

# Teaching safety in nursing practice: Is emotional intelligence a vital component?



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## Abstract

Nursing faculty have integrated safety teaching throughout nursing curricula in hopes to generate safer nurses in the workplace: yet, safety discrepancies still occur at an alarming rate. The concept of emotional intelligence has emerged in the health care literature as a trait that has been shown to positively impact behaviors leading to safer practice. The authors gathered information about emotional intelligence to incorporate in their associate degree program and share the findings in this article.

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## 1. Introduction

It has been 14 years since “To Err is Human,” the Institute of Medicine’s report, served as a safety wake-up call for health care educators and workers (Kohn, Corrigan, & Donaldson, 2000). Since that time, nursing faculty have integrated safety throughout nursing curricula in hopes to generate safer nurses in the workplace. Health care facilities have made organizational and structural changes and hypothesized that improvement in patient safety would be the result. Despite patient safety being a primary concern, safety discrepancies still occur at an alarming rate (The Joint Commission, 2011). In 2013, The Joint Commission identified ineffective leadership and communication among the most frequently identified root causes of sentinel events. In this article, the authors present their findings about developing leadership and communication skills through

emotional intelligence (EI), thereby, enhancing safety outcomes. EI is defined, and methods for developing EI in the academic setting are described.

## 2. Emotional Intelligence

Health care educators and leaders continue to consider ways to promote safety awareness to include measures such as safety checklists, “time-outs,” inspections, various technologies, and medication reconciliation. But rarely do we hear suggestions that there may be an emotional component to the adoption of such safety changes. In fact, it is rare to hear educators and leaders speak of preparing nurses who are emotionally intelligent at all (Harrison & Fopma-Loy, 2010). This neglect of EI occurs despite the fact that EI has begun to appear in health care literature as a strong tool to develop effective leadership and communication skills, the very skills cited by The Joint Commission (2013) that may hold the key for creating safer health care climates.

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In many ways, the concept of EI is not new. For years, scientists have acknowledged and researched the noncognitive aspects of intelligence (Gardner, 1983; Thorndike, 1920; Wechsler, 1940). Building on this foundation, Salovey and Mayer (1990) defined EI as “a form of social intelligence that involves the ability to monitor one’s own and others’ feelings and emotions, to discriminate among them, and to use this information to guide one’s thinking and action” (p 189).

The concept of EI rose to prominence when American psychologist Daniel Goleman (1995) published “Emotional Intelligence” and purported that EI was more important than conventional intelligence (IQ) in successful human and organizational development. Goleman (1995) presented five main elements of EI: self-awareness, self-regulation, motivation, empathy, and social skills (see Table 1 for description of the five elements of EI). He maintained that the majority of competencies needed by successful leaders fall into the realm of EI.

It is apparent that these five elements support effective leadership and communication skills, both of which are necessary for safe nursing practice (Squires, Tourangeau, Laschinger, & Doran, 2010; Woods et al., 2008). Freshwater and Stickley (2004) argued that it is not enough for the health care provider to deliver care without considering the human recipient of the process. Similarly, Linsley and Hurley (2012) maintained that a patient is able to reach the maximum level of wellness only when care is delivered with effective communication skills.

### 3. Evidence in the Nursing Literature

EI is increasingly credited as playing a pivotal role in the development of leadership, communication, and other noncognitive skills expected from nurses (Smith, Profetto-McGrath, & Cummings, 2009). Altuntas and Akyil (2011) analyzed questionnaires from 87 male nursing students to determine the relationship between EI and leadership. Analysis of the data revealed a positive relationship between EI and effective leadership behaviors. Accordingly, the authors advocated that EI and leadership behaviors should be promoted in the curriculum of nursing programs. Leadership skills are necessary for nurses to work with patients and team members to address difficult safety issues. For example, the nurse who observes unnecessary distractions that increase the risk of errors while preparing for medication administration will need effective leadership skills to make changes among team members involved.

Morrison (2008) conducted a quantitative study to determine EI and conflict handling styles among registered nurses. Results of the study indicated a positive correlation between EI and the collaborative (preferred) conflict-handling style and a negative correlation between EI and the accommodating (not preferred) conflict-handling style. Effective conflict-handling skills are essential for the nurse whose goal is to create a culture of safety, not just individual safety

**Table 1** Description of the five elements of EI

Self-awareness	Emotional awareness; the ability to understand personal emotions and how those emotions impact others.
Self-regulation	Emotional control; the ability to redirect disruptive impulses and to think before acting.
Motivation	Desire to achieve goals with energy and persistence; the ability to persevere in the face of obstacles.
Empathy	Sensing and understanding the emotions of others; the ability to anticipate the needs of others and consider these needs when making decisions.
Social skills	Managing relationships; the ability to listen and respond appropriately and inspire others.

Summarized information from Goleman (1995). *Emotional intelligence: Why it can matter more than IQ*. New York: Bantam Books.

awareness. One such area may be in work areas where staff does not readily assist one another with arduous tasks such as repositioning an obese patient. If the nurse assesses that this problem is related to lack of staff cohesion, appropriate conflict handling skills will be necessary for resolution.

An exploratory study was conducted by Codier, Muneno, Franey, and Matsuura (2010) to determine if EI attributes were correlated with key concepts in the nursing profession. The study revealed that highest number of EI attributes correlated with professionalism, performance, and nursing intuition. Similarly, Beauvais, Brady, O’Shea, Griffin, and Quinn (2011) conducted a descriptive correlational study to examine EI and nursing performance. The study revealed a positive correlation between EI and nursing performance among nursing students. Nurses who exhibit a strong level of professionalism can promote a safe environment for the patient and the staff nurse because they are better equipped to recognize and diffuse difficult situations using persuasion and negotiation. Nurses with excellent performance skills and strong nursing intuition may contribute to patient safety through their proclivity to excellence in delivery of competent care.

The relationship between leadership styles and EI was studied by Parker and Sorensen (2008) among 43 managers in a mental health setting. The participants completed questionnaires to determine their EI scores and their transformational/transactional leadership scores. The results showed a statistically significant relationship between high levels of EI and high levels of transformational/transactional leadership styles. Based on this finding, the authors concluded that such measurements may be useful to predict future leadership performance and enhance the ability of health care managers to create a safe, positive working environment.

Thirty-six nurses in Hawaii participated in a study by Codier, Kooker, and Shoultz (2008) to measure EI as related to performance level. Significant positive correlations were found between performance level and EI scores. The authors suggested that EI may offer specific skills to improve collaboration, positive conflict behaviors, and effective relationships in health care organizations. Given today’s increased awareness of the need to improve health care’s

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