Finding Meaning in Breaking the Rules

As I consider how I have found meaning on this journey through our wonderful profession that is nursing, I often stop to reflect on those “aha” moments that caused me to change directions and take a different path. It has not been about breaking rules, but rather intentionally questioning conventional wisdom and challenging accepted norms, that has had such a profound impact on me and my way of being. Here are a few of those “tried and true,” yet false, life rules.

**CHANGE IS DIFFICULT**

How often have you heard that change is difficult? How often have you explained resistance to change or new ways of thinking by opining that change is hard? If you think about it, change happens all the time. Look at how different your life is today than a few years ago. What is accepted normative behavior (i.e., staying in a private home of someone you don’t know [e.g., Airbnb]; stepping into a private car of a total stranger [e.g., Uber], or forming a strong and important relationship with someone you have never met in person [e.g., Facebook]) is not what it used to be! And, the only thing hard about those changes would be if you tried to prevent them from happening.

Change is constant—it happens quite easily. Change is not difficult; it is working to maintain the status quo that is so hard. In nursing, we spend far too much time holding on to past practices when embracing the new approach, new process, or new standard is the easier road.

**JUST SAY NO**

This “rule” continues to be a classic piece of advice for our colleagues and friends. We propose: “You just need to learn to say ‘no’”; “Don’t spread yourself too thin”; “Don’t put too many things on your plate.” However, when you do say “no,” two things result: (a) those around you say no to you (leaving you high and dry in the future); and (b) if you say no, you no longer have a say in what happens next.

If you say “yes,” you remain relevant. Your “yes” can impact timing, future options, and, most importantly, make sure you are part of the way things unfold. In our profession, the moment you say no, you remove yourself from any valid stake in the outcome. The way forward is out of your hands. If you “just say yes,” you remain a component in how the situation advances and an idea takes effect.

**IF IT’S NOT BROKEN, DON’T FIX IT (OR ITS CORRELATE: DON’T REINVENT THE WHEEL)**

This adage is a tried and true piece of folk wisdom. You may hear colleagues use this opinion when they are trying to minimize shifting priorities. If something is adequate or okay, that is all that is needed. What a sorry acceptance of mediocrity. I am so glad someone reinvented the phone. My land line wasn’t broken, but fortunately somebody fixed it! Glass thermometers were accurate, but happily new technology has made them obsolete. Almost any model of nursing care can work; thankfully, new evidence-based approaches are emerging.

It is important to never “settle” but to always ask, “Is there more?”; “How can we make it better?”; “If our medication error rate is <4%, how can we make it 0%?”

Please keep reinventing the wheel!

**READY, AIM, FIRE**

This focus on planning can often be used to avoid taking action. Worrying about getting something “right” can cause total inaction. Sometimes you have to fire, then perfect your aim and attend to the readiness of you and your team. Using an action strategy of “fire, aim, ready” versus “ready, aim, fire” allows you to engage in “today’s best thinking” to tackle the problem at hand. It is an approach in which you
default to action, and when you act, you receive feedback that can adjust your thinking and planning. This is an approach that is constantly undergoing refinement.

Try it with your next new challenge: assemble the information; consider it; and then act, review, and refine. In other words, fire, ready, aim.

**KEEP YOUR PERSONAL AND PROFESSIONAL LIVES SEPARATE**

This is a mantra that I have heard repeatedly. As nurses, we are taught that we should not take our work home with us, and by the same token, family matters are to be left out of the workday. As I worked with patients, I realized that I had to think through not only what they were telling me, but my reactions to their situations. I had to learn to trust that my reactions were formed by the whole of me, not just my knowledge, but all my experiences, professionally and personally. Just as we are urged to focus on our patients’ thoughts and feelings, it is key to take the bold step to also focus on our thoughts and feelings and know that they are important and part of the therapeutic process.

Don’t spend time or effort compartmentalizing your life. Trust that bringing all parts together makes for a whole and more effective nurse. Clearly, your goals and what you glean from your professional and personal relationships are different, but the underlying you is not!

**CONCLUSION**

All too often we accept the musings of others. To be current and vital as a 21st century nursing professional, it is crucial to reassess and take full stock of the advice that is so easily transmitted. As you consider these “rules” of conventional wisdom, think about how you, too, might find meaning in breaking them.

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