

Reducing Waiting List Times Through the Introduction of an Online and Blended Cognitive Behavioural Therapy Pathway

Amy Goddard, Clinical Associate in Applied Psychology, PTHB | Contact: amy.goddard@wales.nhs.uk

Context and Approach:

Waiting times in Wales for mental health services have been a significant concern with many service users waiting above the recommended 28 days to assessment (StatsWales, 2025) and waiting over 6 months for specialist psychological therapy (Mind, 2024). NICE guidelines recommend guided self-help as the first tier of support for less severe mental health difficulties. By creating a new pathway to online and blended CBT therapy, we hope to provide the appropriate level of care whilst reducing waiting lists and reducing demands on services.

We will aim to complete this by working with Local Primary Mental Health Support Services (LPMHSS), Single Point of Access service (SPOA), Silvercloud Online CBT service, and third sector to create a streamlined pathway for service users that is effective, and evidence based.

Planned Activity:

Research: A new pathway will be developed and psychometrics and service delivery metrics will be utilised to answer the following research questions: <ul style="list-style-type: none">Does the new pathway for Online and blended CBT reduce the waiting list times for service users in Local Primary Care Support Services?What are the challenges and benefits of implementing the new online and blended CBT pathway?How satisfied are service users and therapists with the implementation of the new pathway?How will the new pathway impact service efficiency and service user outcomes?	Leadership: The multiservice involvement is a key factor in the development and demonstration of leadership skills, engaging with stakeholders, service users and therapists. To create an effective pathway, the expectations and differing interests of multiple stakeholders must be managed. I will be leading a support team to complete the project.	Education/teaching : Throughout the process, I will be providing teaching and education around the new approach to therapists and wider service teams. This will include the role of the online and blended CBT pathway, the benefits and barriers, and practical support with implementation. Other staff members within the service with an interest in service development will be invited to be part of the process. I will provide mentoring and education for these staff members and encourage other to engage in service development.
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Progress to date:

- Following the initial development of the proposal and meetings regarding its implementation, a differing pathway was proposed with the inclusion of the SPOA service to streamline the process and further reduce clinicians workload.
- Initial conversations have taken place to create the pathway, and a prospective pathway has been developed.
- A joint presentation has taken place with Silvercloud for the Local Primary Mental Health Support Service.
- Clinicians' views of barriers and their questions have been collated and information developed to inform training.
- Due to the addition of SPOA, a meeting is being arranged to ascertain their barriers and training needs.
- Training materials have been developed and will be edited to also encompass what is needed by the SPOA team.

Reflections:

As a result of working with the differing needs of organisations, the pathway has changed over time. This has meant that the plan for the project has had to change. This has resulted in the project developing more slowly than previously anticipated. However, this could have positive implications for the effectiveness of the new pathway.