

**Subject: Deputations from members of the public.**

**Date of meeting: 26 March 2026**

A period of not more than fifteen minutes shall be allowed at each ordinary meeting of the Council for the hearing of deputations from members of the public. Each deputation may be heard for a maximum of five minutes following which one Member of the council, nominated by the mayor, may speak in response. It shall then be moved by the mayor and voted on without discussion that the spokesperson for the deputation be thanked for attending and its subject matter noted.

Notification that three deputations have been received. The spokesperson is entitled to speak for 5 minutes.

**1. Community Campaign for the Brighton General Hospital Site**

Supported by:

Clare Jones (Sussex Defend the NHS)  
Charles Harrison (Brighton & Hove Housing Coalition)  
Diane Montgomery (Living Rent Campaign)  
Sarah McCarthy (Hanover & Elm Grove Communities Forum)  
Jerome Cox-Strong (Pankhurst Pantry)  
Dinah Clark (Hanover Action)  
Nick Wells (Brighton & Hove Citizens)  
Luke Walker (Community Campaign for the Brighton General Hospital site)

Summary of Deputation:

Our campaign is endorsed by the following groups listed in Appendix 1

We are a non-party political campaign and welcome much of the motion for today's meeting (which we, along with Citizens, would have preferred to be proposed as a joint cross-party motion). We see the motion as a positive step forward but believe it should go further and be more specific in several important places. Our main campaign goals for the hospital site development are that the site are listed in Appendix 2:

When our group highlighted these goals in our deputation on 10th July 2025 to the council meeting, we welcomed assurance at that meeting that the council are already working on these goals and particularly that they are keen to acquire the site for social and key worker housing, and for community benefit more widely. We were also pleased that the council response pointed out that 'we the people own the NHS and its Trusts and that our government

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should and can block the private sale to developers of NHS land and insist on its transfer back to the council.'

So, we ask that the motion put proposed by Labour councillors is strengthened to include some specific assurances from the council, namely that the council will:

- 1) Urge the city's MPs that belong to the government to use their influence to prevent the private sale of any part of the site and to ensure that the trust be compelled to offer sale of the site (except the area earmarked for the health hub) to the council at a price that allows for its development for public benefit (primarily housing and community facilities).
- 2) Work on the creation of a genuinely inclusive people's plan for the site as a priority, jointly with the Community Campaign for the Brighton General Hospital Site, following a process agreed with us, and noting that this is a broad-based community group.
- 3) Insist that any housing identified as for 'key workers' should be truly affordable and in line with the excellent planning guidance (PAN) proposed to cabinet (19th March), which states that affordable housing should be social affordable rented provision (not shared ownership since the council rightly states that 'affordable home ownership products are generally provided at costs which are out of reach for most households in need'\*). We believe that any 'key worker' rents must also meet this affordability standard and should not exceed the Local Housing Allowance ceiling.
- 4) Undertake a Health Impact Assessment to evaluate and to quantify the social value outcomes that are achievable through the site's development for social housing and affordable housing and community facilities as compared with a private housing development. And within this process, to ensure the NHS Trust is fulfilling its duties to reduce health inequalities in the City.

Please in your response state clearly which of these asks you will agree to.  
Thank you

\* p.5 Planning Advice Note 'Affordable Housing'

## Supporting Information

### **Appendix 1- Supporting organisations of the community campaign for the Brighton General Hospital site**

Brighton & Hove Housing Coalition, Hanover & Elm Grove Communities Forum, Sussex Defend the NHS, Hanover Action, Living Rent Campaign, Friends of William Clarke Park, Who Owns Brighton, Brighton & Hove Citizens, Albion Life, Brighton & Hove Community Land Trust (BCLT), B&H Older People's Council, Hanover Community Association

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## **Appendix 2 – Campaign goals**

1. Be held/remain in public/community ownership
2. Prioritise much-needed social housing and genuinely affordable housing (500+ homes)
3. Achieve a health hub and community health facilities (possibly including step-down beds)
4. Deliver new spaces and facilities for the local community, developed with healthy planning principles
5. Be developed around the fullest engagement with residents and stakeholders, on a 'people's plan' guided by these principles
6. Maximise sustainability and biodiversity.

## **2. Urgent Concerns Regarding the Effect of Southdown/UOK Service Redesign on The Wellbeing Hub At Preston Park.**

### Supported by:

1. Patrick Ward
2. Cheryl Collins
3. Alison Reeves
4. Sophie Harris
5. Paula Brookes
6. Zorenah Chapman
7. Julia Helen Marshall
8. Maria Loughram

### Summary of Deputation:

This deputation is submitted by residents and service users of the Wellbeing Hub. Redesign of mental health services under Southdown/UOK to the NHS Neighbourhood Mental Health Team (NMHT) model creates a catastrophic cliff edge for current service users of the Wellbeing Hub, a preventative service for crisis services.

The service is planned to be reduced from 5 days a week of structured, staff-led support to a few hours of unstructured, limited, open-access time with the risk of 400 vulnerable clients with moderate to severe mental health challenges and multiple protected characteristics losing their safety net and connection with their peers.

**False Economy:** The impact will increase pressure and cost on NHS crisis services due to severe decline of mental and physical health of clients. Cutting preventative support does not save money - it shifts the financial

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burden, leading to higher demand for emergency services and significant strain on adult social care budgets. The redesign has already caused deterioration in clients.

**Failure of Duty of Care:** There is currently no robust transition plan or risk assessment to find alternative equivalent support and essential continued connection with their peers. Removing a lifeline without a replacement is a failure of our city's duty to some of its most vulnerable citizens.

**Lack of Transparency:** To date, there has been no comprehensive, transparent Equality Impact Assessment (EIA) or meaningful public consultation regarding the cumulative impact of these cuts. Nor has there been a fully co-created NMHT design at the earliest stages of development with regard to the benefits the Wellbeing Hub provides to clients.

We therefore urge the council to:

1. Challenge the ICB and Southdown/UOK by formally questioning the long-term cost implications for the city's statutory services by cutting the Wellbeing Hub service.
2. Start an inquiry into how Southdown/UOK implemented a redesign that included neither a needs assessment, impact assessment or comprehensive transition plan.
3. Support an immediate stay by pausing all service changes until a full, transparent public consultation and impact assessment are completed. Otherwise the council risks a financial burden, funding a mental health service that is not fit for purpose and risks people's lives.