

Report for: Cabinet meeting 18 March 2025

Item number: 11

Title: Extension and variation to the Housing Related Support Mental Health Pathway.

Report authorised by: Sara Sutton - Assistant Director Adults, Health and Communities

Lead Officer: Maddie Watkins - Head of Service Housing Related Support

Ward(s) affected: All

Report for Key/

Non Key Decision: Key decision

1. Describe the issue under consideration

- 1.1. On 12th October 2021, Cabinet granted approval to award contracts to the successful tenderers for the Provision of Housing Related Support (HRS) Mental Health Pathway Services. The service was tendered in seven lots, resulting in the awarding of six (6) contracts across five (5) of these lots. Details of the contracts are provided in Appendix 1.
- 1.2. The contracts were awarded for a period of three (3) years commencing from 1st April 2022 with an option to extend for a further period, or periods, of up to a total of two (2) years. These contracts are due to expire on 31st March 2025.
- 1.3. This report seeks approval to vary the extension period allowed within the terms of the contracts from two (2) years to three (3) years. Additionally, it proposes implementing this three (3) year extension, commencing on 1st April 2025, as permitted within the contracts and in accordance with Contract Standing Order (CSO) 10.02.1(b).
- 1.4. Due to the insufficient number of tenders received for certain accommodation-based Lots during the procurement process, a shortfall of units occurred within the flexible and intensive supported accommodation services.
- 1.5. To ensure minimum service level, the Council commissioned 22 additional units from Metropolitan Housing Trust Limited for Flexible and Intensive supported accommodation. Contracts were awarded for three years, with the Flexible Support Service starting on 1st April 2022 and the Intensive Support Service on 1st July 2022.
- 1.6. In addition to 1.3 above, this report seeks approval to vary the terms of the contracts, as permitted under CSO 10.02.1(b), and to extend the existing

contracts for Flexible Support Service and Intensive Support Service for up to three (3) years to align with other contracts for the HRS Mental Health Pathway Services awarded through the tender process

2. Cabinet Member Introduction

- 2.1. We have a duty to deliver high-quality mental health services for our borough to promote well-being, reduce crises and diminish health inequalities.
- 2.2. The number of people in Haringey experiencing serious mental illness is increasing - in 2023/24 it was 1.37% an increase from 1.28% in 2022/23 and significantly higher than the London average of 1.1%. 10.5% of our residents were suffering from depression in 2023/24, an increase from 7.7% in 2018/19.
- 2.3. We are seeking approval to extend our contracts for housing-related support to ensure the continuity of care of those that rely on these services. Under the Mental Health Act, we are obligated to provide aftercare services that will help address complex mental health needs, reduce deterioration risk and prevent costly readmissions. The extension will also provide the necessary time to evaluate and co-design improvements to the current services as well as harmonise with Adult Social Care pathways.

3. Recommendations

- 3.1. It is recommended that Cabinet approves, in accordance with Contract Standing Order 10.02.1(b),
 - 3.1.1. a variation to the extension period allowed within the terms of the six (6) contracts for Housing Related Support Mental Health Pathway Services, as listed in Table 1, Appendix 1 of this report, from two (2) years to three (3) years, with the implementation of the three (3) years extension commencing on 1st April 2025; and
 - 3.1.2. vary the contract term of the two additional contracts let to Metropolitan Housing Trust Limited (trading as Metropolitan Thames Valley Housing Association), to extend the Mental Health Flexible Support Service for a period of three (3) years commencing on 1st April 2025, and the Mental Health Intensive Support Service for a further period of nineteen (19) months commencing on 1st July 2025. Breakdown of cost for both contracts included in table 2, Appendix 1 of this report.
- 3.2. It is recommended that Cabinet delegates authority to the appropriate portfolio 2nd tier officer, to consider financial impact of changes to rates of employer's National Insurance contribution and approve any further contract variation(s) on case by case.

- 3.3. Cabinet to note that these contracts provide 100 units of supported accommodation and 88 units of community floating support for individuals with mental health needs. The estimated total cost of the proposed extension in paragraph 3.1.1 and 3.1.2 above will be £4,054,779, aligned with London Living Wage and Employee National Insurance contribution increases. Further financial information detail included in Appendix 2 - Part B (exempt information) of this report.
- 3.4. Cabinet to note that the aggregated cost of delivering these services until 31st March 2028 is £7,844,449, representing an investment in stability, recovery, and wellbeing for individuals with complex mental health and housing needs. After accounting for the Rough Sleeping Initiative (RSI) funding, the total cost to the General Fund is £7,485,068. Further financial information detail included in Appendix 2 - Part B (exempt information) of this report.

4. Reasons for decision

- 4.1. Mental ill health in Haringey is increasing, people with a serious mental illness in 2022/23 was 1.28% and has increased from the previous year. Also, those people suffering from depression in Haringey have increased to 10.5% in 2022/23 and has also risen from the previous year. However, suicide rates have decreased over the last 10 years within Haringey and the borough is in line with the London average. Therefore, with an increase with people overall experiencing mental ill health this is likely to lead to a continued demand for the pathway services.
- 4.2. Under Section 117 of the Mental Health Act 1983, health and local authorities must provide aftercare services for individuals discharged under specific provisions of the Act. These services address mental health needs, reduce deterioration risk, and prevent costly readmissions. Investing in supported housing fulfils statutory obligations, reduces long-term costs, and improves resident outcomes.
- 4.3. Supported housing and community intervention is also cost-effective, reducing reliance on high-cost social care services. In 2024, the cost of keeping a patient in a mental health hospital was an average £650 per night, compared to £25 per night for supported housing. The annual value of contracts supporting 100 residents is £902,707, making it a financially prudent alternative. It also ensures timely moves for individuals no longer needing hospital care to free up resources and reduce unnecessary expenditure.

The information provided in the table below is based on typical costs but is dependent on several factors, including location, service provider, level of support required, and individual circumstances. These figures are approximate and may not reflect the most current or specific rates.

| Type of Accommodation/Support | Cost (per day) per client | Notes |
|-------------------------------|---------------------------|-------|
|-------------------------------|---------------------------|-------|

| | | |
|--|-----------|--|
| HRS Supported Accommodation | £15–£33 | Cost depends on level of support provided (e.g., low vs. high needs) and staffing intensity. |
| HRS Mental Health Floating Support | £11 | Cost includes support provided in the client's own home or community |
| Temporary Accommodation | £14– £63 | Cost depends on property size (e.g., studio, 1-bed) and location |
| Temporary Accommodation: Commercial Hotels | £85 - £95 | Cost of commercial hotels per night, mostly out of borough |
| ASC Mental Health Accommodation | £70– £150 | Varies based on location, intensity of support, and property type. |
| Inpatient Mental Health Hospital Stay | £400–£650 | Includes 24-hour medical care, staff, and facilities. Location can vary |

- 4.4. All Housing-Related Support (HRS) commissioned services are located within Haringey, providing accessible support to residents within the borough. However, Temporary Accommodation, Adult Social Care placements, and hospital stays can occur outside the borough, which introduces several risks. These include reduced oversight and coordination of support, potential delays in accessing essential services, and challenges for service users in maintaining connections to local networks and resources. Out-of-borough placements may also result in higher costs and logistical complexities.
- 4.5. The current contracts provide long-term financial and social benefits of early intervention and support. By providing stable housing and tailored assistance, the service can significantly reduce costs associated with Adult Social Care, inpatient mental health care, and temporary accommodation. Effective prevention and support not only improve outcomes for individuals but also alleviate pressure on these high-cost services. This proactive model demonstrates that targeted investment in preventative measures leads to measurable savings and better resource allocation across the wider system.
- 4.6. Extending the contract for three years instead of two offers strategic benefits, including alignment with the commissioning timeline for the single homeless pathway. This alignment allows for a more cohesive approach to service delivery, reducing duplication and streamlining procurement processes. This approach supports long-term planning and ensures continuity of service for vulnerable individuals.
- 4.7. Additionally, extending the contracts also allows us to redesign the mental health pathway in collaboration with the Mental Health Trust and Adult Social Care (ASC) presenting an opportunity to create a more integrated and effective service model. This partnership would allow for a holistic approach

to addressing the complex needs of individuals, ensuring that mental health, social care, and housing support are aligned. Additionally, working together opens up potential joint funding opportunities, enabling the pooling of resources to enhance service delivery while reducing financial pressure on individual agencies. This collaborative approach supports sustainability, improves outcomes for service users, and strengthens the overall pathway.

- 4.8. A benchmarking exercise with another borough showed comparative costs.
- 4.9. Since the contracts began in 2022, the London Living Wage has risen significantly, from £11.05 in 2021/22 to £13.85 in 2024/25, representing a 25% increase overall. This sharp rise in wages has placed substantial financial pressure on providers, particularly charitable organisations, impacting their long-term sustainability. Additionally, inflationary rises have further driven up the cost of delivering services, including essential operational expenses such as utilities and supplies.
- 4.10. Projected increases in National Insurance contributions have compounded these challenges, further eroding the financial viability of providers as they work to meet rising costs while maintaining the quality and reach of their services. These combined financial pressures underscore the urgent need to ensure that contracts reflect these economic realities to safeguard the future of these vital services.

5. **Alternative options considered**

- 5.1. **Do Nothing-** The Council could choose not to extend the Mental Health Pathway contracts. However, this decision would leave Haringey without essential housing and support services for vulnerable households. The absence of these services would likely lead to a significant increase in the number of people placed into temporary accommodation and a rise in acute hospital admissions. This scenario would have severe detrimental impacts on the affected residents, exacerbating their instability and health issues.
- 5.2. Moreover, the Council and its partners would face substantial operational and financial burdens. Increased reliance on temporary accommodation and hospital services would strain already limited resources, leading to higher costs and inefficiencies. The social and economic repercussions would be far-reaching, affecting community wellbeing and cohesion.
- 5.3. The option to do nothing was considered and rejected due to these significant risks. Ensuring the continuation of the Mental Health Pathway contracts is crucial for maintaining stability, reducing health disparities, and providing cost-effective support for Haringey's most vulnerable residents.
- 5.4. **Deliver the services in house –** This was considered when the services originally went out for recommissioning. However, the investment required to develop and manage the properties, services and teams required, was found to be significantly greater than the resources currently available to the Council. Suitable accommodation for the delivery of key contracts within the

Pathway would have been a challenge to source and manage; some of the existing properties would not have been available to the Council and an exploration of the Council's own assets did not generate any suitable and available buildings. The successful tenderer's have an extensive track record in delivering these services and have committed the properties required to do so, which will ensure quality services for residents and best value for the Council.

- 5.5. **Undertake competitive procurement** - The Council had decided to extend the current contracts rather than go out to competitive tender. The process for retendering the pathway takes a significant amount of time and resources and was unlikely to achieve value for money. At the last retendering process there was a shortfall with tender bids leading to a reduction in service provision, which could possibly occur again. Also, properties are a valuable resource and the registered social landlord who owns most properties is not willing to enable other providers to use the properties. Therefore, obtaining alternative properties is likely to take a significant length of time.

6. **Background information**

- 6.1. Haringey urgently needs services to address the complex factors contributing to homelessness. Mental health supported housing is crucial, providing flexible, person-centred support that helps residents:

- Maintain and establish sustainable housing
- Tackle health inequalities
- Overcome systemic barriers and traumatic experiences

- 6.2. These services are essential for stability, recovery, and dignity. Continuation ensures support for current and future clients who rely on trauma-informed interventions. Investing in these services fosters resilience, reduces health disparities, and builds pathways to long-term housing stability for the borough's most vulnerable residents.

- 6.3. Housing Related Support commission a range of services as part of the mental health pathway to enable people to gain independence in supported accommodation and to live independently within the community. It also supports service users in the recovery with their mental health needs.

- 6.4. The Mental Health Pathway is a structured approach designed to ensure that individuals with mental health needs receive appropriate care and support throughout their journey, from acute crisis management to recovery and reintegration into the community. A key element of this pathway is enabling positive and timely discharge from hospital, which benefits both the patient and the healthcare system.

- 6.5. The contracts were commissioned for 3 years from 1st April 2022 ending 31st March 2025 and approved at Cabinet meeting on 12th October 2021. There was provision in these contracts to extend for a further 2 years.

- 6.6. Due to the lack of bidders, a further two contracts were commissioned subsequently and approved at Director level. One contract commenced on 1st April 2022 ending on 31st April 2025 and the other commenced on 1st July 2022 ending on 30th June 2025. Both had no provision for further extensions.
- 6.7. There is a continued high demand for all the services and in 2023-24 most service users for accommodation were referred from hospital, followed by those leaving the family home or rough sleeping. The service supports vulnerable clients, 43% of referrals were younger residents 25-34 years old, also 43% of residents were from the ethnic minorities community and 25% were from the LGBTQ+ community. During the first 2 years of the contract, 49 people are new admissions to the accommodation pathway and 702 people have been supported in the floating support service. Between April 2022 to September 2024, 26 people moved on from the service positively in a planned way. This has mostly been through social housing (10), private rented sector (5) and older persons housing (4). Also, some moves were into residential and nursing care (2) and lower and higher support services (5). Since the start of the contract between 16-20 service users have been involved in education, employment and volunteering, which is positively supporting with their mental health recovery and resilience for the future. Also, for the length of the contract between 60-84 people have been supported to engage with mental health services.
- 6.8. Some ethnic groups such as Black and Black British experience greater mental health inequalities. For example, Black men are more likely to be diagnosed with serious mental illness and are more likely to be sectioned under the Mental Health Act 1983. During 2023/24 Black service users within supported accommodation accounted for 37% of recipients and 35% of floating support services. Around 17.6% of residents in Haringey are from Black ethnic groups.
- 6.9. In 2021, 4% of Haringey residents were from LGBTQI+ community. 16% of these residents reported a mental, behavioural or neurodevelopmental disorder as a longstanding condition. In mental health supported accommodation services in 2023/24, 25% of new admissions were from LGBTQI+ community and 4% were using floating support services.
- 6.10. It's also recognised that there are risk factors leading to poor mental health including homelessness, deprivation, unemployment and many people have experienced trauma. Central and East Haringey are likely to have high levels of these risk factors.
- 6.11. The percentage of adults in receipt of secondary mental health services living in stable and appropriate accommodation has fallen over the last year with the male and female figures at 57% and 59% respectively. These are significantly below overall London's figures at 64% and 65%.
- 6.12. Recently, feedback was sought from service users regarding the benefits of the floating support service, most of the residents reported the service as 'great'. The feedback gathered highlighted the high impact of the support,

emphasising trauma-informed care, empathy, and practical assistance across various aspects of their lives.

6.13. The service providers contract performance has been good, with targets met throughout the contract period. Extending contracts for three years (until 31st March 2028) rather than two years ensures greater continuity and aligns with the single homeless pathway, allowing services to be tendered simultaneously.

6.14. While Employer National Insurance contributions (ENIC) and the London Living Wage (LLW) costs are currently manageable within the existing budget, potential increases in statutory obligations or annual LLW adjustments could create additional financial pressures. To mitigate this risk, it is recommended that the agreement to extend the contract includes allowing the Assistant Director to approve a variation in contract price at a later date, ensuring flexibility to reassess the financial impact and secure sufficient funding to cover any cost escalations.

7. Contribution to the Corporate Delivery Plan 2024-2026 High level Strategic outcomes

7.1. The provision of the Housing Related Support Mental Health Pathway contributes significantly to the Council's strategic outcomes under the Borough Plan 2024 – 2026:

- Vulnerable adults are supported and thriving. This means that every adult in our community gets the support they need to live a good life, no matter what challenges they may face. This includes staying healthy to getting the help residents need when times get tough, the services are here to support all. The goal is to create a community where every adult feels valued, supported, and empowered to reach their full potential. Critical to this is taking an equitable approach, working hard to understand barriers and striving to address inequalities of access, experience and outcome.
- Preventing and reducing homelessness and rough sleeping. The vision is that everyone has a safe, sustainable, stable and affordable home.
- Secure and supported communities. The vision is to have a borough safe for all its residents.

8. Carbon and Climate Change

8.1. Haringey Climate Change Action Plan March 2021 outlines the council's route for net zero carbon in Haringey. All Housing Related Support services and provision contribute to the Community Actions Objective:

- To increase education and awareness raising across the borough to residents and businesses.

- Raising awareness of the impacts of climate change, and steps to mitigate, can encourage residents and businesses to engage with the issue and to enable behavioural change.
- 8.2. Housing Related Support team commission a wide variety of services which support vulnerable Haringey residents who have experienced homelessness or are at risk of homelessness.
- 8.3. As a team we are committed to embedding educational awareness into the fabric of commissioning from the tender process to contract monitoring. We seek to deliver carbon literacy awareness training to our providers and stakeholder relating to carbon footprint within their own organisations i.e.:
- Ensuring providers have a carbon change policy
 - Including drafting a provider's self-assessment.
- 8.4. We also seek to consult with our stakeholders in relation to benchmarking best practice. This will in-turn be fed into our annual audit procedure where HRS Commissioning would be able to monitor and evaluate year on year whether organisations are reducing their carbon footprint.
- 8.5. Housing Related Support would also seek to co-produce our own carbon plan with service users by consulting with them on how climate change is affecting them i.e. Summer SWEP, Climate anxiety etc.
- 8.6. Finally, we seek to embed climate change into our service specification ensuring that providers we have, commit to addressing climate change on a wider strategic level with the Commissioning Team.

9. Statutory Officers comments (Director of Finance, procurement, Assistant Director of Legal and Governance, Equalities)

9.1. Finance

9.1.1. The extension of all contracts relating to the Housing Related Support (HRS) Mental Health pathway will cost an additional £4,054,779 between the periods April 2025 to March 2028.

9.1.2. There will a contribution from the Rough Sleepers Initiative (RSI) of £194,243 to support units of the Housing First accommodation. This means that the remainder of the contract extension value (£3,860,536) will be funded through the General Fund (GF) budgeted to HRS.

9.1.3. As the costs have been budgeted within the funding available, there is little financial implication to the service and council.

9.2. Strategic Procurement

9.2.1. Strategic Procurement notes the contents of this report and have been consulted in the preparation of this report.

- 9.2.2. The report relates to services which are subject to the Light Touch Regime under the Public Contract Regulations 2015 (PCR 2015), as such they are required to be advertised and comply with the procedures laid out in the PCR's. The contract opportunity for the provision of Housing Related Support (HRS) Mental Health Pathway Services was duly advertised and tendered as required under the PCR 2015. Also, the review clause permitting an extension for further period(s) of up to 2 years was included in the initial procurement process and contract award notice.
- 9.2.3. Considering the prevailing external economic factors (such as high interest rates, rising wages, housing prices, inflation, and anticipated increases in National Insurance contributions), have introduced complexity and uncertainty into the supplier market. As result it is expected that bids from new contractors will be likely be higher if service is tendered now. Therefore, it is in the Council's best interest to vary the contracts and extend it for an additional period of one year, as this will provide assurance of uninterrupted service provision and avoid the unnecessary expenditure of resources on tendering.
- 9.2.4. The recommendations outlined in paragraph 3.1.1 are consistent with Regulation 72.1 (a) and (b), as well as CSO 10.02.1 (b).
- 9.2.5. Subject to approval, the contract value for the Mental Health Flexible Support Service will be £433,382.70, inclusive of VAT, totalling £520,059.24. Similarly, the contract value for the Mental Health Intensive Support Service will be £548,624.90, inclusive of VAT, amounting to £658,349.88. Given that both contracts are below the specified threshold, there is no requirement to adhere to PCR 2015. Accordingly, Cabinet approval is requested in accordance with CSO 10.02.01 (b).
- 9.2.6. Commissioner has confirmed that the providers are delivering satisfactory services and have met contractual outcomes. The commissioning will continue to monitor the contract during the contract extension period to ensure that quality standards are met, the service delivers value for money and requisite outcomes are delivered for residents.
- 9.2.7. Strategic Procurement confirms there are no procurement related matters preventing Cabinet approving the recommendations stated in in paragraph 3 above.

9.3. **Legal**

- 9.3.1. The Assistant Director for Legal and Governance (Monitoring Officer) has been consulted in the preparation of this report.
- 9.3.2. Pursuant to the provisions of the Council's CSO 10.02.1(b), Cabinet may approve the variation of a contract where the value of the variation is £500,000 or more and the value of the variation sought in the report is more

than £500,000 and as such the recommendation in paragraph 3 of the report is in line with the Council's CSO.

- 9.3.3. The report intends to vary contracts that were procured and awarded under Lots 1,2,3, 6 and 7 (see Table 1, Appendix 1) in accordance with the Light Touch Regime of the Public Contracts Regulations 2015 (PCR2015) and the variation sought is in line with the Regulation 72(1)(a) and (b) of the PCR2015.
- 9.3.4. The report also sought approval to vary two additional contracts (see Table 2, Appendix 1). These two contracts are below the public procurement threshold for such contracts and as such the provisions of the Public Contracts Regulations 2015 is not applicable.
- 9.3.5. Further to paragraphs 9.3.2, 9.3.3 and 9.3.4 above, the recommendation in paragraph 3 of the report is line with both the Council's CSO and the Public Contracts Regulations 2015.
- 9.3.6. Cabinet has power under the Local Government Act 2000 to delegate the discharge of any of its functions to an officer (S.9E (Discharge of Functions)) and as such the recommendation in paragraph 3.4 of the report for the Assistant Director for Adults, Health and Communities, to consider financial impact of changes to rates of employer's National Insurance contribution and approve any further contract variation(s) on case by case is in line with law.
- 9.3.7. The Assistant Director for Legal and Governance (Monitoring Officer) sees no legal reasons preventing Cabinet from approving the recommendation in paragraph 3 of the report.

9.4. **Equality**

- 9.4.1. The Council has a public sector equality duty under the Equalities Act (2010) to have due regard to:
- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act;
 - Advance equality of opportunity between people who share those protected characteristics and people who do not;
 - Foster good relations between people who share those characteristics and people who do not.
- 9.4.2. The three parts of the duty apply to the following protected characteristics: age, disability, gender reassignment, pregnancy/maternity, race, religion/faith, sex and sexual orientation. Marriage and civil partnership status applies to the first part of the duty. Although it is not enforced in legislation as a protected characteristic, Haringey Council treats socioeconomic status as a local protected characteristic.

- 9.4.3. The proposed decision is to vary and extend the contracts for the provision of Housing Related Mental Health Pathway Support Services.
- 9.4.4. This decision will have a positive impact on service users because it will ensure they have continued access to mental health support until 2028. This support aims to address their mental health needs and in doing so help prevent homelessness. It is anticipated that this support will lead to better mental health recovery, tenancy sustainment and better outcomes for the future including job opportunities and education.
- This will have a positive impact on disabled people with mental health conditions, who are the primary user base for the service.
 - It will positively impact black and LGBTQI+ residents as these groups are disproportionately represented amongst service users. The decision will therefore help address health inequalities which are particularly stark in these communities.
 - There will be a positive impact for those from more socioeconomically deprived backgrounds because risk factors leading to mental health conditions include unemployment, homelessness and deprivation. It is anticipated that this benefit will apply the most in the east and centre of the borough because these areas have higher levels of these risk factors.
- 9.4.5. Appropriate contract management arrangements will be established to ensure that the delivery of the Mental Health Pathway services does not have disproportionately negative impacts on groups with protected characteristics. The Council will take steps to collect demographic data on service users to identify any inequalities in service provision that may arise and to inform future equalities analysis.
- 9.4.6. These positive impacts will advance equality of opportunity for service users (and the groups disproportionately represented within this user base) and help foster good relations between users and the wider community. It will prevent discrimination against residents with mental conditions by providing bespoke pathways for them to access support.
- 9.4.7. It is not anticipated that there will be any negative impacts as a result of this decision, so the impact on all other groups with protected characteristics is neutral.
- 9.4.8. An Equality Impact Assessment was completed for the original Award of contracts for the Provision of Housing Related Mental Health Pathway Support Services in 2021 and is included as Appendix 2 to this report.

10. Use of Appendices

- 10.1. Appendix 1 – List of contracts
- 10.2. Appendix 2 – Part B Exempt information

11. Background Papers

11.1. The Equalities Impact Assessment for the contract approved in October 2021 by Cabinet can be found [here](#).

11.2. Local Government (Access to Information) Act 1985

11.2.1. This report contains exempt and non-exempt information. Exempt information is contained in the exempt report (Appendix 2) and is not for publication. The exempt information is under the following category: (identified in the amended schedule 12 A of the Local Government Act 1972 (3)) information in relation to financial or the business affairs of any particular person (including the authority holding that information).

Appendix 1 – List of contracts

Table 1 – Six contracts awarded following competitive tender process

| Lot | Service Provider | Value of contract for initial period of 3 years | Estimated cost of the contract for duration of 3 years extension period | Aggregated contract value for 6 years |
|--|--|---|---|---------------------------------------|
| Lot 1 – Intensive Support Service | Metropolitan Housing Trust Ltd | £327,909.68 | £422,851.32 | £750,761.00 |
| Lot 2 – Flexible Support Service - Long Stay | Metropolitan Housing Trust Ltd | £295,023.19 | £343,110.81 | £638,134.00 |
| Lot 3 – Flexible Support Services - Generic | Causeway Irish Housing Association | £361,956.00 | £361,956.00 | £723,912.00 |
| | Metropolitan Housing Trust Ltd | £163,645.23 | £143,294.77 | £306,940.00 |
| Lot 6 – Housing First Support Services | St Mungo Community Housing Association | £990,828.35 | £1,165,456.00 | £2,156,284.35 |
| Lot 7 – Floating Support Services | Peabody Trust | £1,086,447.40 | £1,199,964.00 | £2,286,411.40 |
| Total | | £3,225,809.85 | £3,636,631.87 | £6,862,441.72 |

Table 2: Breakdown of costs for 2 contracts subsequently awarded to Metropolitan Housing Trust Limited

| Contract Title | Value of contract for initial period of 3 years | Estimated cost of the contract for proposed extension period | Aggregated contract value |
|---|---|--|---------------------------|
| Mental Health Flexible Support Service | £214,230.00 | £219,152.70 | £433,382.70 |
| Mental Health Intensive Support Service | £349,630.23 | £198,994.67 | £548,624.90 |
| Total | £563,860.23 | £418,147.37 | £982,007.60 |

Further detailed breakdown of cost is set out in Appendix 2 - Part B (exempt information) of this report.

The current range of services provide good quality support and/or accommodation; these are as follows:

- Intensive support – providing 24-hour support for 20 service users, with 8 hours support per week in an accommodation service.
- Flexible support long stay – providing 24-hour support for 12 service users with 5 hours support per week. Normally for those service users who are likely to be in supported accommodation more long term.
- Flexible support – Providing support for 38 service users with 5 hours of support per week in an accommodation service.
- Housing First- providing an intensive floating support service in residents homes for an average 9-hours support per week.
- Floating support- Providing support for 88 residents in the community with mental health needs. Providing 3 hours support per week.