Emotional Intelligence: Tips for HPNA Nursing Leaders

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Disclosures
Elizabeth Freitas has no real or perceived conflicts of interest that relate to this presentation.

Objectives
1. Compare how emotional intelligence differs from traditional intelligence
2. Describe the components of one Emotional Intelligence (EI) Framework
3. Describe the current literature regarding emotional intelligence and nursing leadership
4. Describe how emotional intelligence is relevant to Hospice and Palliative Care
Rethinking Thinking

- Traditional measures of intelligence do not correlate with
  - Workplace performance
  - Career success
  - Life satisfaction
  - Wellness parameters

Intelligence: Traditional view

- Equals cognition (linear analysis)
- Ability fixed at birth
- Not substantively changed throughout life
- Measurable with short multiple choice tests
- Exists in opposition to emotions
- Resulted in multibillion dollar (US) “achievement” testing industry

Issues with traditional view

- IQ has zero correlation with life success
- SAT scores:
  - Designed for freshman year only; don’t correlate with grades
  - Don’t correlate with professional success
  - No correlation with life satisfaction
- Ethical problems
- Multiple choice problem
What is intelligence?

- Prior to 1900:
  - Intelligence fixed at birth
  - Determined by family
  - Not changeable
- 1920 Thorndyke: social intelligence
- 1940's & 1950's Weschler: influence of non-intellective factors
- 1980 Howard Gardner: Multiple intelligences

Theory of Multiple Intelligence (Gardner)

Nontraditional view of intelligence

- Unique profile of each person at birth (influenced by culture)
- Intelligence changes over time
- Can not be measured by short, multiple choice answers
- Individual profile influences learning
- Social/emotional abilities are part of intelligence
1980’s: Emotional Intelligence

- Models of concept
  - Ability
  - Mixed
  - Trait
- Psychology
- Business applications
  - American Express
  - Johnson & Johnson
- Hundreds of research studies

Workforce impact from EI perspective

- Better attendance*
- Less work stress*
- Greater career success*
- Lower burnout rates*
- Prosocial behaviors*
- Positive conflict skills*
- Mentoring*
- Job Safety*
- Workplace wellbeing
- Workplace morale
- Better job satisfaction
- Stronger organizational commitment

Methods to measure EI

- Ability
  - Mayer and Salovey’s model of EI, the Mayer-Salovey-Caruso Emotional Intelligence Test (MSCEIT)
- Mixed
  - The Emotional Competency Inventory (ECI)
  - The Emotional Intelligence Appraisal
- Trait
  - EQ-i
  - Swinburne University Emotional Intelligence Test (SUEIT)
  - Schutte EI model
  - Trait Emotional Intelligence Questionnaire (TEIQue)
Emotional Intelligence: Ability

- Learn
- Improve
- Model:
  - Ability to identify emotions in self
  - Ability to identify emotions in others
  - Manage emotions effectively

MSCEIT

- Cognitive Psychology
- Performance Test
- Validity and Reliability
- Hundreds of studies

Emotional Intelligence Scores

- Total EI Score
  - Experiencing Emotions
  - Strategic Use of Emotions
    - Processing Emotions
    - Using Emotions to Facilitate Thinking
    - Understanding Emotions
    - Managing Emotions
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What emotion?

Emotions

• Source
• Response
• Expression
Role in Hospice and Palliative Care

EI for Nurse Leaders
- Nurse Manager Development
- Male vs. Female Nurses
- Oncology Nursing Rounds

Nurse Manager Development
- Scope and range of accountability increased risk for turnover and role exhaustion
- EI linked to leadership effectiveness, retention, and physical/emotional wellbeing
Design and Method

- Exploratory, quantitative, pre/post design
- 15 of 31 (48%) Nurse managers: inpatient & outpatient
- EI score, Self report EI ability and Management abilities, Work-life balance
- Initial training sessions: EI and peer coaching
- Weekly one-to-one peer coaching
- Monthly check-in meetings

Results

- Demographics
  - 34-71 years old
  - Both genders
  - Wide range of ethnicity
  - 73% masters prepared
  - Career: 11-50 years
  - Current role: 1-25 years
  - Hours work per week: 50-80

Work-life Balance
Results

- Overall scores decreased
- Total EI & hours worked/week: - correlated
- Total EI & satisfaction with work-life balance: + correlated
- 94% managers physical symptoms

Feedback:
- Continue coaching
- More structured peer coaching
- Time limited participation

EI: Male vs. Female Nurse

- Florence Nightingale: nursing extension caring role women and mothers
- Male Nurses in US 5-7%
- Are male nurses emotionally intelligent?

Design and Method

- EI scores from three studies
- 2 Hospital studies & 1 university setting
- MSCEIT, version 2
- Total: 39 males and 213 females
- Multivariate Analysis of Variance (MANOVA)
EI of males vs. female nurses

Results

• No difference!

• Patterns of sub-scores the same: identifying emotions

• Hawai‘i: slightly higher proportion males; higher % of Asians, Pacific Islanders, and Native Hawai‘ian nurses

EI Oncology Nursing Rounds

• Do the emotional intelligence abilities of nurses change after a 10-month period of emotional intelligence rounds?
• What are the strengths and weaknesses in nurses’ demonstrated emotional intelligence abilities?
• Does nursing documentation of patients’ emotional issues and planning for emotional care change after participation in EI Check-In rounds?
• Do nurse satisfaction, turnover, sick leave data, patient satisfaction, and safety data change after the study?
Design and Method

- Descriptive, exploratory, feasibility study
- 24-bed acute care oncology unit staffed by 33 RNs
- EI Check-In Rounds
  - Lead by 2 co-investigator nurses
  - Over 10-month period
  - 3 min intervention per staff nurse
- Questions
  - “What is going on emotionally with your patients?”
  - “What is going on with you emotionally?”
  - “How do you cope with difficult emotions?”

Difficulty Identifying Emotions

- 32% of responses reflected emotions
- 68% of responses categorized as
  - Physical (11%)
  - Judgmental/evaluative (38%)
  - Behavioral (6%)
  - Diagnostic (1%)
  - Related to admission status (12%)

What is going on emotionally?

- Emotions
  - Sad
  - Angry
  - Happy
  - Frustrated
  - Anxious
  - Depressed
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Additional responses......

- Physical
  - tired, sleepless, in pain, poor pain control
- Judgmental/evaluative
  - okay, fine, good, bad
- Behavioral
  - restless, hyper, hyper-verbal, busy
- Diagnostic
  - OCD, Bipolar
- Related to admission status
  - going home tomorrow, long LOS

Discussion

- Feasibility: very easy
- 100% positive feedback from staff
- Increase in documentation and care plans:
  - emotions
- Limited responses to EI Tests

Role in Hospice and Palliative Care
References