Appendix A: Thematically Organised Verbatim Free-text Responses

Responses organised by primary theme. Minor formatting changes only; wording preserved. Key responses included in this document. Excluded responses include duplicate/repetitive responses or single word answers. Full qualitative data can be found in Appendix B.

Patient Safety Risk

Response 2

On the ward - the windows don’t open and half the ward is south facing. It is blazing hot in there. No air con and only a couple of fans - mostly have been in by patients / relatives. Smells terrible. Lots of patients requiring IV fluids that they probably otherwise wouldn’t have needed and a suspiciously high number of falls this week. Some patients have self discharged because of [the heat] which I would have done too

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Response 3

There has been no air conditioning on (and heating was on in some rooms!)

Response 4

Absolutely horrific! Staff fainting, patients becoming dehydrated, theatre lists stood down because not safe to operate

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Response 5

Has been absolutely horrendous and unbearable for both patients and staff. Patients are coming to harm, particularly those most vulnerable who would struggle to regulate their temperature. No sign of any hospital management who seem to be working from the comfort of home or an air-conditioned office, and have only supplied generic heat stroke advice about avoiding hot places.

Response 6

Genuinely awful. No fan in the windowless doctor's office. Patients have fans and all the blinds are closed and windows open. Nursing station has fans.

Response 7

Recently a part of the hospital was rebuilt (it was A&E majors, now Acute Receiving Unit) and not only did they not add air conditioning or windows, the ventilation does not actually work and there is apparently mould in the ceiling. At present they have just covered the vents with bits of plastic that have largely fallen off. Are we all at risk of aspergillosis? Additionally, there are two cold water machines to serve the whole hospital.

Response 10

Hypocritical when we tell patients to keep hydrated and encourage intake when the staff are at work and don't even pass urine themselves because of how dehydrated we are. Very difficult to work in humid and overheated conditions impairing clinical skills, impractical to wear ppe etc.

Response 12

I work in paediatric ED. It exceptionally hot on Wednesday 24th June, with temperatures reaching 29 degrees and above 28 for most of the day. We had parents collapsing in the waiting room. It was escalated to the site team many times, and one response was 'its not that bad, other places are worse'. Our consultant ended up going to buy a fan for the doctors office out of her own money mid-shift. We all felt like our patient care was compromised.

Response 13

All theatres including emergency (trauma) shut down due to failing aircon on Wednesday and non-essential use of computers banned. On Thursday all elective operating cancelled to protect aircon for trauma theatre & CEPOD

Response 15

Many elderly people have been admitted with complications of heat, I.e hyponatraemia and electrolyte disturbance.

Response 18

The electricity demand has significantly increased with the heatwave and if maximum capacity is reached we will have to switch to generator power. This will result in air conditioning not being able to run posing a significant threat to patient safety.

Response 19

Whole wards of patients naked except for continence pads because it's too hot for them to be dressed

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Response 20

It has been absolutely horrendous. The temperatures are unsafe and I became unwell as did my colleagues and the patients were dehydrated.

Response 21

Absolutely unbearable particularly on higher floors in the hospital. The inpatients, of course many who have infections and may be febrile, also find it unbearable and intolerable. Staff cannot function properly or focus in such high temperatures

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Response 22

The heat is unbearable and inhumane… A patient actually said that they are surprised that we had come to work in such heat at work place and not quit!

Response 23

It's not just the direct risk from the heat. Tempers are frayed and the levels of violence and abuse are also going up.

Response 24

Genuinely unsafe. Seeing patients trapped in conditions of more than 30 degrees whilst they are already fighting on another front is heart breaking.

Response 26

Patients have been overheating, 1 or 2 saying they may vomit or faint

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Response 27

Patients are dehydrated, constipated (we've have a constipation related ileus). Staff feel unwell.

Response 28

Have to keep lights off so can't see that well, windows closed, blinds closed so feels dark and gloomy, leaving doors open to allow air flow, despite this feeling sticky and uncomfortable, having difficult putting gloves on due to sticky hands and low energy levels due to the heat. Worrying about what to wear to keep cool and maintain professionalism.

Response 29

I can no longer care for patients safely. Septic patients are left in corridors with ambient temperatures of 33 degrees. 2 members of staff went home sick today. Our staff are struggling, not just to care for patients but struggling to not become a patient themselves

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Response 30

The Trust has failed to address this problem for the last 15years so we are forced to performer surgery and care for patients in operating theatres and wards at over 30 degrees centigrade

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Response 32

Theatre recovery reached 38 degrees. This is the area patients go to immediately after waking up. They usually stay there around 1 hour. We had a fight with infection control to allow simple fans to be used in this area.

Response 34

Our Labour ward theatres were reaching 30 deg. Trauma theatres climbed to 28 while other theatres were up to 25… in the winter the temp drops to 14 deg and we have to layer up under the scrubs as if we are going skiing.

Response 35

I have not been able to safely make decisions and by the end of the day I have felt unwell, this is despite me drinking plenty, wear cool clothing and sitting on ice packs with a fan on me. Drawing blinds. It's been a very very challenging week that has felt like a totally unreasonable test on my resilience. It's felt unsafe and totally inappropriate trying to care for patients in this heat.

Response 36

Unbearable for any clinical staff to work. Makes clinical decisions very difficult due to difficulty in concentrating etc. Many patients having unresponsive episodes who otherwise wouldn't have.

Response 37

It's hard to concentrate and make decisions in such high heat and it's also uncomfortable. I would love for general practices to be given help in finding air source heat pumps that can be used to heat the building in the

winter and cool the building in the summer as well as help with installing solar panels to run them. Burning more fossil fuels to power air conditioning units is not a good way to solve this problem as that will contribute to increased climate change which will impact even more on our patient's health and the ability of NHS staff to treat them.

Response 38

We have patients brought in due to severe heat stroke who are not able to be treated appropriately because there is nowhere cool to put them.

Response 39

Also have staff, patients and relatives fainting, becoming unwell and spiking temperatures due the temples without adequate hydration facilities.

Response 40

Patients, relatives and staff in floods of tears and exhuasted.

Response 41

Extreme humidity and heat in operating theatres . Told by management to carry on with operations. And carry a bottle of water.

Response 42

We have had at least one post-op patient suffering with heat stroke, requiring a medical emergency call. The thermometer in that ward was reading 32c

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Response 43

Terrible. multiple emergency calls for staff throughout the hospital with heat realated illnesses, significant portion of patients being admitted with heat related illnesses exacerbated by conditions in ED

Response 44

I feel genuinely sorry and helpless for the staff and patients every time I have gone to a ward as it is like an oven - patients are almost certainly getting AKIs as a result of the heat. We need to do more to protect the most vulnerable in our society from the effects of heat especially when they are unwell.

Response 45

Old hospital heating still on full blast as unable to turn old radiators down

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Response 46

I have a constant headache. Finding it very difficult to make critical decisions and deal with very decision dense work (which is my core work) in this heat. This clearly creates an unsafe clinical environment for staff and patients.

Response 47

it has been difficult for surgical patients and staff. There has been one air con in one whole bay that hardly provided any comfort. There were no fans or any air circulation in the nursing areas or secretary rooms or doctor rooms. In the doctors mess the heater was on and ACP room had a freezer for ice that made the room so hot that it was not possible to sit there for even 2minutes. No wi does could be opened due to the heat. It was unbearat and stuffy and hot

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Response 48

Sweating quicker than I can drink fluids. Worked four shifts back to back and felt genuinely unwell as could never hydrate properly. Not given anything from the hospital to help, no fans, no ice lollies. Had to take a patient ice pack because I felt that unwell and was told off. The hospital ran out of ice packs for heat stroke, computers went down, the blood analysers all broke so no blood results. This was worse than winter pressures

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Response 49

Dangerously hot for staff and patients. Air conditioning should be mandatory on wards in all hospitals.

Response 50

I've been working long day on call shifts, busy running around different areas of the hospital including A&E assessing and admitting patients. I've had a headache for days due to the weather and struggled with sleep, probably achieving 4 hours maximum each night due to the heat. This has made it difficult to work such busy

and clinically pressured shifts, where even on a normal day it's difficult to find time to drink enough water. The hospital has also been unseasonably busy with patients in corridors in A&E. I had to see a 90year old lady in a corridor who was unwell and febrile. There was nowhere private to examine her to maintain dignity. Additionally, I have heard from colleagues whose operating lists had to be cancelled because the theatres were so hot that there was steam covering computer screens and microscope lenses and condensation dripping on the floor.

Response 52

Management offices however have air cons--I don't really understand that-how can they have air cons whilst clinical staff and patients don't even have fans?

Response 53

We have noticed a reduction in patient contacts which may indicate the heat being a barrier to patients seeking help.

Response 54

Very hot, struggling with any manual assessments or treatments due to heat. With patients sweating ++ in sessions/ myself sweating onto patient. Not appropriate for treating patients in such heat as a lot are vulnerable and more at risk of heat stroke/ acerbating comorbidities and if myself a young 20's year old is feeling hot and sweaty and light headed I can't expect my vulnerable patients to attend there appointments. There are no water fountains for patients to freely access in our department, we have to collect a cup from reception and walk to a drinking water tap.

Response 55

Patients are too hot to engage with therapy so no progress is made towards discharge and patients are staying in hospital longer. I am 8 1/2 months pregnant and I had to fight with my managers in order to WFH on the hottest day of the year with a red weather warning. No consideration for pregnant staff.

Response 56

Patients feeling fatigued and dizzy/more unwell, making physiotherapy not appropriate. Colleagues have felt unwell, with heatstroke symptoms requiring them to go home unwell.

Response 57

Hydrotherapy has had to be cancelled. Our more vulnerable patients have been advised not to attend gym sessions. Gym and rehabilitation sessions have been cut short for patient safety. The outpatient physio department has been unbearable. Some of the windows have broken blinds so we are not able to block out the sun and we only have a few fans to keep cool.

Response 58

It's been hard for staff to support patients, and patient are also finding it hard to engage in therapy sessions because of the heat. Families have been buying fans to bring into patient rooms, but this just circulates the hot air. The hospital was built in 2014 to have floor to ceiling windows in patient rooms, so the patient rooms feel extremely hot, and sometimes I have felt very faint in the room, and have to sit down to try feel better, before getting back up again to help the patient. It's been overly more time consuming seeing patients, which means then that we can't see as many patients in the day, which understandably frustrates patients and families who are waiting to be seen, in order to be discharged by therapists to go home. There has been huge pressures to see patients, due to Opel 4 status, and the heat wave has been us feel guilty about not being able to work fast enough to support getting patients reviewed by therapists for discharge.

Response 59

Only 1 hour into my shift on 24/6 I had already sweat through my scrubs. Regularly felt dizzy and very sick due to heat.

Response 60

Patients wanted to self discharge because their side rooms are too hot. Medicines stored at temperatures above recommended which means we do not know their efficacy now exposed to heatwaves. Fridge storing cold chain items are alarming and malfunctioning every heat wave.

Response 62

Very difficult conditions for patients and staff. Some patients have discharged themselves against medical advice due to the extreme heat on wards.

Response 63

Palliative patients, despite being near end of life, have without a doubt been passing away quicker in the heat. Patients and their families are buying their own fans or taking them from other people's rooms to keep

themselves and family members safe in this heat. I myself am on sertraline which impacts heat regulation, the wards are absolutely unbearable for patients and staff alike.

Response 64

I've witnessed staff members collapse due to the heat on the ward and, despite the use of a fan, the ward doctor's offices (which do not have windows) have been up to 35 degrees at times. I have noticed myself rushing jobs in an attempt to leave these uncomfortable conditions sooner. We know that rushing important tasks can increase the number of mistakes and impact patient care so I have done my best to stop myself from rushing but these working conditions are unbearable. Furthermore scrubs are not breathable and made of heavy fabric which only makes the heat feel worse.

Response 65

My ‘management office’ is lovely most clinical areas are not. New guidelines needed. People being admitted with heat related being treated in a sauna

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Response 67

Patients signing their own discharge against medical advice due to heat. Theatres closed and emergency theatres used due to air con overloading and not working. Difficult to think under pressure in emergencies and act, due to extreme heat.

Response 70

I am an anaesthetics trainee. This week, multiple cases have been cancelled because of unsafe temperatures in theatre. This has meant cancelled operations for patients and missed training opportunities for me.

Response 72

Theatres closed for dangerously high humidity (>90%) with only 1 elective list completed on Thursday. Air circulation units drawing air directly from the roof (measured at >38 degrees with an infrared thermometer).

Response 73

Multiple radiology equipment issues due to heat/humidity resulting in cancelled lists. Surgical procedures performed in 24/5 deg heat at 90% humidity, increasing risk of infection.

Response 74

I am getting postural drops in front of patients. I have been unable to support my patients with heat exhaustion besides giving heatwave advice.

Response 75

Likely to make more errors, can't think straight, slow, I imagine patient complaints up in general due to shorter fuses on both sides. I couldn't finish my work. Work piling up even more. Only urgent stuff done. Unwillingness of management to invest in portable air con machines. Typical institutional martyrdom mentality. Just show up and put up. This is abuse.

Response 78

Unbearably hot in all staff areas. Portable air con in patient bays, but not cubicles, and rooms used for medication storage. Many patients developing dehydration, AKI, hypotension as a result. Lack of ice packs meant less effective cooling for those with hyperthermia and heat stroke.

Response 79

It had genuinely been horrendous to work on the wards this week. Our office is averaging 32° (thermometer in place). It is difficult to do any work purely due to the heat. Physios are not seeing half the patients due to concerns regarding safety. Most patients are spiking [temperatures] on routine obs. I work on a respiratory ward - all the patients are struggling from a lung perspective to improve.

Response 81

Starting the shift and staff clothes are already dripping with sweat. Fans on in empty rooms, whilst rooms full of people have no form of cooling. Broken scanners everywhere! At one point we had no CT or MRI capacity for several hours. Staff off sick from heat stroke and the hospital is busier than ever. Patients coming in with heat stroke to wards that are clearly in excess of 30 degrees

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Response 83

It has been unbearable to work in, patients have been more unwell and declining therapy input due to the heat. Staff have been unbearably hot and been feeling unwell from the heat, it has been hard to even function.

there has been no AC and the little fans that we do have, just blow hot air. There is almost no ventilation on the wards and it feels like your working in a sauna.

Response 84

Hard to work and exhausting; coming home wiped out. Expected to figure out our own solutions to cool. I know some areas of the hospital were between 33-40°. Imagine hoisting a patient in PPE!!

Response 86

I fainted in work due to the heat and my managers response was that “everyone else was suffering”. I had asked that morning for annual leave as I'd worked every day in the heat and it was denied. After fainting I had no choice but to go off sick.

Response 87

Community based. We need lighter uniforms and reduced capacity. Working in homes in heatwave where patients STILL HAVE THEIR HEATING ON

Response 88

My acute NHS trust has advised staff to take the heatwave into account when planning discharges out of hospital - this places increased pressure for bed management. Many frail/elderly have been set up with intravenous drips for hydration

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Response 89

Multiple patients fainting. Elderly patients fainting and falling over. Unable to manage patients with heat related illnesses. Staff members collapsing. Unable to make clinical decisions. Staff sickness

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Response 91

Absolutely awful, so hot I’ve felt unwell, the ward is so busy it’s always hard to take a break. There are a few fans but we’ve given them to the patients as they need them more than we do. It’s just awful. We don’t have cold water, we have a few jugs that we fill and put in the fridge. We don’t have a freezer, so can’t make any ice.

Response 92

When a senior nurse escalated the concerns of clinicians about unsafe working conditions , and to provide with cooling gadgets , she was told that patients were the priority and not clinicians.

Response 93

Patients are being harmed by the heat, by nurse exhaustion, and by the lack of cold drinking water.

Response 94

We had to empty most of one of the bays because it was too hot, the patients were feeling unwell and we had still not been provided with the aircon units we have been asking for for 4 days. Offices are sweltering and work has been hellish all week.

Response 95

Ridiculously & uncomfortably hot. Expected to do full lists & make decisions directly affecting patient care. Trust offered ice pops & said we could wear scrubs. Unacceptable conditions with a window which barely opened, a fan & an ultrasound machine generating heat.

Response 96

I work across several community spaces. One of my MDT sessions was meant to be held in a non air conditioned venue, in 37 degree heat, diagnosing children. I lobbied to cancel due to 1) safety and 2) diagnostic overshadowing. I was overruled. I called in sick from anxiety and to protect myself and the patients. It's been really hard and I've felt abandoned by my managers and supervisors.

Response 97

Unsafe for pregnant patients on antenatal wards with no aircon. Unsafe for staff with no ventilation windows, no aircons, unsafe temperatures ~40 degrees. Staff feeling exhausted, lethargic, dizzy, dehydrated and unable to focus.

Response 98

Terrible to work in from a personal point of view but my larger concern was for the frail elderly patients in un air-conditioned bays in which the radiators were still on. Maintenance team suggested this would take more than 24 hours to rectify. Absolutely appalling

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Response 99

The extreme heat also appeared to increase frustration and agitation amongst both patients and staff. Tempers were noticeably shorter, patients were understandably more impatient due to the uncomfortable conditions, and working under that level of physical stress increases the risk of mistakes in an already high-pressure environment.

Response 100

One of the most concerning issues was our clinical medication room reaching approximately 32°C. Many medicines are recommended to be stored below 25°C (or 30°C depending on the product), raising concerns about medication storage and quality. Staff were expected to continue providing emergency care in these conditions while wearing PPE and undertaking physically demanding work.

Response 101

I think the heat takes away from our professionalism, for example, loss of self -control, visual impact, cognitive decline, fatigue and lethargy. All day of complaints from patients and family members who don't understand that is not our fault. Being the frontline target for everyone's frustration it's incredibly draining.

Response 102

Some of the operating theatres have had to close as they were too hot, causing cancellations of patients. This was entirely predictable as the temperature management system in theatres has not been working properly for years.

Response 103

Working on maternity wards has been unbearable. Babies and mothers feverish, being overinvestigated due to deranged vital signs. Staff members feeling faint and almost passing out due to the heat and not enough breaks.

Response 104

Delivering psychological therapy, where meetings last 60 minutes, in small airless rooms with windows that don't open more than a few cm for risk management reasons has been a challenge. Patients and clinicians have struggled in the heat which has been stifling. It is impossible to be fully present and engaged in the therapeutic process when both you and your patient are sweating profusely and feeling unwell on account of the heat.

Response 105

Patients and staff feeling faint because of the heat. Turned off lights to try and help, patients wondering why it was so dark. Experienced leg cramps due to excessive sweating and changed clothes half way through the day as wet from sweat. Clinical rooms have drugs stored in cupboards but should not exceed 25c- no air con or cooling systems in place to support this measure, just shocking.

Response 106

There is a heat source underneath our office and no windows. Computer screens add heat. It is 27 degrees in winter. It is unbearable to be in during a heatwave. I felt ill and could not concentrate.

Response 107

I work on the neonatal unit. Weve had to screen multiple babies for suspected sepsis due to raised respiratory rate or raised temperatures due to the hot environment, going against antibiotic stewardship. Colleagues have also felt dizzy on performing intricate procedures such as central lines on babies whilst wearing full PPE.

Response 108

It was very bad week, I had to lead a cardiac arrest in a side room where the temperature was high that triggered a patient seizure, her temperature was 42. All other patients who had to come in as heat stroke and the hospital was not safe for them.

Response 109

I'm pregnant and I had to call in sick as it just became too hot to work. I didn't feel safe - I was worried I'd miscarry or cause harm by overheating. We are in an old building with little ventilation. I was worried patients might collapse due to the heat. My practice manager tried her best with ice creams and ice but it just doesn't cut it. It felt inhumane to both patients and staff.

Response 110

Burning hot while having to make vital decisions about the care of very vulnerable and clinically unstable patients. Doing CPR in a poorly ventilated room was almost impossible and we all had to regularly switch out.

Response 113

Nurses and HCAs are on their feet, lifting and turning patients, cleaning up incontinent patients while wearing gloves and aprons with cubicle curtains drawn. Porters and domestics are walking miles and doing heavy manual labour. I've seen cleaners on the verge of fainting, and been seriously concerned about cardiac risk for older, less fit staff members. None of us are able to think as clearly or concentrate as efficiently as we should. Responses are slowed. Elderly patients are dehydrated and spiking temperatures, and having to be cannulated for IV fluids - unnecessary, uncomfortable and invasive. Dying patients are sweltering in overheated rooms. Hospital windows open only a couple of inches. In most places there's no through ventilation. In my own Trust, crumbling building infrastructure has required roof and ceiling repairs resulting in covering up high level ventilation windows which used to help with cooling. The argument that conditions are only this bad for a days a year are becoming increasingly untenable - summers are hotter for longer every year - and it's not the duration of the misery that matters; it's the effect it has on patients and staff for however long it lasts. Hospitals need universal air conditioning.

Response 114

Patients and relatives have complained. On one occasion a relative had to leave my clinic due heat making them feel u well. On Wednesday I felt dehydrated, had headache and my ability to complete my assessment related admin was so slow, I have had to work in my own time on day off… I am getting ready to quit nursing all together.

Response 116

Every year we go though this. We report it and datix it. Nothing ever changes except the excuses. There is air conditioning but for some reason they won’t fix the problem to get it to turn on. We don’t have windows that open either. Staff are suffering with symptoms of heat stress. We have had patients faint and staff feeling faint too. At the end of your shift you feel broken and you dread having to come in the next day.

Response 117

Staff sickness at an all time high because they are getting sick from heat after just one shift. This leaves their following few shifts without cover. For example I had s shift in nearly 40C heat whilst being short 40% of the rostered staff for the day. No relief for staffing available as all other wards in similar situations. This is incredibly unsafe given the highly dangerous treatments we provide such as chemotherapy.

Response 118

We admitted patients with heatstroke and then moved them to an uncomfortably warm ward. When they raised valid concerns, there was nothing that we could do about this. We made cold compresses out of wet towels. However, the hospital management suite did have air conditioning.

Response 119

Hospital facilities not coping with high temperatures and humidity levels. equipment failures due to overheating eg CT scanners and robot. Theatre lists cancelled due to high humidity in theatres >60% making patient safety and post operative infection a high risk

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Response 121

Patient outcomes tend to be more adverse, patients on strict fluid balances and the particularly vulnerable at extremes of age suffer, and have falsely elevated temperatures and increased risk of morbidity. Coworkers are not able to efficiently work, neither am I, when we don't even get enough breaks to be able to drink water, risking our health. It gets so warm you risk getting a heatstroke just by working, I often feel faint when doing procedural tasks such as cannulation and similar.

Response 122

We work in a psychiatric hospital where the windows can’t open as our patients would attempt to leave. They have been so agitated and distressed in this hot weather. We have no air con and only a few fans in a building built decades ago. It’s been frankly dangerous for staff, patients and families

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Response 123

[In GP we] see reduced patient numbers contacting us for appointments, meaning conditions may be delayed in assessment and thus presenting sicker later, or higher pressure for apps on days down the line

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Response 125

On the previous hot spell, I was seeing people more unwell with AKIs, not knowing their sick day rules

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Response 129

It has been stifling in the labour rooms and on the wards. We had to appeal for some portable air conditioning units from the hospital estates team and have luckily been able to get some but not in all areas and the priority is obviously for the labour rooms. Last week however we ended up having to turn off lights in waiting rooms in an act to try and reduce residual heat. Our maternity triage unit did not have any air conditioning units and the main triage room was around 35 degrees. Unnacceptable working conditions.

Response 130

Working in the community is really hard. Travelling in the heat and providing a service in homes where we are delivering advice about safer sleep for babies, when parents are struggling to adhere to guidelines is a challenge. Asking parents to come to clinics without air-conditioning is shocking when nhs advice is not to travel or go outside with babies in extreme heat.

Response 131

Very sticky and sweaty, looking unprofessional in front of patients. Feeling dizzy every time I stood up despite taking on significant amounts of fluid over and above what I would normally drink. Struggled to concentrate on work and make meaningful plans for patients due to being so uncomfortable because of the heat.

Response 132

The medical and surgical wards were unbearably hot, some of them feeling warmer than the outside temperature and making the usual human bodily fluids stench unbearable and nauseating.

Response 133

It has been hellishly hot to the point I had to take 2 days off in the heatwave due to the impact it was having on me mentally and physically. I could not concentrate to do my work for sure.

Response 134

Everyone was glistening and patients were sticking to the plinths in physio outpatients. It was airless and we had no fans at all. One patient walked in at 750am for an 815am app and walked out saying they could not stay and they were an acute post op that needed seeing but the wall of heat was too much! Staff felt ill, uniform policy not relaxed and new universal uniforms sweaty and you only get 3 so if you work full time you don't even get enough uniform to have a clean set daily. That was not hygienic and I live alone and shouldn't need to put a wash on just for a uniform top as that is not environmentally friendly. We have no blinds on our big bay windows so essentially it was like working in a giant airless greenhouse. By the end of the day despite maxing out on drinking fluids most staff had headaches and felt unwell. It certainly was clinically unsafe.

Response 135

We had incidents of babies in NICU having unusually low temperatures and there is a concern that this was due to the incubators malfunctioning in the heat (they are typically set at 26-30 degrees which is usually warmer than the air temperature but was obviously cooler than the air temperatures experienced during the heatwave).

Impaired Clinical Decision Making and reduced care capacity

Response 17

Amber alert send out to staff as the hospital is reaching its maximum power capacity due to the running of air conditioning and fans. All non essential equipment to be turned off and staff advised to work from home if possible.

Response 69

Couldn't concentrate on the surgery.

Response 80

It has been very hot and uncomfortable. It affected my ability to work as a doctor and make reasonable decisions.

Response 115

Absolutely awful, no contact from departmental management about it until Friday. They suggested we take "regular breaks" but didn't offer to support us cancelling clinic appts in order to facilitate breaks. The water cooler was broken, I suggested that cooled water was delivered to clinic rooms twice a day on Thursday. We are still awaiting sign off for funding for this. There was no leadership, no care for staff.

Staff health and occupational Risk

Response 9

Felt like I was going to melt. I would sweat through my scrubs just standing up.

Response 31

“Hydration status = measuring output of sweat pooled on chair in clinic”

Response 66

I have a cardiovascular condition and have been requesting air conditioning as a reasonable adjustment for the past three years. I have repeatedly been told it cannot be allowed because it is a “health and safety” issue, despite air conditioning being available in some departments and offices. This inconsistency is difficult to understand when the lack of cooling itself poses a genuine health risk to staff like me, increasing the risk of dizziness, collapse and injury.

Response 68

Why aren't there enough aircons throughout the hospital? What will it take for the trusts to understand that summers are truly killers, and that staff working within these buildings are literally getting cooked !! As if the pressures of clinical acuity aren't enough, we now have to deal with incubating conditions as well.

Response 71

One of our members of staff required the crash call team to attend to her due to collapse.

Response 82

The only part of our surgery that has air conditioning is Dispensary. Today I closed my consulting room blinds, opened my window and used a fan which had no effect. I consulted with my feet resting on an ice pack. Despite this, as the morning progressed I felt increasingly unwell . I vomited in staff toilets and informed management that I was going home .

Response 85

I experienced a migraine which I hadn't experience before. Made me very mentally fatigued and was extra exhausted at the end of the day. Uniforms required are not made of completely breathable fabric and are very uncomfortable to wear and feels very unprofessional when you are sweating in them.

Response 124

Worse sleep, fatigue, feeling unwell - are clinicians going to be firing on all cylinders?

Estates, ventilation and building design

Response 14

The kitchen next to our office with full glass window recorded a temp of 52 degrees

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Response 77

The estates team refused to turn off the radiators… at the very least if just better ventilation and maybe even independent temp control for each ward.

Response 112

Unbearable - 39.9 degrees recorded on a cardiac ward.

Response 120

I would like to see grants for passive solutions (reflective window covering and solar shading as well as solar panels for all NHS estates and GP premises.

Equipment, medicines and service disruption

Response 25

Awful! Too hot to function, trust almost didn't mention it and expected us to get on.

Response 61

Recognise that Im one of the very fortunate doctors that works in Radiology where the whole department is climate controlled but that purely seems for the benefit of the computers we report on and the equipment we use to scan with. It's really quite telling how much more consideration equipment gets over the vital colleagues who run this whole health service! Clearly shows our current value!

Response 76

Some areas have been utterly stifling and I suspect many clinical items are being stored well above the manufacturer recommendation of 25 degrees

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Response 127

Raised concern to boss and a very long e mail telling me that if I was not feeling well I should have move to another area. Lack of pro activity from my side it was said.

Response 128

Infection control confiscated our desktop fans as they are a MRSA risk and it's been unbearable.

Response 136

We are a rural practice with limited public transport, due to the temperatures we have had to destroy all our blood bottles.

Other

Response 1

It’s been hell, compounded by our employer removing water coolers.

Response 8

No water dispensing anywhere . Bring your own or do without.

Response 11

Glad I didn't have to perform CPR, would have been dangerous for the whole team.

Response 16

It has been more busy with acute admissions than usual.

Response 33

When performing epidurals, we have to turn the fans off for sterility purposes, and it becomes unbearably hot - I can’t imagine how difficult it is being in labour in these conditions.

Response 51

That was like a torture to work under this unbearable conditions

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Response 90

Inhumane conditions especially with the polyester uniforms

Response 111

As therapists, it’s our job to get people out of bed to get them better. But this week, to keep them and ourselves safe, we’ve had to risk deconditioning as the lesser evil and left them in bed.

Response 126

Care homes having greater problems with conditions like intertrigo, while not life threatening, still takes up clinician time

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