

Meeting: Cabinet

Date: 16th September 2025

Wards affected: All

Report Title: Re-procurement of Mental Health Helpline

When does the decision need to be implemented?

Procurement to start in September 2025 for new contract to be let from 01 April 2026.

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1. Purpose of Report

- 1.1. The Mental Health Helpline has been running on short term contracts since its inception by the Voluntary, Community and Social Enterprise (VCSE) sector in 2021 as a response to the COVID pandemic and the increasing needs for low level mental health and emotional wellbeing support.
- 1.2. This proposal is to procure the services so that a new contract can commence from April 2026 with a longer-term, more stable financial basis.
- 1.3. The outcomes are to maintain access to signposting, advice and low-level interventions for those people who present with emotional or mental wellbeing needs who do not meet thresholds for statutory mental health services.
- 1.4. The Council's Officer Scheme of Delegation sets out that contracts with a total value above £500,000 are to be submitted to Cabinet or Council (where budget is not already approved) for approval to go out to tender. Where approval in consultation with the relevant member, or by Cabinet or Council is given to undertake the tendering, the Chief Executive, Director, Divisional Director or budget holder has the authority to award the resultant contract.

2. Reason for Proposal and its benefits

- 2.1. The proposals in this report help us to deliver our vision of a healthy, happy, and prosperous Torbay by maintaining access to advice, information, signposting and interventions for those with low level mental health and emotional wellbeing issues.

- 2.2. These issues have exacerbated and remain prevalent since the COVID-19 pandemic and the resultant financial shockwaves in terms of wage stagnation and cost of living pressures.
- 2.3. This service fills a space between routine advice and guidance for low mood etc and statutory mental health services.
- 2.4. The reasons for the proposal, and need for the decision are;
 - 2.4.1. There is ongoing and increasing demand for this service since it grew organically from the VCSE sector in 2021.
 - 2.4.2. The sustainability of this service has always been precarious; the service has been financially maintained through the use of grants, one off adult social care funding and public health grant funding.
 - 2.4.3. This proposal aims to shore up this provision to give it longer-term viability and stability.

3. Recommendation(s) / Proposed Decision

- 3.1 That a procurement exercise for the provision of a mental health helpline be approved and any subsequent contract to be awarded in line with the officer scheme of delegation (Paragraph 1.3).

Appendices

- 3.1. None

4. Background Documents

- 4.1. None

Supporting Information

5. Introduction

- 5.1. The Mental Health Helpline emerged from the COVID pandemic where the need for AGE UK to provide mental health and emotional wellbeing support (including support for long-covid) through periods of lockdown and isolation was essential. As the service developed in response to need, no sustainable funding existed to continue its provision as well as ensure its quality and safety. As such the local authority was approached to support this provision over the longer term.
- 5.2. Since 2021 the Council has supported this function through a series of short-term contracts funded through a range of sources including COMF, public health, adult social care and Council core revenue funding. The current contract expires in March 2026, and a procurement exercise is required to sustain the service on a more stable footing.
- 5.3. The proposal is to undertake a procurement for a two-year contract (plus an extension of up to two further years). This arrangement would have an annual cost of £165,000 (£115,000 of public health funding and it is expected that there will be £50,000 core Council funding also committed to the contract), meaning each two-year period would cost £330,000.
- 5.4. The Commercial Services department are currently (at the time of writing) assessing whether this contract falls under standard procurement regulations or the new Provider Selection Regime for Health (PSR).
- 5.5. Should this fall under standard procurement regulations the plan is to test the market using an expression of interest process to determine market capacity and capability. If this does not demonstrate there is more than a single capable provider, a direct award process will be undertaken; otherwise, an open market procurement will be completed.
- 5.6. Should this fall under PSR for Health, the regulated process will be followed to determine if a direct award should be offered, whether a most suitable provider process should be undertaken or whether a full competitive process should be followed.
- 5.7. To note, the Mental Health Helpline is an adjunct to the Torbay Community Helpline, which has recently been recommissioned via Adults Social Care as part of the Community Wellbeing Contract.
- 5.8. The reasons for wishing to continue this provision is that it is to meet the demonstratable year on year increases in both need and demand for the service. Approximately 50 callers are supported per month.
- 5.9. The service supports almost as many men (47%) as women (53%). This is atypical to mental health services which are usually overrepresented by female service users; indicating the service is accessible and acceptable to men and, therefore, addressing an unmet need. Particularly relevant in an area with a significantly higher suicide rate compared to nationally, where three in every four suicides occur in males.

- 5.10. This is one of the few services that holistically supports a range of (as well as multiple) physical, social and mental health needs through its partnership with the Torbay Community Helpline (via the Community Wellbeing Contract) and additional relationships it has generated.
- 5.11. This Service has minimal entry criteria, no waiting lists and flexes with a person's changing needs over time. Most interventions are either telephone or face-to-face support by the service (34%) or signposting to more appropriate services for their needs (e.g. domestic abuse support, 33%) and has the primary intention to reduce the escalation of need thereby diverting people from a more costly referral to a specialist service later on.
- 5.12. The service is also accessed by people who do not have support elsewhere or who are unable to access NHS mental health support due to long waiting lists, high diagnostic thresholds, treatment modalities that cannot support additional environmental stressors or where specific support is incredibly limited (e.g., for self-harm).
- 5.13. The service undertakes evidence-based evaluations, and these demonstrate meaningful improvements in the mental wellbeing of the client group.
- 5.14. An application for formalised research into the programme's effectiveness has been submitted to the School for Public Health Environments Research at Exeter (SPHERE) which would bring £35,000 of capacity to robustly evaluate and deliver recommendations for future iterations of the programme.

6. Options under consideration

- 6.1. *Option 1: Do not procure any service.* This option will provide cost savings to both public health and the Authority General Fund. It will however erode any good work brought about by this contract to date, eradicating low level support for residents of Torbay which is likely, in turn, to increase demand for and pressure on already stretched mental health (and potentially social care) services. The likelihood is that this will decrease productivity in the communities affected due to time off or inability to work due to unsupported mental health issues. This proposal is not supported.
- 6.2. *Option 2: Procure a service with a reduced cost basis.* This option will also provide cost savings to either or both public health and the Authority General Fund. It will however reduce the impact and effectiveness of the service. Cost saving is not the desired outcome in this process and funding provided has been secured and baselined in both the general fund and public health budgets. Depending on the value of the reduction in funding the impact on both reach, effectiveness and outcomes will be proportionate to the reduction. This proposal is not supported.
- 6.3. *Option 3: Procure the service on a like for like basis:* This option will not cost more money than is already agreed in the baseline spend for both the General Fund and the Public health Grant. The gains made through supporting the service to date can be maintained, whilst also it is most likely to allow the voluntary sector capacity to obtain sustained, longer term secure funding.

7. Financial Opportunities and Implications

- 7.1. The financial proposals are set out in 6.3 above.
- 7.2. Both the core Council Funding and the Public Health RFG funding outlined has been built into the revenue budget.
- 7.3. There are no additional further funding implications anticipated.

8. Legal Implications

- 8.1. There are no anticipated legal implications other than those routinely present when undertaking a procurement process.

9. Engagement and Consultation

- 9.1. In 2023, the Adult Social Care and Public Health portfolio lead, Cllr Hayley Tranter, actively participated in an engagement event which developed the latest Torbay Multi-agency Suicide Prevention Plan. The three key priority areas outlined in this plan (accessible mental health support, working with risk factors and collaborative use of resources) are met, in part, by the Torbay Community Helpline and the mental health helpline which sits underneath this.
- 9.2. Partner and community needs are continuously reviewed and responded to via the VCSE Health and Wellbeing Network. This is made up of Torbay Communities (who provide the triage function for the Torbay Community Helpline) as well as all the VCSE organisations which the triage functions links to. Age UK Torbay (the current provider of the mental health helpline) are an integral member of the steering group for this network. The steering group meets quarterly with additional meetings as required.
- 9.3. Torbay Age UK continuously review and adapt service provision in response to caller's needs, staff feedback and VCSE Health and Wellbeing Network feedback. For example, bereavement support was identified as a particular need by service users as it is not readily available from public or charity provision. The service then built relationships with local counselling colleges so that trainee counsellors could provide more timely counselling support to people who have been bereaved whilst helping a trainee counsellor to become qualified.
- 9.4. A report (2023) commissioned by adult social care from people with lived experience of poor mental health exemplified the mental health helpline as a service that is 'working well' and its service delivery counters many of the challenges expressed by residents in the report. For example, people found closed and disjointed access routes and the inability to access another service if already receiving mental health support as real barriers to their wellbeing. The mental health helpline has one access route for a range of needs and a range of services can be offered simultaneously if required and appropriate.
- 9.5. Market testing will evidence if there are other providers able to provide a replicable service since it was last tested in 2023. Market engagement will be considered if multiple providers are identified through market testing.

10. Procurement Implications

- 10.1. Currently this service is managed and delivered via a VCSE sector provider. The previous procurement process in 2023 demonstrated that there was one capable provider able to deliver this provision. This lack of market capability and capacity alongside the fact that the service is delivered by the VCSE sector will be factored into the procurement decision.
- 10.2. As stated in 6.4 - 6.6 above, the Commercial Services department are currently (at the time of writing) assessing whether this contract falls under standard procurement regulations (PCR) or the new Provider Selection Regime for Health (PSR).
- 10.3. Should this fall standard procurement regulations the plan is to test the market using an expression of interest process to determine market capacity and capability. If this does not demonstrate there is more than a single capable provider, a direct award process will be undertaken; otherwise, an open market procurement will be completed.
- 10.4. Should this fall under PSR for Health, the regulated process will be followed to determine if a direct award should be offered, whether a most suitable provider process should be undertaken or whether a full competitive process should be followed.

11. Protecting our naturally inspiring Bay and tackling Climate Change

- 11.1. By continuing to enable services to support digital access, it is anticipated that this will have a positive impact in terms of reducing the need to travel to services or to clients themselves, where this is in the best interests of the service users.
- 11.2. Social Value (including Climate change) will be assessed as part of any procurement activity that takes place.

12. Associated Risks

- 12.1. Failure to make a decision could result in an inability to conclude the procurement process in time, thus posing a legal risk that we have to offer contracts which does not comply with procurement law or the Council's Standing Orders.
- 12.2. Alternatively, the contract is ceased and there is no provision in the interim, losing all staff, systems and processes during that time. This is expected to create additional work and anxiety both for the Authority and the new Provider whilst eroding market confidence in the Authority in the interim which is not in the perceived best interests of the Local Authority or our residents.
- 12.3. Failure to consider the incumbent provider and their VCSE status may undermine the Authority's commitment to make procurements and access to services easier for SMEs and VCSE providers to successfully secure services in the Bay.

13. Equality Impact Assessment

Protected characteristics under the Equality Act and groups with increased vulnerability	Data and insight	Equality considerations (including any adverse impacts)	Mitigation activities	Responsible department and timeframe for implementing mitigation activities
Age	<p>18 per cent of Torbay residents are under 18 years old.</p> <p>55 per cent of Torbay residents are aged between 18 to 64 years old.</p> <p>27 per cent of Torbay residents are aged 65 and older. 42% of the users of this service are aged over 65.</p> <p>1 in 4 adults experience mental problem annually.</p> <p>1 in 5 children and young people have a probable mental health disorder.</p>	<p>The Helpline is for adults only (18+). There is no upper age limit.</p> <p>Because of the significantly different skill set required to provide mental health services for Children and Young People (CYP) it would not be appropriate to provide an all-age provision. CYP services are provided through School based mental health support teams, Young Devon and KOOTH (online support) and for more complex young people, CAMHS. The service will signpost CYP to the aforementioned alternative provision.</p> <p>The helpline is accessible via the phone and face-to-face appointment and therefore enables those who are not digitally enabled, usually those in the older demographic (but not all).</p>		

Carers	<p>At the time of the 2021 census there were 14,900 unpaid carers in Torbay. 5,185 of these provided 50 hours or more of care.</p> <p>84% of carers feel more stressed, 78% feel more anxious and 55% report feeling depressed as a result of their caring role.</p> <p>38% of young carers report having a mental health problem</p>	<p>The service makes no distinguishing access criteria or provision on the basis of a service users caring responsibilities. The service is dynamic and can offer appointments that will mean that those with caring responsibilities should be able to access the service as conveniently as any other member of the public (either on the phone or in person, at mutually convenient locations).</p> <p>The service is person-centred and trauma informed.</p>		
Disability	<p>In the 2021 Census, 23.8% of Torbay residents answered that their day-to-day activities were limited a little or a lot by a physical or mental health condition or illness.</p> <p>Adults with disabilities report experiencing frequent mental distress almost 5 times more often as adults without disabilities.</p> <p>Approximately 15-20% of the population are neurodivergent. Being</p>	<p>The service provides sessions both on the phone and in mutually convenient locations and therefore those unable to access sessions in person can be accommodated.</p> <p>The service is specifically designed to support those with low level mental health concerns, and support those with more significant issues, into more suitable specialist support.</p> <p>The service is person-centred and trauma informed.</p>	<p>The Torbay Community Helpline (the front door of the mental health helpline – this service) and this service will make reasonable adjustments for people with a disability or neurodivergence where possible, this includes the use IT and text to communicate. Access to British Sign Language will be accommodated wherever possible. Face-to-face is offered,</p>	<p>The Community Helpline is commissioned via Adult Social Care.</p> <p>The public health team will ensure the Mental Health Helpline will</p>

	<p>neurodivergent in a neurotypical world increases the risk of stress, anxiety and depression.</p>		<p>and this has been utilised at Paignton Library for people who lip read.</p> <p>Access to easy read information is made available as required by the individual.</p> <p>MH Helpline staff will be required to undertake Oliver McGowan (LD and Autism) training as a minimum. This is a mandatory requirement for all CQC registered providers.</p> <p>The service accommodates the needs of neurodivergent individuals – ensuring they receive what they require to make them comfortable. This includes face-to-face, both at home and in the community.</p>	<p>receive this training within the first 3 months of contract start.</p>
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Gender reassignment	<p>In the 2021 Census, 0.4% of Torbay's community answered that their gender identity was not the same as their sex registered at birth. This proportion is similar to the Southwest and is lower than England.</p>	<p>The service makes no distinguishing access criteria or provision on the basis of a referred person's gender assignment.</p> <p>The service is person-centred and trauma informed.</p>		
Marriage and civil partnership	<p>Of those Torbay residents aged 16 and over at the time of 2021 Census, 44.2% of people were married or in a registered civil partnership.</p> <p>Marriage/civil partnership tend to be associated with more positive mental health.</p>	<p>The service makes no distinguishing access criteria or provision on the basis of a referred person's marital status.</p> <p>The service is person-centred and trauma informed.</p>		
Pregnancy and maternity	<p>Over the period 2010 to 2021, the rate of live births (as a proportion of females aged 15 to 44) has been slightly but significantly higher in Torbay (average of 63.7 per 1,000) than England (60.2) and the South West (58.4). There has been a notable fall in the numbers of live births since the middle of the last decade across all geographical areas.</p>	<p>The service makes no distinguishing access criteria or provision on the basis of a referred person's pregnancy status.</p> <p>The service is person-centred and trauma informed.</p>		

	<p>Women can develop mental health problems for the first time during pregnancy, and pre-existing mental health conditions can get worse during the perinatal period. Perinatal mental health problems affect up to 20% of women.</p>			
Race	<p>In the 2021 Census, 96.1% of Torbay residents described their ethnicity as white. This is a higher proportion than the South West and England. Black, Asian and minority ethnic individuals are more likely to live in areas of Torbay classified as being amongst the 20% most deprived areas in England.</p> <p>People from ethnically minoritised communities are at higher risk of developing mental health problems in adulthood and more likely than average to experience common mental health problems in any given week. They're also less likely to receive mental health support.</p>	<p>The service makes no distinguishing access criteria or provision on the basis of a referred person's racial status.</p> <p>The service is person-centred and trauma informed and will remain culturally sensitive to the needs of the people it serves.</p>	<p>The Torbay Community Helpline (the front door of the mental health helpline – this service) and this service will make reasonable adjustments for people where their race may preclude them from traditional service provision or where discrimination has been a previous barrier, wherever possible e.g., access to a translator, choice of male or female, older or younger practitioner.</p>	<p>Resource implications of this will be considered by commissioners on a case by case basis (either Adult Social Care or Public Health respectively).</p>

Religion and belief	<p>64.8% of Torbay residents who stated that they have a religion in the 2021 census.</p> <p>Generally religious involvement is linked to better mental health outcomes, including lower rates of depression and anxiety, higher life satisfaction and reduced substance abuse.</p>	<p>The service makes no distinguishing access criteria or provision on the basis of a referred person's religion or belief.</p> <p>The service is person-centred and trauma informed.</p>		
Sex	<p>51.3% of Torbay's population are female and 48.7% are male</p> <p>Females tend to have higher rates of depression, anxiety, eating disorders and self-harming behaviour.</p> <p>Men tend to have higher rates of ADHD, autism, PTSD, antisocial behaviour and substance use disorders as well as completed suicides.</p>	<p>Whilst not a criterion that is specifically targeted, the service is accessed by more men than other mental health services. This indicates that the model and delivery is equally attractive to both sexes and is positively supporting a minority population in regards to traditional mental health service accessibility.</p> <p>The service is person-centred and trauma informed.</p>		
Sexual orientation	<p>In the 2021 Census, 3.4% of those in Torbay aged over 16 identified their sexuality as either Lesbian, Gay, Bisexual or, used another term to</p>	<p>The service makes no distinguishing access criteria or provision on the basis of a referred person's sexual orientation.</p>		

	<p>describe their sexual orientation.</p> <p>LGBT+ individuals are more likely to have poorer mental health outcomes compared to their heterosexual counterparts.</p>	<p>The service is person-centred and trauma informed will remain cognisant of the needs of those who have experienced forms of discrimination in relation to their gender or Sexual orientation.</p>		
Armed Forces Community	<p>In 2021, 3.8% of residents in England reported that they had previously served in the UK armed forces. In Torbay, 5.9 per cent of the population have previously served in the UK armed forces.</p> <p>Veterans are more likely to have depression, anxiety, alcohol problems and PTSD compared to the general population.</p>	<p>The service makes no distinguishing access criteria or provision on the basis of a referred person's history with being employed via the armed forces. However we do know this group is disproportionately affected by poor mental health and that the majority of this community are males. This service's offer has good level of representation from males compared to other MH services, and therefore demonstrates good engagement and accessibility in this population.</p> <p>The service is person-centred and trauma informed.</p>		
Additional considerations				Additional considerations
Socio-economic impacts (Including impacts on child	<p>Approximately 27% of the Torbay population are classified as living in areas</p>	<p>Since the pandemic and cost of living crisis, new mental health conditions have developed or previous conditions have been exacerbated. The helpline</p>		

poverty and deprivation)	<p>amongst the 20% most deprived in England.</p> <p>1 in 6 people in Torbay were classified as income deprived. 1 in 5 children and young people being affected by this income deprivation.</p> <p>Individuals living in more deprived areas and experiencing socio-economic disadvantage are at higher risk of developing/exacerbating mental health problems.</p>	<p>has continuously responded to this increasing hardship and mental health need through its holistic provision (supporting basic needs such as debt and housing as well as emotional needs).</p> <p>This service actively looks to support those where their mental health is poor and / or they have suffered traumatic events; the majority of these are likely to be from more deprived communities. All service provision is free and if it were to be charged at any point in the future, this would be means tested.</p> <p>Therefore whilst the service is not specifically commissioned to target more deprived communities, the effects of living in these communities and the impact of more common difficult life events means that these populations are more likely to access this service.</p>		
Public Health impacts (Including impacts on the general health of the population of Torbay)	People with severe mental illness experience significantly shorter lifespans, being 15-20 years lower than the general population. This disparity is largely attributed to preventable physical illnesses.	Since the pandemic and cost of living crisis, new mental health conditions have developed or previous conditions have been exacerbated. The helpline has continuously responded to this increasing hardship and mental health need through its holistic provision (supporting basic needs such as debt and housing as well as emotional needs).	Interpreter services are available for those who first language is not English.	

	<p>In England, around 1 in 3 children live with at least one parent experiencing emotional distress. This consequently has a negative impact on children such as poorer physical health and academic achievement and being at higher risk of developing a mental health problem themselves.</p>	<p>There is a proportionate universalism approach where those most at risk or in need are prioritised, but there are no thresholds to prevent access (other than clients being too complex to safely be supported and need onward referral for specialist services). Physical (e.g., signposting to programmes which increase physical activity) as well as mental health interventions are provided where required.</p> <p>The service tries to cover the broad range of presenting needs that come through from the helpline, so that no needs are not supported except where they are too complex and /or too specialist to safely be supported.</p>		
Human Rights impacts		<p>This service is not expected to materially impact on any referred persons human rights.</p>		
Child Friendly	<p>Torbay Council is a Child Friendly Council and all staff and Councillors are Corporate Parents and have a responsibility towards cared for and care experienced children and young people.</p>	<p>This service is not applicable to young people.</p> <p>Young adults who are care experienced may access this service.</p> <p>The service is person-centred and trauma informed.</p>		

14. Cumulative Council Impact

14.1. None.

15. Cumulative Community Impacts

- 15.1. This is likely to have positive impacts on our partner organisations in the VCSE who refer into this provision. This also provides continuity of a destination for referrals the Community Hub and Community Helpline that triages general callers from the Community looking for a wide range of support and advice.
- 15.2. This remains a valuable community provision for those not reaching statutory thresholds for mental health support.