Grounded theory

Effective mentoring is key to enhancing practice and developing the next generation of nurses

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Deborah Raines

College of Graduate Health Sciences, AT Still University, Kirksville, Missouri, USA

Correspondence to: Dr Deborah Raines, College of Graduate Health Sciences, AT Still University, Buffalo NY 14068, USA; deborah.raines.phd@gmail.com

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Implications for practice and research

- ▶ Provides insight into the outcomes of the mentoring relationship from the perspective of the mentor.
- ▶ Identifies perspective on how to create workplace environments conducive to mentoring relationships.
- ▶ Outlines the mentors' insight into the needs of persons' transitions to new roles.

Context

Mentoring is used in a variety of professional settings. New graduates entering a professional field of practice as well as established nurses moving into a new practice setting or a new role may receive mentoring as part of the role transition process. A review of the literature includes descriptions of formal and informal mentoring as well as the description of mentoring in the role transition process. The goal of the study by Hale and Phillips was to develop a theory to address the processes involved in nurse-to-nurse mentoring relationships.¹

Methods

Using a grounded theory approach, Hale and Phillips explored the experience of protégés in a mentoring experience. Fifteen volunteer participants were recruited from a professional organisation's website and the researcher's professional network. The participants were diverse in age, years of experience and educational level. Interviews by the researcher were conducted in a private setting and were audio recorded. The interview started with the broad question. 'Tell me about your experiences as a protégé in a mentoring relationship.' The interviews lasted from 40 to 90min and were professionally transcribed. Data collection and analysis were iterative processes using constant comparative method, coding and memoing. Theoretical saturation was achieved at the 12th interview and confirmed at the 15th interview, marking the end of data collection. The primary researcher completed the data analysis and the second author was a peer debriefer.¹

Findings

The study's goal was to conceptualise mentoring from the perspective of the protégé. The main finding was labelled 'confidencing', and consisted of five sequential phases: seeding, opening, laddering, equalising and reframing. Confidencing was further defined as internal or what the protégé knows about themselves and external or what others know about the protégé's

ability to perform the professional role. Three dimensions of the mentoring relationship which span all phases of confidencing were identified as earnest intentions, filial bonds and trustworthiness.¹ These findings culminated in the theory of Mentoring up.

Commentary

The process of transitioning into a new professional field as well as the transition to new areas of practice and new roles within a professional field is an important area of study. Failed transitions are costly both to the organisation and to the individual. This study used a grounded theory approach with the intention to develop a theory focused on nurses-to-nurse mentoring relationships. The study culminated in the theory of Mentoring up which is described as the process of resolving the protégés' concern in the mentoring relationship which was confidencing. The theory of Mentoring up consists of five sequential phases and three major dimensions which span all the phases. A figure of the theory illustrates the relationship of these elements.

A strength of the article is the sharing of detailed tables illustrating the data analysis process and providing an opportunity for the reader to assess the trustworthiness and reproducibility of the analysis procedures. Detailed explanation of the bridge from the design and implementation of a qualitative research study to the conceptualisation of a theory provides insight into the process and theory development process.

An area of concern is the lack of differentiation among the terms mentoring, precepting and coaching. These are discrete terms in the literature. Precepting is time limited and assigned within the work environment, for example, nurses transitioning from the student to the registered nurse role or nurses moving from one area of practice to another area of practice.² Mentoring is a chosen relationship that endures over time and leads to professional growth for both the mentor and the mentee.^{3,4} Coaching may be formal or informal and occurs in staged phases and is a process of progression from novice to expert. The literature recognises that nurses initially gain experience through preceptorship and then continue to grow professionally through coaching and mentoring.²

Mentoring in nurse-to-nurse relationship is important for developing the next generation of nurses and for supporting experienced nurses during role transitions across their career. While the theory of Mentoring up would benefit from testing and further refinement, including the perspective of the mentor, it is a strong starting point to provide a foundation for a critical professional responsibility in nursing. This study is of interest to administrators focused on growth of a professional staff and retention of staff as well as to educators who are preparing and launching students into new roles within a professional environment.

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