



Department
of Health &
Social Care

Minister of State for Health (Secondary Care)

39 Victoria Street
London
SW1H 0EU

HM Coroner Oliver Robert Longstaff
His Majesty's Coroner's Office
The Coroner's Courts
Burgage Square
Wakefield WF1 2TS

14th October 2025

Dear Mr Longstaff

Thank you for the Regulation 28 Report to Prevent Future Deaths of 3 June 2025 sent to the Secretary of State for Health and Social Care about the death of Benjamin Finch Arnold. I am replying as the Minister with responsibility for NHS workforce and the New Hospital Programme (NHP).

First, I would like to say how saddened I was to read of the circumstances of Benjamin's death and offer my sincere condolences to his family and loved ones. The findings in your report are very concerning, and I am grateful to you for bringing these matters to my attention. Thank you also for the additional time given to the Department to provide a response to the concerns raised in the report.

The report raises concerns over the provision of maternity services across the Leeds Teaching Hospitals NHS Trust (LTHT), which is split unequally between Leeds General Infirmary (LGI) and the St James' University Hospital (SJUH). SJUH is described as being 'isolated' with limited nursing and medical support that can be called upon. The report also mentions that LTHT's plans to bring maternity services under one roof have been frustrated by the revised delivery schedule of the NHP, in which construction of the new LGI will begin between 2032 to 2034.

In preparing this response, my officials have made enquiries with NHS England to ensure we adequately address your concerns.

Individual NHS Trusts and other employers are responsible for ensuring that there are sufficient staff to provide safe care. I would expect LTHT and other NHS Trusts to review their staffing levels, including in senior roles, to ensure that they are appropriate and in line with BAPM service and quality standards for provision of care in the UK [Standards for provision of Neonatal Care](#) in the wake of the death of Benjamin Finch Arnold.

Trusts already have a duty through the Health and Social Care Act 2008 to regularly review the number of staff and range of skills needed to safely meet the needs of people using their

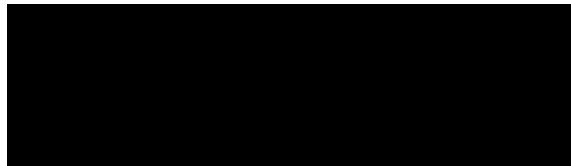
services. I note that you have also sent this report to LTHT and expect that they will respond separately regarding the concerns about the services involved.

We acknowledge that the ambition of LTHT is to bring all maternity services under one building as part of their new hospital plans, and we are committed to delivering a replacement for LGI as soon as possible. The review of the NHP was necessary to put it on a sustainable footing, however, we recognise that the inclusion of LGI in Wave 2 of the NHP is disappointing for the patients and staff who use and work in LGI.

The review of the NHP took into account a number of factors, including wider constraints such as available funding and market capacity to deliver schemes, and prioritisation of clinical risk, including at the seven hospitals built wholly or primarily from Reinforced Autoclaved Aerated Concrete (RAAC). Alongside the Plan for Implementation ([New Hospital Programme: plan for implementation - GOV.UK](#)), we published an Equality Impact Assessment on the decision which is available here: [New Hospital Programme: equality impact assessment - GOV.UK](#). This acknowledged that women using maternity services at hospitals where the schemes to replace them had moved back would miss out on using new and modern facilities. However, this was not the intention of the NHP or the review; these schemes were assessed and reprioritised based on deliverability and clinical risk.

Thank you again for bringing these serious concerns to my attention. I sincerely hope this response proves helpful. Should you have any further questions or require additional clarification, please do not hesitate to get in touch.

Yours sincerely,

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MINISTER OF STATE FOR HEALTH