by reducing sustained over-capacity pressures, simplifying escalation, and creating space for teams to focus on safe, high-quality care.

Our first System Resets were carried out across November/December 2025 and January 2026. We now plan to run this again from **30 November till 13 December 2026**.

This time, System Reset is being taken forward as a coordinated Scotland West approach, bringing Health Boards, HSCPs and partners together around a shared focus on patient flow. By working collectively across organisational boundaries, we aim to reduce avoidable admissions and unnecessary delays, support timely discharge, and make the best possible use of capacity across the whole health and care system.

2. Why is the System Reset important?

Our hospitals are operating at consistently high occupancy, which impacts Emergency Department performance, delivery of planned care capacity, staff and patient safety and wellbeing.

The System Reset provides a short, concentrated period to test and accelerate actions that improve safety, patient flow, and discharge planning ahead of winter.

3. What are the main objectives of the System Reset?

- Reduce occupancy across acute sites to create safer, more effective care environments
- Improve 4-hour Emergency Department performance
- Balance daily admissions and discharges to support flow
- Support timely, safe discharge

- Maximise FNC+ and Virtual Hospital pathways that prevent avoidable admissions and enable early step-down

4. How long will the Reset last?

The System Reset programme will take place from Monday 30 November to Sunday 13 December 2026, with progress reviewed and reported daily. Successful measures will be retained and incorporated into the organisation's longer-term system improvement plans.

5. What will happen during the Reset?

The Reset will focus on coordinated actions across Acute, Interface, and HSCP teams to improve patient flow and safety:

- Additional senior clinical input and enhanced ward rounds
- Targeted weekend planning and earlier identification of patients who can safely be discharged
- Visible leadership and live feedback loops through QUEST Escalation & Decompression meetings and site huddles to resolve issues in real time
- AHP resources will be aligned to local demand to support patient care and flow
- MDT participation in huddles to facilitate senior reviews, decompress activity and promote discharges
- Interface will maximise utilisation of virtual pathways
- HSCPs will maximise the use of established admission avoidance and discharge pathways, alongside community services, to support care closer to home and reduce unnecessary hospital admissions

6. How will the System Reset aim to benefit patients?

Our System Reset will aim to reduce occupancy levels and improve patient experience across NHSGGC – continuing our unwavering commitment to ensuring that all patients get the right care in the right place at the right time. This will:

- Reduce waits for admission or discharge and delays in care
- Minimise patients cared for in non-standard areas, wards or sites
- Earlier access to diagnostics, therapy, and community support
- Improved continuity and safety of care by allowing for a more organised and efficient system
- Reduce time spent in ED

7. How will this affect me and my team?

- More predictable bed flow and reduced over-capacity pressures
- Simpler escalation and communication processes
- Stronger multi-disciplinary collaboration
- More visible senior leadership support throughout the period

Every role remains vital – all contributions with every patient, to care, discharge planning, documentation, or communication helps create capacity for patients who most need it.

8. How can staff contribute to the success of the System Reset?

- Engage actively in processes and pathways.
- Escalate challenges and offer feedback and ideas on what is working well
- Continue to do what is best for our patients on a daily basis delivering the best care possible
- Proactively engage with and discuss the System Reset across your staff teams

9. What support will be available for staff?

- Senior leadership teams will be available to support ward teams and assist with problem-solving and escalation
- FAQs, Core Briefs, and updates will be shared through StaffNet and HSCP communication channels
- Information will be readily available from site teams to support delivery of actions and enable escalation as required

10. Approach to escalation

There will be additional daily oversight, supported by clear site escalation routes and escalation cards, so that where issues are identified, teams quickly receive the support they need.

We have stepped up an escalated response to support this with a multi-layered, multidisciplinary command approach with bronze, silver and gold command structures in place at Queen Elizabeth University Hospital, Glasgow Royal Infirmary and Royal Alexandra Hospital. The prime focus of our escalated response is to reduce the bed occupancy and support improved flow in our sites. Each clinical area and team have clear responsibilities so that actions are coordinated across specialties and barriers to patient flow are escalated promptly.

11.Did we learn anything from System Reset 2025?

Despite high attendances and early flu pressures – System Reset helped keep a stable position across NHSGGC. Occupancy was consistently lower than the Scottish average, admissions and discharges were broadly balanced, and focused discharge action led to a significant increase in discharges at key sites in a challenging period.

System Reset significantly strengthened whole-system coordination, with daily safety (QUEST) huddles and multi-agency discharge forums improving shared situational awareness, faster decision-making and clearer joint ownership across Acute, HSCP, SAS and Interface teams.

12. What happens after the Reset?

A summary of learning, key metrics, and sustained actions will be collated after the two weeks of System Reset to guide and inform ongoing improvement, sustained action and future potential resets.