Original Article

Relationship between Patient's Satisfaction and level of emotional Intelligence in Nurses Working in Tertiary Care Hospital

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ABSTRACT

Emotional intelligence is the ability to sense what is going on, to understand how it feels while in that circumstance, to effectively analyses and consider other people's thoughts and feelings, and to respond accordingly. It can be defined as the ability to correctly recognize one's own and others' emotions. **Objectives:** To determine the association between patients' satisfaction and level of emotional intelligence (EI) in nurses working in medical and surgical department in tertiary care hospitals, Lahore. **Methods:** A correlational study design was used to carry on this study. This study was conducted at Mayo Hospital and Social Security Hospital Kot Lakh Pat Lahore. The duration of the study was six months from Jan, 2023 to June; 2023.The study participants were registered nurses (both male and female) and admit patients (both male and female) there. Purposive sampling technique was used n=265 participants were recruited. To assess the performance among nurses and patients, an observational checklist was used. Data of the study participants was entered in statistical software SPSS version 21.0 and was analyzed accordingly. **Results:** This study shows that there are statistically non-significant differences between patient's satisfaction and emotional intelligence. The results revealed a non-significant association between nurses' emotional intelligence and patient's satisfaction, as p-value is p=.381 which is non-significant. So, we reject the alternative hypothesis and accept the null hypothesis. **Conclusions:** It is concluded that nurse's emotional intelligence has no relationship on patient's satisfaction, Nurse's emotional intelligence and its association with patient's satisfaction, which results were non-significant.

INTRODUCTION

Emotional intelligence is a type of cognitive ability that combines personality traits and social abilities to help people comprehend others' feelings and make better personal and organizational decisions. People with high emotional intelligence are better able to deal with organizational issues[1]. Emotional intelligence describes how people deal with positive and negative life situations, as well as how they carry out efficient and long-term actions in the workplace[2]. Emotional intelligence is seen as a necessary component of nursing practice in the United States[3]. Emotional intelligence is defined as the ability of people to recognize, understand and control their own emotions and recognize, understand and influence the emotions of others[4]. Emotional Intelligence (EI) is an important skill for both personal and professional success. Self-awareness, self-management, social awareness, and relationship management are all characteristics of EI[5]. Nursing is a career that necessitates a high level of critical thinking and intellect, as well as a combination of relative intelligence and emotional intelligence[6]. As a result, in order to cope with the emotional demands of the healthcare setting; nurses must have high levels of emotional intelligence skills. Emotional intelligence develops the ability to deal with interpersonal issues by managing emotional responses, being empathic, and remaining attentive to patient concerns, resulting in more

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effective cooperation and better patient care [7]. Emotional intelligence can help nurses manage their own and their patients' emotions, demonstrate authentic emotional responses, are empathic and convey emotions without causing conflict, and manage instinctive emotions in nurse-patient encounters, such as disgust, anger, and frustration. Nurses can handle a variety of clinical scenarios by seeing things from the patients' perspective and empathizing with their feelings [8]. Patients who are cared for by a nurse who exhibits EI skills believe that the nurse genuinely cares about their well-being and health, which is the essence of nursing and caring [9]. Patient satisfaction is a measurable criterion for assessing health care and, as a result, nursing care quality [10]. Patient-centered care is the most important factor of care quality (PCC). Patient-centered care involves six critical components, according to the Institute of Medicine: safety, efficacy, time, efficiency, quality, and equity. The conduct and emotions of nurses have a direct impact on the quality of patient care [11]. The level of patient satisfaction with nursing treatment has been the subject of numerous researches in recent years. Consider the research conducted in Iraq [12]. Brazil and Egypt provided evidence of excellent patient satisfaction with nursing care. Additionally, 69% of patients in Iran, 67% of patients in Kenya, and 33% of patients in Ghana reported overall satisfaction with their nursing treatment [13]. Contrarily, the findings of a study conducted in India showed that the majority of hospitalized patients had negative perceptions of nursing care [14].

METHODS

A Correlational study design was used to carry on this research work. This study was conducted at the Mayo Hospital and Social Security Hospital Kot Lakh Pat Lahore. The duration of the study was six months from Jan, 2023 to June; 2023.The study participants were all the Nurses (male and female) and admit patients from medical and surgical departments. A purposive sampling technique was used to recruit the recommended sample. Sample size of 133 nurses and 265 patients has been calculated with 95% confidence interval. Inclusion Criteria: Nurses (male and female) who are working in medical and surgical department. Age 24-60 years of Nurses. Have one year of work experience. Patients included the following: a minimum of 48 hours stay time in the hospital. Patients; aptitude for reading and responding to the questions. Only medical department patients. Patient's Full alertness (aware of person, place, and time); no history of psychiatric illnesses. Exclusion Criteria Nursing Students Nursing administrative. Loss of consciousness, abrupt illness progression, cardiac or respiratory arrest, and a wish to stop the study. Other department's nurses and patients. Tool 1: Emotional Intelligence (EI) of Nurses that comprises on 33-item self-reports that is brief EI. The scale's responses, which were of the five-point Likert variety, were Strongly Agree, Agree, Neither, Disagree, and Strongly Disagree. Below 75 EI Score = <45% was consider Low EI. Above 75-125 EI Score= >50% -78% was consider Moderate EI. Above 125-165 EI Score = >78% -100% was consider High EI. Tool 2: Patients Satisfaction. It comprises on 18-item self-reports that is brief patient's satisfaction. The scale's responses, which were of the five-point Likert variety, not satisfied, rarely satisfied, satisfied, extremely satisfied, and fully satisfied (Akin & Erdogan, 2007). Below 45 score = < 50 % was consider Low Satisfaction, above 45-70 Score = > 50% -78% was consider Moderate Satisfaction, above 70-90 Score = >78% -100% was consider High Satisfaction. To collect data, first of all permission was granted from the Research Ethical Committee (REC) of the university of Lahore. Then permission was taken from medical superintendent of Mayo Hospital Lahore and social security hospital Lahore. Data of the study participants were entered in statistical software SPSS version 21.0 and were analyzed accordingly. Result of the study were presented as median through table. Pearson's correlation coefficient was applied to checked correlation. *p*-value ≤ 0.05 will be considered statistically significant.

RESULTS

Table 1 below indicated that there were 133 participants were involved in the study. The majority, 42.9%, of participants were between the ages of 24-30 years, 39.8% of participants were from the age group of 31-40, and 12.8% participants were from the age group of 41-50, while 6 % participants were from the age group of 51-60. Most participants were female, with (n=94) 70.3% of the population. Male participants were (n=39) with 29.3 % of the population. Married, with (n=84) 63.2% of the population. Unmarried participants were (n=49) with 36.8 % of the population. Revealed that the majority, 50.4%, of participants were diploma holders, 49.6% were Post RN BSN. The results of total years of job experience. Results revealed that 30.41% of participants had an experience of <Then 5 Years. Most 36.8 % of participants had experience of 6-10 years, whereas 16.5% had an experience of > 11-15and 11.3% participant had an experience >16-20 1 year also 7 % participant experience more the > 20 years. Most of the 66.2% of participants had belonged medical department, while 33.8% had belonged surgical department.

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Table 1: Socio-Demographic Characteristics of Nurse's

Variables	Frequency (%) (n=133)
Age of nurses in years	
24-30 years	57 (42.9%)
31-40 years	53 (39.8%)
41-50 years	12 (12.8%)
51-60 years	6 (4.6%)
Gender	
Male	39 (29.3%)
Female	94 (70.7%)
Marital Status	
Married	84 (63.2%)
Unmarried	49 (36.8%)
Qualification	
Post RN BScN	66 (49.4%)
Diploma in Nursing	67 (50.6%)
Job experiences	
1-5 Years	40 (30.1%)
6-10 Years	49 (36.8%)
11- 15 Years	22 (16.5%)
16- 20 Years	15 (11.3%)
Above 20 Years	7 (5.3%)
Departments	
Medical	88 (66.2%)
Surgical	45 (33.8%)

Table 2 showed demographic Characteristics of patient's participants.265 participants were involved in this study. The majority, 44.5%, of participants were between the ages of 30-40 years, 28.3% of participants were from the age group of 18-30, 20.4% participants were from the age group of 40-50, while 6.8 % participants were from the age group of 51-60. Most participants were female, with (n=145) 54.7% of the population. Male participants were (n=120) with 45.3 % of the population. Revealed that the majority, 56.4%, of participants were high school, 24.9% were middle school and 18.5 % were primary school.

Table 2: Socio-Demographic Characteristics of Patient's

Variables	Frequency (%) (n=265)
Age of Patients in years	
18-30 years	75 (28.3%)
31-40 years	118 (45.5%)
41-50 years	54 (20.4%)
51-60 years	18 (6.8%)
Gender (n=265)	
Male	120 (45.3%)
Female	145 (54.7%)
Qualification (n= 265)	
Primary School	49 (18.9%)
Middle School	66 (24.9%)
High School	150 (56.6%)

Table 3 indicated that 0 % nurses have EI and 72.9% of nurses have moderate EI, 27.1. % of participants has high EI.

Table 3: Level of emotional intelligence in nurses

Variables	Frequency (%)
EI of nurses	**(n=133)**
Low EI (< 45)	0 (0.0%)
Moderate EI (46-76 %)	97 (72.9%)
High EI (76-100 %)	36 (27.1%)

Table 4 shows that 15.1% patients have low satisfaction, 84.9 % of participants have moderate satisfaction and 0% patients have high satisfaction.

Table 4: Level of Patients Satisfaction

Variables	Frequency (%)
Patients Satisfaction	**(n=265)**
Low Satisfaction (< 50%)	40 (15.1%)
Moderate Satisfaction (< 50-70%)	225 (84.9%)
High Satisfaction (>70-90%)	0 (0.0%)

Table 5 indicated that nurse's emotional intelligence and its association with patient's satisfaction, which results were non-significant as the p-value was .381 (P value is >0.05 taken as non- significant). There is no association regarding patient's satisfaction and level of emotional intelligence (EI) in nurses. The actual outcome of the Pearson's Correlation test is presented in below table. The results revealed a non-significant association between nurses' emotional intelligence and patient's satisfaction, as p-value is p=.381 which is non-significant. So, we reject the alternative hypothesis and accept the null hypothesis.

Table 5: Association among Nurses' Emotional Intelligence and Patients Satisfaction (n=398)

Correlations		Total EI	Total PS
Total EI	Pearson Correlation	1	.076
	Sig. (2-tailed)		.381
	N	133	133
Total PS	Pearson Correlation	.076	1
	Sig. (2-tailed)	.381	
	N	133	265

DISCUSSION

The finding of the current study revealed that the nurse's age ranged between 24 to 60 years old. The majority (44.5%) of the nurses in the sample had their ages ranged between 30 and 40 years old. The majority of the participants were female. These results were similar to the results of Han research who studied the relationship. The participants' ages, according to their study, ranged from 24 to 63 (40.5 10). The population in the program was mostly female (67.5%), hence the participants accurately reflect the population [15]. With a 0.01 significant level, Atilla et al.'s study demonstrated a favorable and close relationship between the self-evaluation and emotion management sub dimensions of emotional intelligence and the nursing satisfaction sub dimension of patient satisfaction. These

results support the findings of our study (p=0.00)[16]. In a study, Kucukogly assessed the emotional intelligence (EI) of nurses. They found that the nurses who participated in the study had low scores in the sub dimensions of emotion regulation and social interaction, and that those dimensions needed to be developed. The nurses in the current study had values in the sub-dimensions of EI that were higher than the mean scores (Cronbach's =0.93, mean EI: 3.96 0.45)[17]. They discovered that the sub dimensions of regulating emotions and social skills had low scores among the nurses who took part in their study, and that such aspects need attention. Nurses' EI was investigated in the study. Nurses in the current study exhibited sub-dimensions of EI values that were greater than the mean scores (Cronbach's alpha =0.93, mean EI: 3.960.45) [18]. Additionally, according to Jun and Oh, the primary component of planning, executing, and assessing nursing care is the assessment of patient satisfaction. In line with earlier findings, it was discovered in our studies that patient satisfaction with nursing services had an impact on overall patient satisfaction [19]. Additionally, according to Tekin and Findik the primary component of planning, executing, and assessing nursing care is the evaluation of patient satisfaction. In line with earlier findings, our studies revealed that patient satisfaction with nursing services had an impact on overall patient satisfaction[20].

CONCLUSION

Our study's findings indicate that as the level of EI nurses approaches a moderate level, so does the level of patient satisfaction with the nursing care they receive. This means that the EI level of the healthcare practitioners has an impact on patient happiness.

Authors Contribution

Conceptualization: OMM
Methodology: MM
Formal Analysis: SM
Writing-review and editing: OMM, MM, SM

All authors have read and agreed to the published version of the manuscript.

Conflicts of Interest

The authors declare no conflict of interest.

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