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Classic grounded theory: identifying the main concern

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Abstract

Grounded theory comprises a family of research approaches designed to support the generation of a theory explaining a phenomenon experienced by a group of participants. One style of grounded theory, Classic grounded theory, is used less often than other types of grounded theory. The less frequent use of Classic grounded theory may be attributed to the limited availability of clearly articulated processes for conducting this method. Particularly important within Classic grounded theory, and not used in other forms of grounded theory, is identifying the participants' main concern. Identifying the participants' main concern is a signature feature of Classic grounded theory and is a prerequisite for ascertaining the core category and subsequent discovery of theory. In this article we provide a detailed explanation of how to identify the participants' main concern, and in so doing, we offer an exemplar to illustrate the process involved.

KEYWORDS

Classic grounded theory, main concern, methodology, nursing research

1 | INTRODUCTION

Grounded theory (GT) comprises a family of research approaches designed to support the generation of a substantive theory explaining a phenomenon experienced by a group of participants (Glaser, 1978). A substantive theory is a theory developed within a specific setting or context and is transferable to similar settings and groups (Holton & Walsh, 2016). The resulting theory is referred to as grounded, because it arises from participants' shared experience of a common phenomenon (Glaser, 1978, p. 116).

One style of GT, Classic grounded theory (Classic GT), is used less often than other styles of GT, possibly related to the limited availability of clearly articulated processes for conducting this method (Backman & Kyngäs, 1999; Rindell, 2009). A signature feature of Classic GT not used in other forms of GT is identifying the

participants' main concern (Vander-Linden & Palmieri, 2023). The main concern is the issue that becomes evident as the participants' problem in the substantive area of research (Holton & Walsh, 2016) and is a prerequisite for ascertaining the core category, which is the resolution for the main concern and the primary category for the developing theory. A well-developed understanding of the core category and its subcategories is the foundation of an enriched grounded theory, that explains how the study's participants resolve their main concern.

Considering Classic GT methodology aims to understand how participants resolve a main concern (Glaser, 1992, p. 22), one would anticipate a plethora of literature discussing how researchers set out to achieve this. However, there is a dearth of information available for Classic GT researchers to access and use as resources when identifying the main concern. This is an important deficit in the

No Patient or Public Contribution

What concerns registered nurses when using their clinical judgment with EWS?

[Correction added after first online publication on 26 March 2024: The word 'classical' has been replaced with 'classic' throughout the article, including in the title, in this version.]

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literature because the researcher's conceptualization of the main concern is integral to the subsequent development of theory that fits, works and has relevance, regardless of time and place (Glaser, 2002).

Novice researchers may struggle with identifying the main concern in their own research because of the complexity of the data analysis method (Timonen et al., 2018). Multiple concerns within the data are often identified during early coding and there is a temptation to funnel all the concerns into one singular concern—forcing the data towards an overarching concern rather than the main concern (Glaser, 1978). An invaluable tool and strategy that novice researchers must learn to undertake to avoid forcing the data is memoing (Glaser, 1978, p. 61). Memoing can be described as the theorizing write-up of ideas about the codes and their relationships. In this article we provide a detailed explanation of how to identify the participants' main concern when conducting a Classic GT study. To assist in clarifying the open coding process of Classic GT, an exemplar is provided and will be referred to throughout the paper as a means of illustrating key points of the method, specifically to identify the main concern.

2 | EXEMPLAR STUDY

The parent study informing the exemplar within this paper employed Classic GT methodology to develop a theory explaining registered nurses' use of Early Warning Systems (EWS). Nurses have a crucial role in monitoring and documenting patients' vital signs and other physiological measurements (Danesh et al., 2019) because when deterioration is recognized early, severe adverse events may be avoided (Flenady et al., 2020). The new theory explains registered nurses' behaviors when they balance the use of their clinical judgment skills with the adherence to, and application of, EWS in practice. EWS are designed to identify hospitalized patients' clinical deterioration. The system guides clinicians to allocate scores to patient's physiological irregularities, identified when vital signs are collected. If the aggregate score reaches a predetermined threshold, clinicians are prompted to follow EWS escalation protocols, facilitating appropriate and timely treatment. This manuscript reports on one component of the parent study and will describe the methods utilized by the research team to identify the main concern of the participants. The population for the parent study was practicing registered nurses who engaged with an EWS vital sign observation tool in their day-to-day role when providing care for patients in public hospitals throughout Queensland, Australia. We conducted semi structured interviews with 20 registered nurses over 6-months, using the grand tour research question 'How does clinical judgment influence registered nurses' use of Early Warning Systems'. A grand tour question is an open-ended broad question used to initiate a discussion or exploration of a particular topic. Grand tour questions enable participants to provide comprehensive and detailed accounts of their experiences, perspectives, or knowledge related to a specific topic (Spradley, 2003). The exemplar is based on data from

participant interviews, but the assumption is not made that all GT research is conducted this way, as it is possible to use GT with a range of different materials and data sources (Glaser, 2007, p. 1). Ethical Approval for the parent study was obtained from Central Queensland University Australia Human Research Ethics Committee (No: 0000020925).

3 | GROUNDED THEORY

Grounded theory (GT) is a universal research methodology that can be undertaken using three primary approaches: Classic, Straussian, or Constructivist GT (Birks & Mills, 2015). The purpose of GT is to develop a theory about a phenomenon of interest which is grounded in data that has been systematically collected and analyzed (Glaser & Strauss, 1967). A grounded theory is discovered through a process of developing an understanding of participants' experiences, as well as by explaining how participants make sense of their perceptions and actions (Singh & Estefan, 2018). Originally developed and used in sociology (Glaser & Strauss, 1967), GT has grown in popularity and is now utilized by researchers across numerous disciplines (Birks et al., 2019).

GT is a popular research methodology within the discipline of nursing because it provides an ideal platform to understand, develop, and utilize real-world knowledge about concerns or questions in the healthcare environment (Singh & Estefan, 2018). Nurses require new knowledge to address the challenges of meeting the dynamic health care needs of society (Singh & Estefan, 2018). Studies using GT generate new nursing knowledge derived from real interactions with stakeholders as well as other key elements of nursing practice.

There are certain essential methods of any GT study, including simultaneous data collection, coding and memo writing, the use of the constant comparative method, theoretical coding, theoretical sampling, theoretical saturation and the importance of theoretical sensitivity (O'Connor et al., 2018). Whilst different styles of GT share many core terms, some terminology is used to describe different processes specific to the style of GT applied (O'Connor et al., 2018). A glossary of qualitative terminology is illustrated in Table 1 with signature Classic GT terms highlighted.

Despite sharing a number of the original methodological techniques, Classic, Straussian, and Constructivist GT are distinct strands of GT methodology (Charmaz & Thornberg, 2021), each distinguished by diverse philosophical frameworks and differing methodological processes (Table 2). One of the most recognizable difference in the three styles of GT is found in the coding procedures (Kenny & Fourie, 2015) and how theory is thus developed; Classic GT discovers theory, and can be described as making known something that has always existed but has been unknown (Cambridge University Press, 2023). Straussian GT creates theory, that is, makes something new that did not exist before. Constructivist GT builds theory by combining or arranging parts of something to become a form or a whole (Cambridge University Press, 2023). Other defining characteristics of the styles are illustrated in Table 2.

TABLE 1 Glossary of Qualitative Terms with signature terms relating to Classic grounded theory.

Terminology	Qualitative Terms	Classic Grounded Theory Signature Terms
Categories	Categories are the abstraction of concepts to form patterns.	
Constant Comparative Analysis (CCA)	Constant Comparative Analysis is a strategy for directing the collection and analysis of data in tandem with theoretical sampling as a means of guiding the direction of further theoretical sampling.	
Core category	The core category is the primary category to the theory. It can be described as the resolution to the main concern.	In Classic GT the main concern will be resolved, managed or processed by the core category.
Field Notes	Field notes are <i>in the moment</i> notations of incidents that may indicate potential concepts. In this exemplar these notes were taken during the interview.	
Incident/Code	Incidents or codes are generated during coding, initially in the open coding process. During CCA incidents are compared to generate concepts that form categories.	
Main Concern		The main concern is identified from the coded data as the participants' shared problem in the research setting. In Classic GT the main concern will be resolved, managed or processed by the core category.
Memos	Memos are the theorizing write-up of ideas about the codes and their relationships. Theoretical sampling and memoing happen concurrently.	
Open Coding	Open coding is the process in which segments of data are given conceptual labels to denote the concept they represent.	Open coding is the initial process of substantive coding in Classic GT. The participants' main concern is identified and the core category is discovered in this stage. The researcher only moves to selective coding following the discovery of a core category.
Selective Coding		Selective coding is the intermediate process in Classic GT. Coding is delimited to data collection and analysis concerning concepts associated to the core category and related categories. With Classic GT the literature review can now be undertaken after the identification of the core category.
Substantive Coding		Unique to Classic GT, substantive coding consists of two coding processes: Open and Selective.
Substantive Grounded Theory		A grounded theory developed within a specific setting and context, that is transferable to a limited number of similar settings or groups.
Theoretical Coding		Theoretical coding is the advanced and final stage in Classic GT. Specific to Classic GT, emphasis is on first identifying the relationship between the categories and the core category and then identifying the relationships between categories.
Theoretical Coding Families		Theoretical coding families are groups of sociological concepts that aid in theoretical coding. Classic GT encourages exploration of the wider literature to become familiar with a variety of theoretical codes to support developing knowledge of theory building, to aid in the final discovery of the theory.
Theoretical Sampling	Theoretical sampling is a means of focusing data collection.	Theoretical sampling is the process of data collection for generating theory whereby the analyst jointly collects, codes and analyses the data and decides what data to

(Continues)

TABLE 1 (Continued)

Terminology	Qualitative Terms	Classic Grounded Theory Signature Terms
		collect next and where to find it, to develop theory as it emerges.
Theoretical Saturation	Theoretical saturation is reached when new data are no longer yielding new concepts and are not elaborating on properties and dimensions related to the core category, Saturation can be said to have been reached.	
Theoretical sensitivity	Theoretical sensitivity is the capacity to acknowledge researchers' underlying assumptions in an area being researched, to facilitate meaning from the data.	Theoretical sensitivity means that through data gathering and analysis, researchers are able to "discover" relationships between their categories that lead them to construct a grounded theory that fits, works with, and is relevant to, the field under study (Glaser, 1978).

(Glaser, 1998; Glaser & Strauss, 1967; Holton & Walsh, 2016; O'Connor et al., 2018; Simmons, 2022).

TABLE 2 Styles of Grounded Theory and their Characteristics.

	Classic GT (Glaser & Strauss, 1967)	Straussian GT (Strauss & Corbin, 1998)	Constructivist GT (Charmaz, 2006, 2014)
Coding	The Classic GT coding procedure is underlined by the principle of the natural emergence of a theory to be discovered from the content of the data.	The Straussian GT coding procedure is a systematic process to create a rigorous theory which closely corresponds to the data	The Constructivist GT coding procedure is a flexible framework, with adaptable coding guidelines which construct theory through interpretive engagement with data
Contemporary Philosophical Paradigm	Post-Positivist Integrative	Interpretivist	Constructivist
Epistemology	Conceptually Objective	Pragmatic	Subjective
Implementation	Promotes adherence to rigorous, fundamental processes	Provides a set of tools that may be used, rejected, or ignored	Highlights flexibility within the process; resists mechanical application
Ontology	Realist (what is real to the participants)	Interpretivist	Constructivist
Outcome	Transferable theory that transcends time and context	Subjective theory dependent on time and context or descriptive non-theory	Subjective, descriptive theory dependent on time and context
Philosophical origins	Traditional Positivism	Post-positivism	Relativism
Positioning the literature	Literature should be consulted once the theory is discovered and is the final step of constant comparison.	Acceptable to introduce literature at any stage of the analysis, from conception to conclusion.	Literature is an acceptable inclusion from beginning to end of analysis.
Purpose and Aims	Abstract theory and meaning. Theory that provides explanations for behaviors	Abstract theory or gain in-depth understanding	Abstract theory and in-depth meaning
Researcher Role	Observer	Interpreter	Integrated Co-Constructor - interactionalist
Theory Development	Discover theory through a substantive and theoretical coding process	Create theory through an open, axial and selective coding process	Construct theory through an initial and focussed coding process

(Charmaz, 2006; Charmaz, 2014; Glaser & Strauss, 1967; Strauss & Corbin, 1998).

3.1 | Classic grounded theory

Glaser and Strauss published the first textbook on grounded theory in 1967. Over subsequent years the way to do grounded theory

diverged and Glaser and Strauss's original explanation (1967) began to be known as the "Classic" way to conduct GT. Glaser and Strauss described grounded theory as "the discovery of theory from data, systematically obtained and analyzed in social research" (Glaser &

Strauss, 1967, p. 1). For the purpose of a Classic GT study, Glaser states “all is data”, meaning data is what the researcher has collected to analyze and conceptualize using CCA (Glaser, 2007, p. 1). On the premise that systematic qualitative analysis could generate theory from data, Classic grounded theory (Classic GT) allows for discovery of theory, not just verification of a hypothesis (Glaser & Strauss, 1967). Observation is an important source of data in Classic GT (Holton & Walsh, 2016) and the researcher role is that of an impartial observer discovering data whilst maintaining a neutral mind during the process (Glaser & Strauss, 1967).

Data analysis in Classic GT methodology is founded on two primary coding methods, substantive and theoretical coding (Holton, 2010). Substantive coding consists of open and selective coding, where the researcher breaks down and analyses raw datum until no new codes become apparent. Codes are grouped together into categories, and properties are then identified that “make sense” or “explain” the categories (Glaser, 2001; Holton, 2010). During the process of coding the researcher conceptualizes early patterns of behavior. These early observations provide the researcher with insight into the participants' main concern.

Theoretical coding analyzes how the substantive codes relate to each other to allow the discovery of theory (Hernandez, 2009). Each of these coding methods have elements essential to the discovery of theory grounded in the data, but importantly, open coding facilitates the identification of the participants' main concern, the problem that the substantive theory will resolve.

3.2 | The main concern

The main concern is identified as the issue that is evident across the coded data as the participants' shared concern (Holton & Walsh, 2016). Artinian et al. (2009, p. 50) asserts the main concern is the prime motivator of participant behavior in the substantive area of interest. These behaviors form patterns that facilitate the identification of the core category and its sub-categories to explain how participants resolve their main concern. The main concern is identified by the constant comparison of data during open coding (Rindell, 2009). The theory derived from a Classic GT study provides a conceptual explanation of how participants resolve their main concern (Artinian et al., 2009; Glaser, 2001). While Andrews et al. (2017) contends the main concern should not be known in advance and must be identified during the substantive open coding process, there is an absence of literature explaining how to achieve this goal. The paucity of published literature explaining the main concern renders Classic GT abstract, difficult to interpret, and challenging for researchers new to Classic GT to understand.

An examination of published studies that used Classic GT methodology revealed various method-related incongruities where authors strayed from Classic GT methods. Divergence from Classic GT methodology included instances where the main concern was not identified during open coding, but rather, was preidentified by researchers before data analysis commencing (Bylund et al., 2017;

Lopez & Robbins, 2022). There are instances of authors referring to the main concern as the core category (Martin et al., 2022; Shannon, 2011). According to Glaser, how participants resolve their main concern is recognized by the researcher and articulated as the core category (Glaser, 1992). The various interpretations of the main concern mentioned here, and elsewhere, demonstrate researchers' failure to understand the role of the main concern in Classic GT or its importance in determining the core category. Despite this ambiguity, many authors (Chulu, 2015; Flenady et al., 2017; Hickey et al., 2021; Jagiello, 2019) highlighted that the main concern was identified throughout the substantive coding stage. They did not, however, provide a clear explanation of how this process occurred. Glaser (1998) states that illustrating how researchers identify the main concern is an important factor that increases readers' understanding about this essential stage in Classic GT. Yet despite Glaser's recommendation, very few authors explain the process they employ to identify their participants' main concern.

Recognizing the lack of clarity around this important step in Classic GT, we aimed to develop a simple guide to support future Classic GT researchers to identify participants' main concern. The importance of having a guide for all researchers, particularly novice Classic grounded theorists, is that it offers less uncertainty around the articulation of the ‘main concern’ and the overall identification process. Further, access to a guide improves the rigor of GT research and promotes Classic GT as a methodology that can be used to explore complex clinical phenomena. We draw on an existing study as an exemplar to demonstrate the process of moving from coding, to conceptualizing the data through to constant comparison and finally identifying the main concern (Connor, 2019).

4 | THE PARENT STUDY TO INFORM THE EXEMPLAR

The parent study, informing the exemplar within this paper, employed Classic Grounded Theory methodology to develop a theory explaining registered nurses' use of Early Warning Systems (EWS). Specifically, to explain registered nurses' behaviors when they balance the use of their clinical judgment skills with the adherence to, and application of, EWS in practice.

5 | IDENTIFYING THE MAIN CONCERN

In Classic GT methodology, the process of identifying the participants' main concern begins at the point of initial data collection and involves open coding, conceptualization of the data and constant comparison methods (Holton & Walsh, 2016). The core category is identified via continued analysis of data and a substantive theory is discovered only once the main concern is correctly identified. Despite this, there exists various conflicting explanations of the “main concern”, both confirming and contributing to the confusion surrounding the term (Hickey et al., 2021; Martin et al., 2022; McCoy

& Stillman, 2021). The process required to identify the main concern is crucial as it is arguably the most important step in the Classic GT method and is most certainly the foundation on which patterns of behavior are searched for and then explained (Glaser, 1998).

Once data collection begins, open coding commences immediately, with the aim of recognizing pieces of datum, often referred to as incidents. Open coding is the process where line by line, sentence by sentence, and paragraph by paragraph, the data are coded by incident of interest (Glaser, 1992). There is an absence of concept at this stage, meaning there is no predetermined understanding of what the data will reveal. However, incidents are indicators of concepts within the data, so the researcher remains open to any and all viewpoints that may be unfolding in the data (Holton & Walsh, 2016). It is usual that multiple incidents present themselves as each datum is studied, and it is not uncommon to accumulate a substantial list of incidents (Connor, 2019; Holton & Walsh, 2016).

Each time an incident is identified, conceptual consideration of what the participant meant when they were responding at this part of the interview is required (Holton & Walsh, 2016). This is an important and often neglected action when considering early data. Conceptualizing from the very start of the coding process is crucial, as Classic GT research at its core, is the study of abstract problems and their processes (Glaser, 1992; Martin & Gynnild, 2011). Incidents are indicators of concepts within the data and are usually coded as gerunds—words that describe an action and end in “ing” (Simmons, 2022) This is significant, because what the researcher is considering in the data is the main concern of the participants relating to the area that is being investigated, and it is these actions and behaviors that explain and ultimately resolve the identified main concern (Breckenridge, 2014).

Also of consequence is the use of memos and field notes which aid in the identification of the main concern according to Khademi et al. (2017). Khademi et al. (2017) explain that they ask the data “What is the main concern of the participants?” and “How has this concern been resolved?” during the coding process and record their concepts as memos. Similarly, researchers systematically evaluate the data to seek participants' concerns. Often during this activity, thoughts around the information coming forth are journalled and these are the memos Khademi et al. refer to. Once memos are sorted during the coding process, the identity of the main concern becomes more evident as memos are considered the mortar between the bricks of datum that build theory (Chun Tie et al., 2019). Memoing continues throughout coding stages and aids in the identification of the core category.

Table 3 provides a working example, using the first six participants from the parent study, to reveal how open coding was used to move from transcribed data and memos/field notes to coded incidents. As noted earlier, the research question for the exemplar study presented in this paper was “How does clinical judgment influence registered nurses' use of Early Warning Systems?”. In this

example, the coded incident, “working autonomously,” emerged from the data, field notes, and memos.

5.1 | Example of open coding process

Incidents were coded as they were conceptualized as displayed in Table 3, for example, RN1 stated early in their interview that “*if the patient is scoring this value [on the early warning score documentation], it could be for one of many reasons (values relate to difference measurements on the tool), but I'm not concerned. I just have to notify the team leader as per protocol*”. This is because the documentation includes an escalation protocol that outlines actions for clinicians to initiate when early warning scores reach certain thresholds (Flenady et al., 2020). At this stage the team leader now shares accountability for what happens next for a patient's care. This incident related to the fact that nurses are mandated to use an Early Warning System (EWS) vital sign observation charting tool when practicing. This incident was allocated to the early code of *complying*.

Similarly, RN1 also stated “*I always maintain that I love using EWS, for me it does pick up and identify deterioration*”, this incident was allocated to the code of *valuing*. As the code incidents continued, comparing back and forth between the concepts that were developing, it was found many participants were explaining the same or similar incidents with the same or similar viewpoints that were conceptually related to the same code.

Using the examples of complying and valuing, participants raised concerns about valuing their clinical judgment alongside the EWS tool they are mandated to use. Eventually these two codes were grouped together under the singular code of valuing. On completion of coding the first six interviews, hundreds of lines of incidents were generated and through constant comparative analysis were conceptualized within 23 initial codes (Table 4.)

5.2 | Theoretical sensitivity

Theoretical sensitivity is a key concept of GT methodology and is described by Glaser and Strauss (1967) as the researcher's capacity to conceptualize and formulate a theory from collected data. It is crucial to Classic GT that one's personal perspectives or assumptions do not impact on the researcher's interpretation of the data (Holton & Walsh, 2016). Glaser and Holton (2004) assert that open coding enables researchers' theoretical sensitivity and facilitates opportunities to generate codes that fit and work. The risk of polluting concepts is highest once categories start to form and researchers must be diligent to maintain theoretical sensitivity. The activity of memoing at this stage of the process increases the researcher's theoretical sensitivity to the data (Glaser, 1978). For example, during the early stage of open coding in the exemplar, an incident was identified whereby the junior registered nurse (RN) said the EWS

TABLE 3 Example of open coding, field notes and memos from the exemplar.

Interviews 1-6 Open Coding of Incident (one)	RN 1	RN 2	RN 3	RN 4	RN 5	RN 6	Early field notes and Memos about this code
Working autonomously in the role of RN	Going through university, it (EWS) was already rolled out when I started so it was easy for me to jump on board	I like further assessments. Like if the respiratory rate is elevated but they are lying flat, I'll prop them up and see if that helps with shortness of breath and respiratory rate...	In our department we are all clinical nurses, so we work autonomously	I am using the tool (EWS) to make clinical decisions and assess my patients.	In the fast-track area, we get a lot of people who do the observations and do not write any numbers down. Usually because it is a zero but it is still not being completed	My own personal practice, we use the EWS tool on every single patient.	Early career nurses have been educated with EWS and EWS tools—they apply the scoring of the tool to support and learn about their patient—more senior staff use the tool but are not as compliant with the tool as they see their experience out-values the tool. They may not make a clinical decision based solely on the tool - they would place higher value on their clinical judgment than the tool.
I have always had the EWS I don't know any different	You have to listen to your patient and use extended assessment skills.	But it could say "notify medical officer (MO) if applicable or concerned". Then that allows me to decide whether I want to call a MO if I am concerned.	They would rather deal with things themselves, than escalate to medical emergency team (MET) their team.	Accepting attitudes of the other staff member who said that it has been like that for the whole shift. That seems to be a very common reasoning	We are (compliant), because we are in emergency and we have such close proximity to doctors and a higher proportion of team leader and all of our very senior doctors are literally right next to us,		Role modeling ... type of support or nurturing for other staff—a safety net strategy? The autonomous role of the registered nurse (RN) plus the years' experience in nursing—do they trust in the senior more experienced RNs CJ? RN role and their own experience and training tells them to assess the immediate threat/problem—CJ is utilized to do this
With their clinical experience they are more comfortable with sitting on someone who is scoring a 4 and not notifying a doctor. Whereas I am not. I do not have that clinical experience and I do not feel comfortable doing that	He (the patient) scored 8 to an E all night. They never called the MET call on him. Because...he was sick, he was not going to get better overnight	In the emergency department (ED) it is just really unfortunate that nurses are so thin on the ground. They do not have the time or capacity to focus to use the form (EWS) to its best capacity				If I am honest, in emergency, from the escalation perspective using clinical judgment (CJ) we would, we basically (would) not follow the strict escalation	
That can be detrimental to your registration and that is always in the back of my mind.			Certainly, there will be people who do not bother to do a blood pressure. Because they do not think it is			I do not want nurses to think, I have scored it a 4 and I have passed it onto the doctor and think it's	

(Continues)

TABLE 3 (Continued)

Interviews 1-6 Open Coding of Incident (one)	RN 1	RN 2	RN 3	RN 4	RN 5	RN 6	Early field notes and Memos about this code
				relevant to the patient. I want them to have a healthy respect for life, and how big their role is in keeping people alive and I do not think they take that seriously enough. I think they think someone else is responsible. "Oh well I told the shift coordinator", "oh well the doctor saw and they didn't notice", but yeah, it's your job to notice.			their responsibility to fix it. I want them to be thinking why they are scoring a 4 and what can I do about it to improve this 4 before going straight to my doctor and going "look this is your problem"

TABLE 4 List of original 23 open codes from exemplar.

How does clinical judgment influence registered nurses' use of Early Warning Systems?		
Working autonomously	Training	Reflecting
Nursing environment	Ensuring	Dumbifying
Complying	Timing	Advocating
Valuing	Justifying	Offending
Experiencing	Intuitive/Heuristics	Understanding
Trusting	Rationalizing	Prompting
Supporting	Prioritizing	Empowering
Thinking	Knowing	

provided a safety net to support their decision making. A memo about trust in the EWS and how that supported this junior nurse's clinical practice was written to reflect this potential code. Similarly, a senior nurse also spoke of the EWS being used as a safety net for making judgments and the memo written about this incident recorded the senior nurse's lack of trust in the tool. The sensitivity to the incidents allowed conceptualization of the data and formulation of abstract meaning from the data. Theoretical sensitivity increases throughout a project and the more it is practiced the better equipped the researcher is to answer the question about what is happening in the data.

5.3 | Process involved when identifying the main concern

Constant Comparative Analysis (CCA) is a strategy for directing the collection and analysis of data in Classic GT studies. During CCA, data collection and data analysis continually inform each other in an iterative process called theoretical sampling (Holton & Walsh, 2016, p. 210). It is the continual comparison of incident to incident, incident to code, code to code, code to memo, that makes meaning of the data and highlights participants' main concern. The researcher's identification of participants' main concern leads them to identify patterns of behavior that explain how the participants resolve their main concern (Chametzky, 2016). Figure 1 illustrates the CCA which continues throughout the open coding process, resulting in the identification of participants' main concern and the subsequent development of the core category.

5.4 | Applying parent study to illustrate how to identify the main concern

In the exemplar study, coding the data identified the concerns nurses were experiencing. Registered nurses (RNs) expressed their desire to use the full range of their clinical skills when assessing patients' and

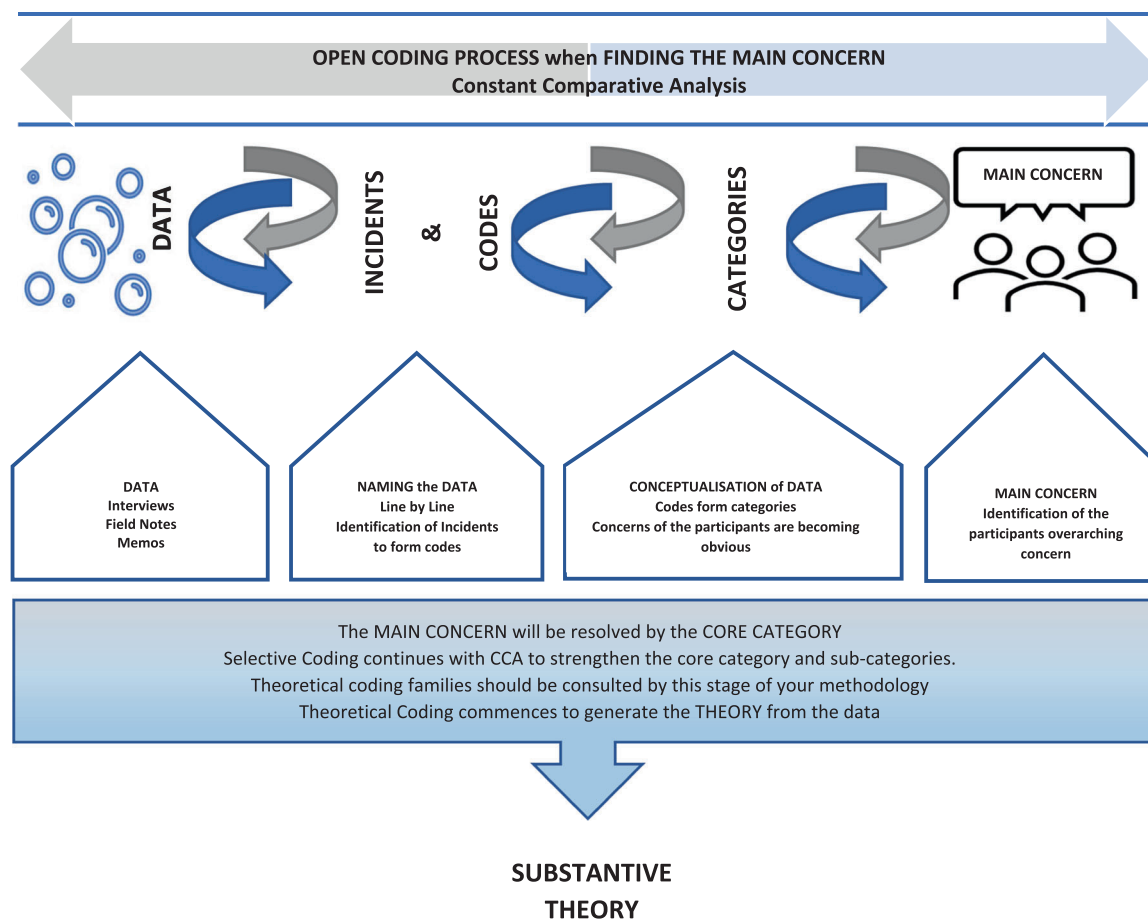


FIGURE 1 Identifying the Main Concern in a Classic Grounded Theory.

they did not want to rely solely on the values of EWS to inform the care and treatment they deliver to patients. RNs do not want the numerical values of EWS to override their clinical judgment when providing care for a patient nor when justifying escalating care for a patient.

Whereas these concerns were evident and validated from the resultant coding of the data, recognizing these concerns as different to the main concern is an important distinction. The main concern is identified as the overarching concern that incorporates *all* the recognized concerns (Glaser, 1992).

Glaser (1992, p. 21) states the main concern will be identified during open coding, identifying the manner by which the participants continually process and resolve the concern. Analyzing participants' patterns of behavior as they process their concerns when asked *How does clinical judgment influence registered nurses use of Early Warning Systems*, helped in the recognition of the main concern. The resolving process the participants used indicated the main concern more clearly and we were able to recognize that the participants' main concern was **"Compliance with EWS is sometimes incongruent with nurses' use of clinical judgment"** (Fig. 2). This was a crucial moment because identifying the main concern alerted the researcher to the problem participants were trying to resolve. The next steps

involved the researcher identifying participants' patterns of behavior when they resolved their main concern, which is the fundamental process when discovering a grounded theory (Holton & Walsh, 2016).

Identifying the main concern allowed exploration of all the categories in relation to how they interact when resolving this concern (Holton & Walsh, 2016). Participants often experienced tension when complying with the EWS tool AND trusting their clinical judgment and this was evident in the data. The mental discomfort participants described throughout the first six interviews could be described as cognitive dissonance. Cognitive dissonance refers to discomfort resulting from holding conflicting beliefs, attitudes and perceptions (Harmon-Jones, 2019). This produces a feeling of mental discomfort leading to an alteration in individual's attitudes, beliefs or behaviors to reduce discomfort and restore balance. When there is an inconsistency between attitudes or behaviors (dissonance), individuals take action to reduce the extent of their dissonance (Harmon-Jones, 2019). Once it was understood that the identified main concern triggered feelings of cognitive dissonance within the participants, the data were revisited and selective coding commenced. Focus then shifted to identifying the behaviors the participants used to resolve the main concern and assuage their cognitive dissonance.

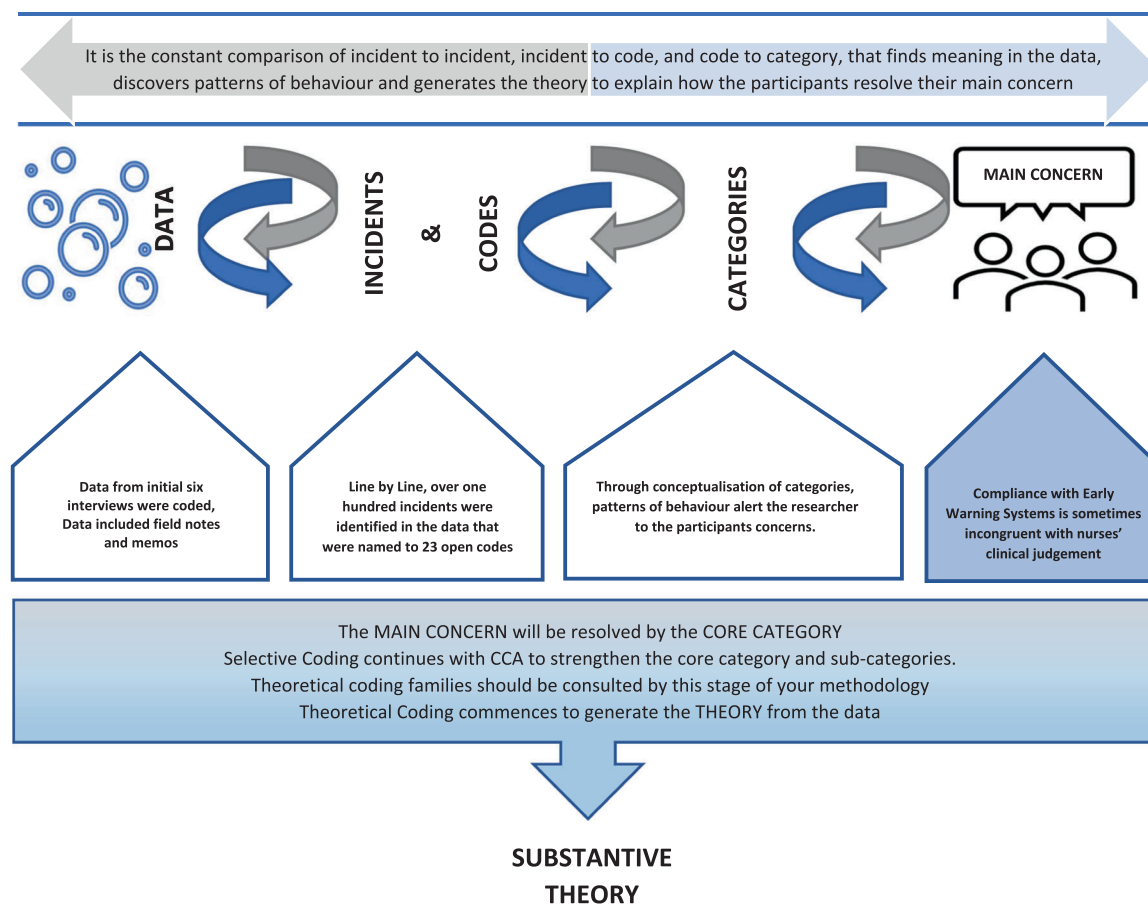


FIGURE 2 Exemplar applied—Identifying the Main Concern in a Classic Grounded Theory.

6 | CONCLUSION

Considering Classic GT methodology's emphasis on understanding how participants resolve a main concern, there is a deficiency of available information explaining the process and procedures involved with identifying this important element. Further, researchers employing Classic GT have been challenged to find published guides to inform their understanding when identifying the main concern. In this manuscript we offer a detailed explanation of how Classic GT methods are applied to identify participants' main concern for the purpose of supporting future GT researchers. By using this guide, Classic GT researchers will be able to apply a systematic process to recognize their study's participants' main concern. The resulting theory will exhibit a well-developed understanding of the core category and its subcategories and an enriched grounded theory that explains how the participants resolve their main concern.

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AUTHOR CONTRIBUTION

The authors confirm contribution to the paper as follows: Justine Connor and Tracy Flenady contributed to the study conception and Justine Connor, Tracy Flenady, Deb Massey, Trudy Dwyer all contributed to the study design, as well as the manuscript preparation. All authors contributed to the final version of the manuscript.

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DATA AVAILABILITY STATEMENT

Data available on request due to privacy/ethical restrictions

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