

The relationship between nurses' emotional intelligence and their perceived work performance

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ABSTRACT

The study determined the relationship of emotional intelligence (EI) and work performance of nurses in a privately owned Level 2 General Hospital in Central Visayas. The study helped the administration in their organization to develop and explore the concept of EI to ensure high level of performance resulting in increased achievement of organizational and individual goals. The study utilized the descriptive-correlational survey method of research to determine EI and its effect on work performance. It revealed that the relationship between EI and work performance had a moderate positive correlation. Nurses exhibited a high degree of emotional intelligence on personal competencies and social competencies. They exhibited high performance on the four quadrants of EI namely: self-awareness, self-management, social awareness and relationship management. This concurred that EI and job performance had a significant positive relationship across the different measures.

Keywords: *Emotional Intelligence, Work Performance, Nurses*

I. INTRODUCTION

In the healthcare organization, healthcare providers like health aides, midwives and nurses are the frontliners who deal with different types of people every day in the workplace. They could be their co-staff nurses, doctors and patients with different needs. On a day-to-day basis, a nurse may encounter different demands of emotional care, from simple health advice to the patients, then collaboration and communication with other nurses or doctors, to the demands of the supervisors and hospital's vision, and up to the moment of comforting the dying patients and the significant others. Nurses should be resistant or put up a protective barrier to these demands for them to effectively and efficiently perform their job. The rate of young generations entering in the work force is increasing but the emotional

quotient is declining in all economic groups in various cultures. In the scenario of the privately owned Level 2 General Hospital in Central Visayas, there were common observations that 40 percent among the patients were dissatisfied with the care received from the nurses as stated in the study of Labe in 2011. In other case, it has been observed that the nurses are not utilizing the therapeutic communication towards clients and significant others as they are more focused on operating machines. Nurses' bedside care is minimal as they are doing things unrelated to work or patient care during in between hours. This dilemma is supported by the survey of Al-Khouri (2010) which reveals that, 50% of the employees lack the motivation to keep learning and improving their job abilities or performances. Lastly, entry

level applicants account for only 19% having self-discipline towards work habits.

Duquette, Kerowe Sandhu and Beaudet (1994) have found out that nurses are most badly affected by stress, as their whole career revolves around caring and nurturing people. In the absence of such social support networks, personal qualities of nurses such as spiritual wellness and emotional intelligence are very important. Employers identified that entry level nurses are not yet ready to embrace the workplace because they possess minimal social skills and are inadequately prepared for their role, and they are ineffectually oriented to the work place (Bjerknes & Bjørk, 2012) it would be critical and would probably experience a transition shock (Taft, 2012). However, Joseph and Newman (2014) stated that if these people work with higher emotional intelligence, chances are they will have a better work performance.

With today's modern organization, emotional intelligence's popularity is increasing as it gives more weight or equivalent to Intelligence Quotient but Emotional Quotient is still neglected as one of the predictors in selecting or hiring personnel. Research on health care staff's EI is rising but with limited number of local studies. With this, the researcher pursued the study to provide a wider view of people in the organization, specifically the staff nurses, preceptors or medical frontliners who are normally dealing with patients every day. Ultimately, the study aimed to determine the relationship of emotional intelligence and work performance of nurses who participated in the preceptorship program, which also dig in the following: (a) the level of emotional intelligence of the nurse preceptee; (b) the level of performance exhibited by the nurses; and (c) significant relationship between emotional intelligence and work performance.

II. THEORETICAL FRAMEWORK

The study is anchored on Daniel Goleman's theory of Emotional Intelligence that has two categories, namely: (a) Personal; and (b) Social domains. These two domains are further clustered containing various competencies. Personal domain includes Self-awareness and Self-Management while Social Awareness belongs to Social domain

(Goleman, 2002).

Personal attribute is the person's capability of managing or controlling one's own emotions in whatever circumstances that may come. Self-awareness includes recognition of one's own emotion and knowing the limitations and capabilities of the self. Emotional awareness, self-assessment and self-confidence comprise the self-awareness cluster.

Emotional awareness is recognizing emotions and its effects. Nurses should recognize the scenario that may arouse own emotions, be aware of what they are feeling, realize the links between their feelings to their actions, and reflect on possible reasons for what the nurse is feeling (Serrat, 2009). Self-assessment is acknowledging the strong and weak points a nurse may have and accepting positive or negative feedback to avoid compromising their work. Self-confidence is one's self-worth and capabilities. A nurse can stand up for what she or he thinks is right and can come up with a solution despite the pressures by believing in one's capability.

Self-management is the nurse's ability to balance his or her own needs for the sake of other people like patients or other members of the health care team taking initiative, easily adapting to any situations and taking a new perspective. There are six competencies included in this cluster: self-control, transparency, adaptability, achievement, initiative and optimism.

Self-control is the ability to cautiously manage distressing emotions, maintain composure or stay calm and remain focus even under pressure in a toxic workplace. A nurse with these skills must not show frustrations and does not impulsively act. Transparency competency on the other hand refers to maintaining veracity and integrity in which nurses will consistently or compatibly act with their values and ethical concerns. It also includes acknowledgment of mistakes as well as keeping the stated promises. In meeting people's needs in the hospital a nurse must be adaptable on new ideas or flexible in applying standard procedures, another competency a nurse must possess. It also means that the nurses should smoothly handle various unexpected demands well from patients and other health team member in every event. The nurse preceptee

should make every effort and do their best to achieve the required standard in line with the hospital's vision; that is why achievement is one of the competencies to be included to become emotionally intelligent.

Nurses should set attainable goals with anticipation of some obstacles in achieving it; be result-oriented, take risks to reach goals and seek ways to improve their performance. Initiative competency refers to the readiness to act on opportunities, the nurse knows what to do and will not wait to be instructed by someone in case there is an emergency or sometimes seeks information in unnatural manner. It could also involve bending rules for the greater good. Optimism competency involves the hopefulness, cheerfulness and positivity despite setbacks, hindrances or obstacles. It allows learning from setbacks with the spirit of believing that the future will be better (Cherniss & Goleman, 2001).

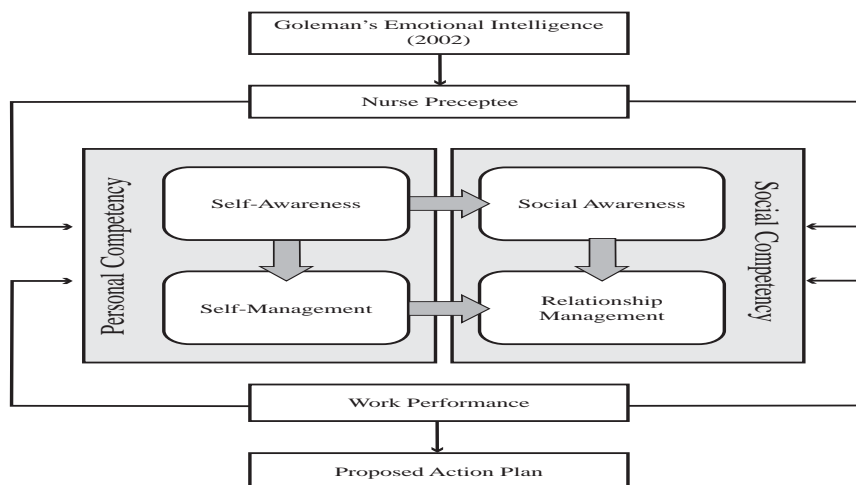
The first two clusters mentioned above are Personal attributes but the other remaining two belongs to Social competency. The latter is the ability of the nurse in handling relationships, using interpersonal skills to produce a positive outcome. Inclusions are Social Awareness and Relationship Management. Social awareness is knowing the feelings and needs of other people while Relationship management is the ability by the nurse to get the best out of others or simply

inspiring or influencing them or by being a catalyst of change.

The Social awareness cluster includes empathy, service orientation and organizational awareness. Empathy is the ability to listen attentively, show concern and is the core of social awareness by putting oneself in the shoes of others, which aids in gaining understanding of how others may feel. Nurses with service orientation competency are those who gladly offer appropriate service or assistance and can find ways on how to serve their patients better. Lastly, organizational awareness competency refers to one's ability of reading or interpreting situations and understanding unspoken rules and historical reasons of various issues within the organization and; the ability to detect vital or crucial social network within the organization (Goleman, 2002).

Relationship management is the last cluster that concerns the ability or skills to stimulate expected responses from the others. It includes six competencies: developing others, inspirational leadership, change catalyst, influence, conflict management, teamwork and collaboration. Developing Others refers to sensing other people needs and amplifying their abilities through giving of constructive criticism, appreciating the strengths and providing guidance through coaching or perceptor-perceptee relationship. Inspirational Leadership involves inspiring and leading other

Figure 1. Schematic Diagram of the Theoretical Framework based from the Goleman's Theory of Emotional Intelligence (2002).



people by making their work exciting. It simply means managing the emotions of other nurses to get the work done, not merely the position that will point out the nurse as a leader (Goleman, 2002). A Change Catalyst is an individual that initiates and manages change within the organization. Nurses should be advocates of change and have a forward thinking ability as a means of improving oneself and the entire organization. Influence means applying or enforcing effective strategies for persuasion in a possible way that can develop other people rather than getting something out from others. Handling difficult people and tense situations subtly or resolving disagreements is a Conflict Management competency. A nurse acts as a rift healer between two opposing poles in the workplace. Lastly, teamwork and collaboration involves sharing same goals and working together with other nurses. A nurse with this skill should build team identity and promote a good climate of friendship by soliciting input and establishing a close relationship (Goleman, 1998).

III. RESEARCH METHODOLOGY

The study utilized the descriptive-correlational method. This method is useful in gaining the prevailing status or condition of the emotional intelligence and job performance which are essential or vital to the existing practices within the organization. Descriptive studies discuss in detail what is designed for the researcher to gather information about the present condition of the nurses in the hospital. Correlational method determines how the variations of one variable which is emotional intelligence go with other variables which in this study refers to work performance.

The study was conducted at the privately owned Level 2 Hospital in Central Visayas where the respondents were the 103 nurses enrolled in the perceptorship program who consented to join the study. The respondents were purposively chosen. The researcher used the validated questionnaire that consists three parts:

- (a) demographic profile of the nurses;
- (b) level of emotional intelligence in terms of self-awareness, self-management, social awareness and relationship management. For the level of emotional

intelligence, the researcher used the Emotional Competence Inventory 2.0 Scales based on the competencies enumerated by Goleman. This is a survey instrument based on the Self-Assessment Questionnaire (SAQ) developed by Boyatzis, Goleman and Rhee (2000), the emotional competencies identified by Goleman (1998), as well as on the competencies from Hay/McBer's Generic Competency Dictionary (Boyatzis, Goleman & Rhee, 2000); and

- (c) level of performance in terms of Personal and Social Competencies. The researcher utilized the questionnaire made by Yee (2010). The collected data was analyzed using mean, Normality Test, Effect size and Pearson Product Moment Coefficient of Correlation.

IV. RESULTS AND DISCUSSIONS

This section presents the level of Emotional Intelligence and Competencies towards the level of Nurses' Work Performance.

Level of Emotional Intelligence

Goleman's emotional intelligence composes of four clusters that contain three or six competencies that would sum up to 18 competencies all in all.

Table 1.
Nurses' Level of Emotional Intelligence

Cluster	\bar{X}	DE
Self-awareness	4.01	High
Self-management	4.05	High
Social awareness	4.1	High
Relationship management	3.85	High

As shown in this table, the level of emotional intelligence among nurses is high in the four clusters. Social awareness includes the nurses' ability to respond to the need of others, rank first of the four clusters with a mean of 4.1 which is parallel to the essence of the nursing profession, caring. In emotional intelligence, the essential building block or what we call the foundation is Social Awareness. In study by a group of researchers

from University of Michigan as published in the Time Magazine in 2010, it claimed that college students have significantly less empathy compare to the past generations. But based on the result of their current study, it opposes the result in the western country which means that Filipino nurses still have a great empathy towards others, meaning social awareness is a natural response to nurses.

Self-management comes in next as second in rank with a slight difference between self-awareness. This is because a nurse cannot manage their emotions if they are not aware of their own emotions.

According to Covey, the person has the ability to choose responses in any given situation, and this applies to emotions. Next to Self-management is the keystone of emotional intelligence: Self-awareness (Goleman, 1998). When nurses know how to empathize it only means that they know their strengths and weaknesses and are able to control own emotions by not allowing anger and frustrations to affect their performance. Lastly, Relationship Management got the lowest rank among the four clusters with a weighted mean of 3.85. In this cluster, it is all about the ability of getting the best of others. The researcher understood that in the study it ranks fourth but still covers as the highest level in emotional intelligence, that is because most of the respondents were in the entry level in the workplace and on this stage they were the ones who needed to be inspired or motivated by someone rather than inspire others.

Emotional Intelligence Competencies

Nurses’ level of emotional intelligence was measured through the validated questionnaire created by the Power (2005) with the 72 item test. The said item test answered the 18 competencies under the four clusters of Goleman’s emotional intelligence which is shown in Table 2.

As enumerated in Table 2, the 18 competencies are all in the highest level and each competency has a target level. Optimism ranked number one and got the mean of 4.39 as perceived by the nurses. It is claimed that Filipino nurses are optimistic amidst the misery in the various aspects of life. It is our known characteristic or trait whom foreigners admire much because Filipino nurses still share

Table 2
Nurses’ 18 Emotional Intelligence Competencies

Cluster	Competencies	Female	Male	\bar{X}	DE	Rank
Self-Awareness	Self-awareness	4.18	4.04	4.11	H	8
	Self-assessment	3.96	4.05	4.01	H	11
	Self-confidence	4.14	4.05	4.10	H	9
Self-Management	Self-control	3.85	3.72	3.78	H	14.5
	Initiative	3.54	3.69	3.62	H	17
	Adaptability	4.15	4.17	4.16	H	5
	Optimism	4.34	4.49	4.39	VH	1
	Achievement	4.17	4.25	4.21	VH	4
	Transparency	4.08	4.16	4.12	H	7
Social Awareness	Service Orientation	4.42	4.16	4.29	VH	2
	Empathy	4.21	4.23	4.22	VH	3
	Organizational Awareness	3.76	3.80	3.78	H	14.5
Relationship Management	Change Catalyst	3.71	3.57	3.64	H	16
	Teamwork	4.23	4.07	4.15	H	6
	Developing others	4.01	3.89	3.95	H	12
	Conflict Management	3.4	3.6	3.5	H	18
	Institutional Leadership	4.1	4.02	4.06	H	10
	Influence	3.9	3.75	3.82	H	13
		Σ	4.0	3.98	3.99	H

a positive spirit no matter how far they are from own families while caring for other people. This result agreed with the study of Schulman (1995) in which optimism is the main ingredient of achievement when individual obtains success despite setbacks, hindrances and hopes or looks of the brighter tomorrow. Schulman (1995) further claimed that this can significantly contribute to accomplishments as it agrees with Goleman’s statement that optimism requires hope and the motivating force in every goal or vision.

Self-confidence, adaptability, initiative, empathy, service orientation and conflict management have an optimal level of four while the remaining competencies have an optimal level of three. Even if all the competencies have a descriptive equivalent of high level, there are still three competencies that did not reach the required optimum level or target level. These three competencies are situated in the lowest rank. Change Catalyst earned the 16th rank with the mean of 3.64 but able to reach the required level. Initiative rank 17th with the mean of 3.82 and Conflict Management settled last with 3.5 which was supposed to reach the target level of 4.0. As the new nurses enter the workforce, they are overwhelmed by the stress as they will experience a transition shock (Duphily, 2014). This is factual since 91.26% of the respondents are new graduates who experienced reality shock

that creates stress, lack of self-confidence, role conflict and lack of decisiveness resulting from a failure to make a choice.

The remaining required competencies with an optimum level of four are the following: Service orientation which rank as second with the mean of 4.29, followed by Empathy in the 3rd rank with a mean of 4.22 and lastly the Adaptability on 5th place with the mean of 4.16. In India, 91% scored low in service orientation among health professionals based on the survey of Singh in 2012. This contradicts the result of the study, in which Filipino nurses are more oriented towards customer service as perceived by them and surpass the required target level. As mentioned by Ioannoke in 2008 in his study in Greece, Empathy is the bedside manner and should characterize health care professionals for them to achieve positive outcomes for patients. The famous Charles Darwin once said, "It is not the strongest of the species who survive, nor the most intelligent, but those who are most adaptive to change". Nurses can make actions or decisions that are adaptive to their new workplace that will not only foster survival but also allow them to thrive.

Nurses' Level of Work Performance

Table 3
Nurses' Level of Work Performance on Personal Competencies

Personal Competencies	\bar{X}	DE
1. Present self positively to patients and to colleagues and have presence in mind in doing work.	4.58	Excellent
2. Conscious of own feelings towards others.	4.42	Excellent
3. Accept criticism gracefully and make necessary changes.	4.31	Excellent
4. Can think clearly and stay focused under pressure.	4.17	Very Satisfactory
5. Do the task to the best of his or her ability.	4.77	Excellent
6. Take part in meeting hospital objectives, vision and mission.	4.32	Excellent
7. Can adapt hospital strategy to fit circumstances in the workplace.	4.36	Excellent
8. Know how to improve my performance.	4.4	Excellent
9. Actively sought out opportunities to fulfill the hospital objectives, vision and mission.	4.17	Very Satisfactory
10. Encourage others to participate in any creative activities.	4.06	Very Satisfactory
	\bar{X} 4.35	Excellent

The level of work performance is discussed in terms of personal competencies and social competencies. Each competency is separately presented and discussed.

Table 3 shows that the nurses obtained an average mean of 4.35 with the descriptive equivalent of excellent. Three out of 10 items presented in the table are very satisfactory and these are the following: item 4, thinking clearly and stay focused during under pressure has a mean of 4.17. In the study of Yee in 2010, the employed nurses got an mean of 4.13 of the same item which implies that whether a nurse is a perceptor or a regular employee it does not matter of the length of service, it matters on how a nurse manages himself or herself. Item 9, which relates to the previous item being discussed is about seeking out opportunities to fulfill the hospital objectives, vision and mission. Nurses rated it lesser compared to the other items since they are still in the training mode that focuses more on enhancing their own skills rather than thinking about the hospital's vision and mission. Lastly, item 10, encouraging others to participate in any creative activities got an mean of 4.12. The result may not be in the highest level, but still the respondents have the desire to improve others job competency and securing professional advancement.

Among the personal competencies on work performance the highest mean is item 5, (4.77) "doing the task to the best of the ability." This aligns with the famous notion that says: "first impression's last" because the greater weight of the population of the nurse perceptor belongs to the entry level in the workforce who want to present themselves impressively. The mean for the domain on performance is 4.35 which shows that the nurses are now ready and equipped with the needed competencies as they responded to different situations given because they now have a healthy and positive work performance on personal competencies.

Level of Work Performance on Social Competencies

Social competencies give details on how nurses deals with the other members of the team as well as the patients.

Table 4.
Nurses' Level of Work Performance on Social Competencies

Social Competencies	\bar{X}	DE
1. Help out in understanding other people's feelings and needs.	4.25	Excellent
2. Appreciate and recognize the health team emotions and concerns.	4.38	Excellent
3. Seek ways to increase patient's satisfaction and loyalty for health care providers.	4.4	Excellent
4. Influence the health team members to do good job on achieving organizational objectives.	4.04	Very Satisfactory
5. Make sure the team develops clear objects.	3.96	Very Satisfactory
6. Appreciate colleague's accomplishments, strengths, and developments.	4.37	Excellent
7. Try to make health team members feel important and compliment them.	4.33	Excellent
8. Build rapport and keep others in place.	4.5	Excellent
9. Make and maintain personal friendships among work associates.	4.49	Excellent
10. Promote a friendly and cooperative culture to the health team members and even to the patients.	4.51	Excellent
	4.32	Always Done

Table 4 shows that the nurses obtained a mean of 4.32 with the descriptive equivalent of excellent. Two out of 10 items presented in the table are very satisfactory and these are the following: item 4, "influencing the health team members in doing a good job to achieve organizational objectives" has a mean of 4.04. It has the same result in the study of Yee in 2010, where the employed nurses got a mean of 4.06 of the same item. Item 5, "ensuring that the team develops clear objects", has a mean of 3.96. In the study of Yee in 2010, the nurses got a mean of 3.75 of the same item which is also included under the category of "usually done" but with a lower mean compared with the present study. The Medical and Ancillary and the Administrative Department had greater mean of 4.17 and 4.0 respectively. This implies that nurses have involvement in developing the objectives of the hospital but are not perfectly done since most of them are new to the organization. The result may not be in the highest level, but still the nurses were exercising good social competencies.

Relationship between Emotional Intelligence and Work Performance

Table 5 presents the relationship between emotional intelligence and work performance of

the nurses.

Table 5.
Emotional Intelligence and Work Performance

Emotional Intelligence and Work Performance	Critical r value	Computed r value	Decision	Interpretation
	0.426	0.46938	Reject H_0	Strong positive correlation; significant

As shown in the table, the computed r value is 0.46938 which means that the emotional intelligence has a moderate positive correlation to work performance that will reject the null hypotheses. This result corresponded with the study of Codier et al. who examined the 27 clinical staff nurses in the United States regarding the relationship between emotional intelligence and nursing performance with a significant correlation between the two variables. Same results are found in the correlation study of Van Rooy (2004) considered EI as predictor of job performance than general intelligence. This implies that Emotional Intelligence is a predictor of work performance. To best illustrate the relationship of the two variables it was presented through a scatter plot as shown in Figure 2.

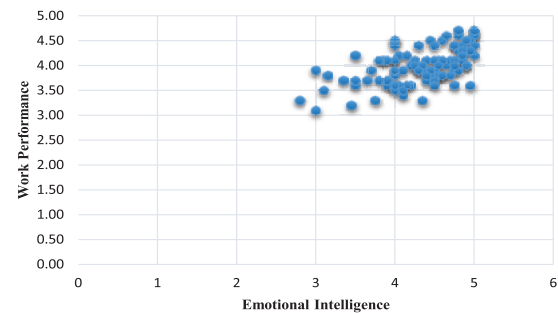


Figure 2
Scatter Plot of Emotional Intelligence and Work Performance

Computing for the coefficient of determination furthermore reveals that only 22.03% of work performance is accounted for by level of emotional intelligence, and vice versa. The coefficient of alienation on the other hand tells us that 77.97% of work performance is best explained by other factors.

V. CONCLUSION

It can be concluded that the theory of EI is applicable here in the Philippines. As a result of this study it is confirmed that the nurses exhibited a high degree of emotional intelligence on personal competencies and social competencies. They exhibited high performance on the four quadrants of emotional intelligence namely: Self-awareness, self-management, social awareness and relationship management. Further, they manifested a very high performance on optimism, service orientation, empathy and achievement. The fact that EI has a significant relationship with the performance may be valuable or applicable for other staff in the institution such as the staff nurses, nurse supervisor or all the hospital employees.

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