

Broken Ankle and Beyond: Lessons for life and Project Management ^{1, 2}

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Abstract

Over 12 weeks of bedrest nursing a complicated ankle fracture, this physician was confined to strict bed rest with no movement. Her personal story of ankle fracture has been insightful to her in many ways. The recovery period lent her an opportunity to introspect. It has not only reinforced the author's belief in the healthcare domain as a healing instrument but guided her towards embracing values that in turn have shown her a path to a fulfilling life. She learned valuable lessons about life that can also take to heart in our careers as project managers.

Introduction

Over time, I have realized that life and the incidents that dot it have a definite purpose. Just as projects are meant to derive value, life (as a project in itself!) is meant to derive value for self and others involved.

I was going about my normal life on that rainy Sunday morning in early July—when I suddenly skidded and fell on the ground. One moment I felt like a galloping horse—and then in an instant was suddenly shot up with a tranquilizer, collapsing to the ground.

I sustained a complex fracture of my left ankle joint, one that involved both bones of my leg. I was operated on for over five hours the same day, then hospitalized for a week before being discharged. I was advised to take strict bedrest for 12 weeks (three months!) to ensure optimal healing. Already, the panicked questions were mounting in my mind:

- Will I walk normally again?
- Will I be able to fulfill my responsibilities toward my family, or will I be a burden on them, hampering their joy and growth?
- How will this affect my professional life going ahead?

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² Dr. Bhide has been a regular contributor to PMI's projectmanagement.com website about project management in health and medical practice. This story offers some lessons she has learned related to project management from both a physician's and patient's perspective. She provided a few photos to emphasize the personal nature of this experience.

- What will happen to the aspirations and expectations I have for my life?

These thoughts crossed my mind repeatedly, and I had no answers.

Over those 12 weeks, I was confined to the bed with little or no movement at all. Along with the healing, this period helped me relax both my mind and my body. Most importantly, it allowed me to know what I want from this life, a thought that I often ignore, knowingly or unknowingly.



In a world where everything (including project management as a process) is or is on the verge of being automated/managed by an application, the only thing that cannot be automated is “humanism” or how we operate as human beings. I urge the readers and project managers to envisage my reflections from this period as lessons we can all keep in mind in our careers as project managers and operate project teams for combined success.

Some Lessons I have Learned

1. Know what you want. The impact of my devastating fracture was here to stay. My medical brain knew that sequelae from the injury were a certainty. I was terrified that I would be paralyzed for the rest of my life. The feeling of total helplessness for days on end made me feel useless.

How many of us do a regular introspection? Think about it! Listening to my body was the first thing that I needed to do. I had to be brutally truthful to myself and learn to accept my physical limitations for the short and long term. My focus on short-term goals needed to change to come to terms with the long-term goal of my life. As a patient in agony, this was difficult to fathom as a patient. I needed to know how to manage my activities in this “new normal” of my life. This was not about lowering my aspirations, but rather being practical about them.



I also needed to exercise self-care more diligently. I had ignored my body’s cues, and perhaps like most of us do, had taken my physical and mental health for granted. This period of recovery allowed me to think about my

priorities. I created a list of all that I needed to do to stay healthy and ensured I had it on my mental and physical radar for taking the necessary actions.

2. Have patience! I am impatient by nature, and it was difficult for me to accept the mandatory 12-week period of bed rest. It meant my routine would be disrupted.

In the face of mounting resentment toward this forced rest, how could I remain patient? How would I be able to support my process of healing?

I had spells of uneasiness to deal with, and I tried not to get discouraged and frustrated during them. I was upset when those around me advised me to be patient. “How could they be so insensitive to my condition?” I thought.

Patience and belief are acquired by practice. It was a new skill for me to learn. I reasoned with myself about how getting flustered would hinder my progress. As I practiced remaining patient and learned to trust my beliefs, I realized I was able to do it. My feelings of bitterness and worthlessness were steadily decreasing. Visualizing the long-term goal wasn’t impossible. I tried to accept my experience at the moment and build a tolerance for being uncomfortable.

I practiced breathing exercises and mindfulness meditation to assist in positive coping with the situation. Shifting my focus from multi-tasking, I started to do one activity at a time. This not only helped me focus on the activity at hand but also cultivate patience. My belief in my instinct had a strengthening effect during stressful situations, and my positive acceptance of change also helped me improve my mental tenacity.

3. Seek happiness. What was happiness for me? Was rewarding myself with material things the only happiness I was experiencing? Is true happiness linked to those activities of instant gratification that put a smile on your face? As a patient in pain, I had forgotten about “happiness” as an entity.

I realized that my perceived happiness and actual happiness were very different things. The former was transient, and the latter more definitive and long-lasting. I had never given in-depth thought to this. While I knew happiness was the journey and not the destination, it was easier said than done.

With “happiness” now an essential component of my “new normal,” I realized that activities that made me truly happy were very simple. I did what was “right” in my mind. I decided to use my healing period as an opportunity to have some fun! For the short term, I thought of activities that would avoid putting pressure on my affected foot. I revived my singing, wrote articles, caught up on my favorite movies and shows, learned a new

language (French), and created a reading list. I also engaged in mentoring and coaching those who approached me.

I also wanted to be ready for the day when I would be able to walk normally. I dreamt about engaging in culinary experiments, travel adventures, and volunteering opportunities. The thought of re-engaging with these activities made me happy—and kept me motivated.

4. Adapting is key. Being bed bound, I realized that there was a sudden lack of structure and routine in my life. As a result, I often focused on the problem rather than the solution. That wasn't going to help.

I needed to learn new skills and behaviors to get back to my life—but adapting wasn't easy. Initially, the change didn't go well for me. Actions that I would deftly execute quickly were now taking an inordinately long time. I had to let go of my apathy.



I thought, that making small adjustments to my routine activities and behaviors would be a good place to start. For example, there were many adjustments I had to do to get through my activities of daily life (ADLs)—such as showering, dressing, using the toilet, eating, and so on.

I practiced cognitive reframing to change negative perceptions and ways to enhance my sense of accomplishment from these actions. I learned to appreciate and celebrate small

milestones, such as getting up on my own from the bed, using the walker, and so on. (I chuckled when I could get dressed on my own without asking for support for the first time!).

While 12 weeks was a reasonable time for healing, I also knew as a physician that healing as a process was multi-factorial and of variable duration. What if they extended my bed rest? What if the healing was below expectations?

I was facing a moving target. I needed to stay motivated to be able to adapt and move toward my goal.

5. Express gratitude. The fracture rendered me helpless and completely dependent on those around me for all of my activities. In such stressful times, support from family and friends is invaluable.

This group formed the backbone of my recovery. They not only provided physical support but also the required mental strength that I so desperately needed. I have immense appreciation for my family, and my near and dear friends who called on me and supported me throughout this journey of healing. It was important to let those people know how much I appreciated their help—and their friendship. It was also important to know that this group may get overwhelmed with the new set of responsibilities they now shoulder. They also feel helpless as they cannot fix your pain. It was important to acknowledge their emotions, be supportive of them and not take them personally.

I was astonished at the leaps medicine and surgical innovations have made over the past few decades. My ankle surgery involved using four titanium plates and 12 screws to reconstruct the fractured joint. The result of the surgery promised a near-normal recovery and range of movement.

I marveled at the skill of my surgeon and his team, and the support from the medical implant industry. I had sincere gratitude toward my fraternity, which had given me a “new” ankle and an opportunity to walk.

6. Ground with your ethics. Stressful situations are known to affect both ethical behaviors and the recognition of ethical dilemmas. My fracture was a perfect situation to test my ethics as I knew unethical behavior would be detrimental to my progress and outcome.

I’ve always used the [Project Management Institute’s Code of Ethics and Professional Conduct](#) as my reference point. The four values that define this framework are honesty, responsibility, respect, and fairness. These values are drivers of ethical conduct in the project management profession, and they governed my behavior. Being honest in facing

facts and potential risks around my condition and communicating the same to my supporting team resonated with honesty as one of the four values. Taking on the entire responsibility of my journey and outcomes, even in the face of physical and psychological stress demonstrated my application of responsibility. My respect was for the efforts, knowledge, expertise, and time of my medical team, my caregiver with family and friends, and those who helped me. Being fair to myself and others' expectations and demands in the face of an ambiguous, variable, and complex situation was my expression of fairness.

Conclusion

Taking each day and each moment as it comes was key as no two healing experiences, even in our bodies are the same. From a destroyed ankle joint some four months ago to walking on my feet at a near-normal pace as of late November, I have come a long way in my healing. The recovery is going to be a long process, but I have derived value in this stage of recovery. I still have months to get back to my full normal walk, but the worst is behind me, and it's time for celebration!



Best wishes for a safe and peaceful year end.

About the Author



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Dr. Deepa Bhide, MBBS, DCH, PMP has over 20 years of professional experience where she has blended medical practice and research with IT and Project Management. She juggles consulting, training, and operations, and is proficient in clinical medicine, project management, and healthcare information technology. Starting her career as a medical practitioner, she has worked with varied organizations before her current stint as a vice president – Research, with Cotiviti.

Her passion for IT and Project Management was born out of the day-to-day interaction that she had with her patients. Needless to say, Deepa's growing interest and work in these areas helped her view Project Management as a backbone of progressive healthcare. Her paper on "Patient Care - A Project Management Perspective" is a widely acclaimed one having received global recognition and acclaim. Deepa is an active contributor to PMI with her articles on a cross-domain confluence of Healthcare and Project Management. With a physician background as a solid foundation to leverage IT/PM skills and knowledge, Deepa has blended her broad-based experience and learnings to present a unified, holistic wholesome view of Project Management and Healthcare. Through various webinars, events, talks, and writings across platforms, Deepa has been an evangelist in championing global project management during the Covid-19 pandemic.

A Gold medalist from Osmania University for standing First in the MBBS course and also for Human Physiology, she went ahead to pursue her DCH in Pediatrics and Child health. Deepa is an active member of the PMI Pearl City Chapter with their volunteer initiatives. Deepa has served a variety of roles in local and global PMI regions. In the role of Council Lead for PMI's Healthcare Community of Practice for a period of 2 years (2013-15) and was involved in identifying, and mentoring volunteers, collaborating across geographies for knowledge assets. Deepa currently is a part of PMI's Ethics Insight Team, a global team of 8 volunteers for advocacy of PMI's Code of Ethics and Professional Conduct.

Deepa lives in Hyderabad, India, and loves to travel, sing and experiment with global cuisine. She can be contacted at deepabhide@gmail.com