

Never forget

Sixteen years after he was confined to a wheelchair following a fall from height at work, health and safety campaigner **Ian Whittingham MBE** sadly passed away last month. Earlier this year, he wrote this article for SHP with his friend, Dr Tim Marsh, to spread the message he delivered in his galvanising presentations about the consequences of poor health and safety management, and what can be done to improve it.

“ MY NAME IS IAN WHITTINGHAM, MY background is the construction industry, and I’m in a wheelchair. The reason why I’m in a wheelchair is that on 16 May 1993, at five to ten in the morning, I had an accident at work. It was just a normal day, when my mate said to me: ‘Tea break, Ian?’ I never got there. I stood up, went from the gutter on to the roof – something I’d done time and time again – and the roof collapsed and I fell through it. The next minute I was flying through the air.

I fell about 25-30 feet and, on the way down, I hit a piece of machinery. I don’t know what it was – it could have been a pillar drill, or a lathe, or something, but I don’t really remember much about it, to be honest. I just heard this loud snap, I landed on the floor, and I felt as though I had pins and needles; I thought I was on fire. I couldn’t see my legs, I couldn’t feel them – to be truthful, I thought I’d been cut in half. After that, I don’t remember a great deal.

I woke up 24 hours later in Southport spinal unit. I didn’t know where I was. You know when you wake up and everything’s moving and you don’t know where you are? It was like a terrible hangover!

About four days later, the consultant surgeon came to see me. He said: ‘I’ve got some news for you Ian ... I’ve reviewed your x-rays and your notes and, unfortunately, you’re never going to walk again’ – and he left. At 26 years old, that’s the type of news you don’t want to hear. It’s a very, very brutal way of telling people but, as he said later: ‘You tell me a nice way of telling someone they’re never going to walk again, and I’ll do it.’ There is no nice way of doing it, is there?

I think what they do is assess you and, if you can take the news, they’ll tell you straight away. I don’t think it’s fair if you leave people lying there thinking they’re going to walk when you know they’re not. I think it’s the right way to do it, but at the



time it’s really brutal.

About three or four weeks later, I wanted it all to be over. The pain was kicking in and I was thinking to myself, ‘I wish this would end’. If the doctors had come along to me and said, ‘we’ll give you an injection, it’ll take the pain away but it’ll probably kill you’, I would have taken the injection. I’m not ashamed to admit that.

I wasn’t alone

I met some really good guys along the way, lads the same age as me. There was a guy in the bed next to me called Lester. He was 19 years old and, unfortunately, Lester had a motorbike crash and he broke his neck at C1/C2 – same as Christopher Reeve. It’s what you call a hangman’s break.

I got to know him really well. You know when you’re growing up, people say to you ‘don’t worry about it, there’s always someone worse off than you?’ Well, in this particular lad’s case, you *couldn’t* say that. He was like a

living, breathing statue. He couldn’t move whatsoever and getting to know him had a massive effect on me. He was so positive and friendly despite everything, and I owe him a huge debt because he made me realise very quickly that, compared to him, I hadn’t really got a problem.

Lester unfortunately passed away a few years ago and I hope to God he’s gone to a better place because I don’t think anyone should endure what he had to. It may sound callous and it may sound heartless but sometimes I think that for some people who have accidents, apart from the accident or the incident itself, the worse thing that happens to them is they *survive* it.

Recovering

One morning, I woke up and there was a girl at the end of my bed. Her name was Kimberley, a 19-year-old occupational therapist from Scotland. Absolutely stunning, she was. Her job was to teach me – this rough, tough, scally roofer – how to get dressed. It took her a long time but she taught me. She also taught me to get in and out of bed on my own, how to use a wheelchair safely – you know, everything we take for granted, the simple things, how to get in and out of a shower, on and off a toilet, etc. Through great perseverance on her behalf I got to where I am today.

I had intensive physio from an Irish physio-terrorist... sorry, I mean therapist! She used to regularly beat me up twice a day with a big smile on her face. She used to call me a big jessy. She said to me, ‘the more pain and suffering we go through now, the better it will be when you leave’, and she was being quite honest. I owe her a great debt as well – she got me ready.

The brick in the pond

When you throw a brick into a pond, what happens – apart from the brick sinking? It

causes ripples, too. I think an accident is like that because, believe me, it will ripple over your friends, your family, your wife, your kids, your mates, your colleagues, your brothers and sisters. It affects so many people in so many ways, but the thing is, you don't see the damage you're doing to the people who are close to you. You really don't see it, for the simple reason that when people come and visit you, they put a brave face on.

Fridays

What made me realise what I'd done to the people closest to me was Fridays. Friday was discharge day and, as someone left, a slow-moving ambulance would come into the car park with a police escort, or we'd see a helicopter over the treetops landing across the way. The doors would open and this trolley would pop out of the back of it and there would be IV bags and drip stands on, and you'd think to yourself, 'poor bastard – I know what you've got to go through, mate'.

And then we'd be sitting there having a cup of tea, and all the wards sort-of face the car park, all the windows so you could see out. We'd all be sitting there having a cup of tea, and all these people would get out of cars and someone would go, 'do you know them?' 'No, don't know them, mate.' 'Are they with you?' 'No, they must be the new guy's family.'

Later you'd see them, absolutely devastated – sitting on the floor with their head in their hands, kids crying, women crying because they've just realised how their loved one is so badly injured and their lives are changed forever. And then you think to yourself, 'yeah, that's what I've done to my family'. But you don't see it through your own eyes; you have to see it through other people. And it's really, really heart-breaking.

For example, imagine it's your birthday and your kids come in and give you a present. 'Happy birthday, dad' and all that, and it's a jumper. But they have to ask the nurse, 'can you put my dad's jumper on for him please?' because you can't do it yourself.

And there's a queue to get in these units – the average age about 25 to 30. Their lives changed forever, their families' lives changed forever. You're not a husband or a father any more.

The financial cost

While you wait for the money to come through to pay for the house changes

needed, you often end up living in an old people's home. I did. I've got nothing against old people but try living among them! It's an absolute nightmare! The average cost of adapting a house is about £50,000 – and the higher up the break (in your back) the more it costs. And because of that, the longer it tends to take to come through, as they argue about it more.

I know a 28-year-old chap who tripped and shattered his right wrist in five places. Not paralysed but he hasn't worked since. Financially, it's just *done* him. Two years he's been off, and he's still waiting for his money to come through. I know that this year he couldn't afford to buy his kids Christmas presents...

The average stay away from home for someone in my position was about four years but, luckily for me, my MP was David Hunt and with him being a government minister at the time, things got moved along very, very quickly. I was home about 18 months after my accident so, in total, I spent about a year and a half away from where I lived. As I say, I was lucky – the average stay away from home is three to four years.

I met a lad called Tony; he was a roofer like me. He was on a job two minutes and he ended up paralysed. He went up a ladder, walked across a roof, and some guys had stacked some stuff on a skylight and he went straight through it. He wasn't killed but his two kids lost their dad that day. He's now divorced, he's lost his house, and he's still in a nursing home to this day. He has been there 13 years now, so he has paid a huge, huge price. It's just horrendous.

Risk assessments

Does the Green Cross Code say 'look right, look left, look right again and, if there's a wagon coming, walk in front of it and get knocked down'? No – it says 'look right, look left, look right and, if there's something coming, stay where you are and repeat the process until it's safe to cross'. That's risk assessment to me, and we need workers to actually do personal risk assessments like that day to day. Paper systems are okay but you've got to get people to do the personal risk assessment before they do something – look at it, and apply the principles. Look at the job and ask: how's it going to hurt me? If it's going to hurt me, how do I stop it? And if I can't stop it, I don't do it. It doesn't have to be complicated. Safety *isn't* complicated!

Near-miss reporting

I also think we've just got to get near-miss cards coming through – bribe workers with monthly awards for the best ones, if you need to. Even if they make stuff up and put in rubbish sometimes, you'll get *some* good stuff. You've got to get people thinking about risk, talking about safety, and included in the decision-making. The more the better, I say. The more the *safer*.

A challenge

I always ask people: 'Do we change the circumstances or do circumstances change us?' When I go to sites I often get told 'we can't do this because...' I'm just not interested. If we can't, then change the circumstances so we *can* do it. I'm a great believer that we change the circumstances and don't let the circumstances change us.

None of us knows what the outcome of an accident is going to be, do we? You trip on a house brick and what are the possible outcomes? I say there are five: you could stumble and get away with it; you could trip over, get a bump, a cut, a bruise or a graze – we've all done that; you could fall over, get a sprain, a twist, or something; you could fall over and get a serious break – a broken wrist, arm, leg, something that leaves you with a bit of a mobility problem, or a bit of a disabling injury; and finally, ultimately, you can hit your head on something and kill yourself.

None of us knows what the outcome is going to be once the accident cycle is in motion. And what's the key to that? It's not to tell people to watch where they're walking – *it's to remove the brick*.

My main message would be: if you want people to act a certain way you've got to train them, educate them, and encourage them to do a personal risk assessment before they actually do any work. If something looks or feels unsafe to somebody, it probably is. Workers need to be encouraged to stop work and walk away from it while they can because otherwise, they might be getting carried away on a stretcher.

At the end of the day, you only get one chance at life, so let's live it to the full and make sure we don't injure anybody. ”

Ian Whittingham MBE, health and safety campaigner and pioneer, passed away on 9 April 2009, aged 41