Department of Health & Social Care

[redacted]
Minister of State for Health (Secondary Care)

39 Victoria Street
London
SW1H 0EU

[redacted]

HM Assistant Coroner Guy Davies
Cornwall Coroners' Service
Pydar House
Pydar Street
Truro
TR1 1XU
[redacted]

By email: [redacted]

28 October 2026

Dear Mr Davies,

Thank you for the Regulation 28 report of 9 September 2026 sent to the Secretary of State about the death of Anthony Francis Edwards**.** I am replying as the Minister with responsibility for Secondary Care.

Firstly, I would like to say how saddened I was to read of the circumstances of Mr Edwards' death and I offer my sincere condolences to his family and loved ones. The circumstances your report describes are concerning and I am grateful to you for bringing these matters to my attention.

The report raises concerns over a shortage of nursing staff at Royal Cornwall Hospital, which led to Mr Edwards' half hip replacement operation being cancelled on four consecutive days from 24 to 27 August 2025. The inquest found that the repeated operation delays, and the associated periods when Mr Edwards was nil by mouth in preparation for the operation, contributed to his deterioration and ultimately his death.

In preparing this response, my officials have made enquiries within this department to ensure we adequately address your concerns.

I have carefully considered the situation. Individual NHS Trusts and other employers are responsible for determining staffing levels and workforce composition. They are best placed to understand their services and the needs of their patients in order to deliver safe and effective care. I would expect Royal Cornwall Hospitals NHS Trust and all other NHS Trusts to ensure that their staffing arrangements, are appropriate at all times.

Trusts already have a duty through the Health and Social Care Act 2008[1] to regularly review the number of staff and range of skills needed to safely meet the needs of people using their services.

Your report also raises concern about a lack of trained nurses due to the cost of student fees and full-time placements on hospital wards. The previous government's education reforms moved healthcare students onto the student loans finance system (like students in other subjects), with the intention of unlocking the cap which constrained the number of pre-registration nursing, midwifery and Allied Health Profession (AHP) training places, and to allow more students to gain access to such degree training courses.

Under the student loans system introduced for students starting pre-registration healthcare courses in the 2017/18 academic year, students on nursing courses typically received around a 25% increase in the financial resources available to them for living costs whilst they studied than they did under the NHS Bursary system.

Since September 2020, all eligible nursing students have received a non-repayable training grant of a minimum of £5,000 per academic year, with additional incentives for priority specialisms such as mental health and learning disability nursing. Further financial support is also available for childcare, dual accommodation costs and travel.

In addition, we now have a complete apprentice pathway for nursing, from entry level to postgraduate advanced clinical practice. A person can join the NHS as an entry level Healthcare Assistant apprentice with a view to eventually qualifying as a Registered Nurse, allowing people to earn whilst they learn.

I hope this response is helpful. Thank you for bringing these concerns to my attention.

Yours sincerely,

[redacted]

[redacted]

MINISTER OF STATE FOR HEALTH

[1] *Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 – Regulation 18*