What?

Breaking the Rules is a tool which helps you to identify unwritten assumptions, rules and thinking which determine how things currently work. You then generate creative solutions to old problems by breaking these rules.

This tool is best used when you want to try and find more innovative solutions to a problem, when an issue feels stuck and your initial efforts haven't worked, or when smaller incremental changes are not having an impact.

Why?

In complex systems like healthcare, many of our behaviours, beliefs and structures are underpinned by unwritten rules and underlying assumptions that we take for granted and may not even be consciously aware of.

These rules are fundamental to maintaining the status quo and can get in the way when we try to be innovative and creative. Our 'go to' solutions are likely to fit within existing structures. By making these rules and assumptions explicit and then deliberately breaking them, we can generate more radical, innovative solutions that address the problem in a different way.

How?

Like many creative thinking tools, Breaking the Rules is best used in a group setting with a framework that encourages as many people to contribute to the conversation as possible. It can be particularly beneficial to use a co-production approach in this exercise – patients, service users and partner organisations are outside of the system we work in and so can be particularly good at identifying underlying assumptions and questioning practices we may take for granted.

Sharing some examples of rules with participants to ensure they understand the key concepts can be helpful.

Examples of Rules

- Traffic in a city centre. Trying to describe the movement of individual cars would be enormously complex. But we all know that what is really going on is that individual drivers are just following a few simple rules regarding which side of the road we drive on, what to do when you approach a roundabout, the distance to keep from the car in front and so on.
- A common unwritten rule in health care is that "Patients must pass through low cost resources before gaining access to high cost resources". Talk this through in terms of who the patient first sees upon going to the GP surgery or A&E. Note that many A&Es have been innovative in putting a medically trained person closer to the beginning of the process in violation of this rule.
- Consider also giving the group you are working with an example that you think is an unwritten rule for their particular topic or system.

Want to learn more?

Breaking the Rules v1.0

www.youtube.com/watch?v=b5wHKr3AV50

1. **Define the problem -** Agree the problem statement or area of improvement that you will focus on. Try not to make the area of focus too narrow because this can constrain thinking and suggest a predetermined solution. It may help to reframe and broaden the problem statement using the phrase 'we want to think creatively about…..' For example, the problem, "Patients are complaining about long waits on our phonelines" could become, "We want to think creatively about how patients can get support from our service."
2. **Set the scene and agree ground rules –** Explain the context and purpose of the session to the participants. In addition to any ground rules that participants generate, introduce the following ideas which have shown to support creative thinking:
   • Criticism is ruled out **-** There are no bad ideas at this stage. There will be time to make judgements later.
   • Go for quantity over quality **-** 10-20 ideas are better than 3-4.
   • Encourage wild ideas **-** An idea that might sound wacky may provide a breakthrough insight.
   • Build on ideas of others **–** What else could we do? What can you add? What other ideas does it bring to mind?
3. **Explain what is meant by 'Rules' in this context -** Explain that 'rules' don't have to be explicit or written but can also include:
   • The way we do things around here or the way things have always been done.
   • Habits and assumptions that underpin how we work.
   • Administrative rules and policies.
   • External rules and legislation.
4. **Generate a list of 'Rules' in the context of the problem or change area you are focussing on –** Groups of between 4 and 8 people are optimal to stimulate engaging discussion. You can take a number of different approaches to identify these rules including:
   • Generating the through group discussion.
   • Referring to a process map and identifying any rules involved at each stage of the process.
   • Using patient stories, journeys or design personas to walk through your service and stop at each stage to identify underlying rules and assumptions.
5. **Creatively break the rules –** Generate different ideas which enable you to break each identified rule. It can help to question each rule by exploring what, who, where, when and how the rule could be broken.
6. **Review your ideas and identify which ones you want to develop further -** This can be done through group discussions, or by using a tool such as dot voting or six thinking hats.

Example

Problem Statement: There are not enough GP appointments available for the number of patients requesting care.

Reframed Statement: We want to think creatively about how patients can access help for their primary care needs.

Identified Rule	Ideas to Break this Rule
Patients must always ring for an appointment	Patients can book online
	Sit and wait clinics can be used for urgent appointments
	Patients can self-triage online
	Live chat could be used to communicate with patients
Most patients need to see a GP	Nurses act as the first port of call
	Patients complete a self-assessment online which is triaged by a GP
	Patients can self-refer directly to key services such as physio, mental health services, blood tests without needing to see a GP
	Self-care resources are made more widely available
	Appointments are held virtually or over the phone