

2023

Strategies for Emotional Intelligence Training for Improving Employee Performance

Dale Elizabeth Laing-Hall
Walden University

Follow this and additional works at: <https://scholarworks.waldenu.edu/dissertations>



Part of the [Social Work Commons](#)

This Dissertation is brought to you for free and open access by the Walden Dissertations and Doctoral Studies Collection at ScholarWorks. It has been accepted for inclusion in Walden Dissertations and Doctoral Studies by an authorized administrator of ScholarWorks. For more information, please contact ScholarWorks@waldenu.edu.

Walden University

College of Management and Technology

This is to certify that the doctoral study by

Dale Elizabeth Laing-Hall

has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

Review Committee

Dr. Christopher Beehner, Committee Chairperson, Doctor of Business Administration
Faculty

Dr. Kathleen Andrews, Committee Member, Doctor of Business Administration Faculty

Dr. Ify Diala-Nettles, University Reviewer, Doctor of Business Administration Faculty

Chief Academic Officer and Provost
Sue Subocz, Ph.D.

Walden University
2023

Abstract

Strategies for Emotional Intelligence Training for Improving Employee Performance

by

Dale Elizabeth Laing-Hall

MS, Nova Southeastern University, 2017

BS, Barry University, 2015

Doctoral Study Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Business Administration

Walden University

February 2023

Abstract

The nursing home industry's lack of emotional intelligence (EI) can negatively impact patient satisfaction and performance. Nursing home leaders who lack strategies to apply EI training to increase job satisfaction, reduce employee turnover, and improve interpersonal skills risk financial loss and business failure. Grounded in the EI framework, the purpose of this multiple qualitative case study was to explore strategies nursing home leaders use to apply EI training to reduce employee turnover, increase job satisfaction, and improve interpersonal skills for performance improvement. The participants comprised four nursing home leaders from multiple nursing homes in Florida who implemented strategies to reduce employee turnover, increase job satisfaction, and advance interpersonal skills for performance improvement. Data were collected through semistructured interviews and a review of company documents related to EI training. Thematic analysis was used to analyze the data. Four themes emerged: encouraging effective communication and empowerment, organization of employee resources, fair-minded treatment and respect, and fostering a teamwork atmosphere. A key recommendation is for nursing home leaders to develop training programs to facilitate a work environment in which employees and managers are encouraged to communicate feelings and feedback in a judgment-free space effectively. The implications for positive social change include the potential for more efficient delivery of nursing home services to communities, resulting in improved patient quality of life, decreased health care costs, and reduced government spending on health care.

Strategies for Emotional Intelligence Training for Improving Employee Performance

by

Dale Elizabeth Laing-Hall

MS, Nova Southeastern University, 2017

BS, Barry University, 2015

Doctoral Study Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Business Administration

Walden University

February 2023

Table of Contents

List of Tables	iv
Section 1: Foundation of the Study.....	1
Background of the Problem	1
Problem Statement	2
Purpose Statement.....	3
Nature of the Study	3
Research Question	5
Interview Questions	6
Conceptual Framework.....	7
Operational Definition	8
Assumptions, Limitations, and Delimitations.....	8
Assumptions.....	8
Limitations	8
Delimitations.....	9
The Significance of the Study.....	9
Contribution to Business Practice.....	10
Implications for Social Change.....	10
A Review of the Professional and Academic Literature.....	11
The Distinction Between Emotional Intelligence and Intelligence Quotient	12
Emotional Intelligence and Its Effects	15
Emotional Intelligence in Health Care.....	28

Transition	36
Section 2: The Project.....	38
Purpose Statement.....	38
Role of the Researcher	38
Participants.....	42
Research Method	43
Research Design.....	45
Population and Sampling	46
Ethical Research.....	47
Data Collection Instruments	48
Data Collection Technique	50
Data Organization Technique	52
Data Analysis	53
Becoming Familiar With the Data	55
Generating Initial Codes	55
Searching for Themes	56
Reviewing the Themes.....	56
Defining and Naming the Themes	56
Producing the Report	57
Reliability and Validity.....	57
Reliability.....	58
Dependability.....	58

Validity	58
Credibility	59
Transferability.....	59
Confirmability.....	60
Data Saturation.....	60
Transition and Summary.....	61
Section 3: Application to Professional Practice and Implications for Change	62
Introduction.....	62
Presentation of the Findings.....	62
Theme 1: Encouraging Effective Communication and Empowerment	64
Theme 2: Organization of Employee Resources	68
Theme 3: Fair-Minded Treatment and Respect	71
Theme 4: Fostering Teamwork Atmosphere	75
Applications to Professional Practice	78
Implications for Social Change.....	79
Recommendations for Action	80
Recommendations for Further Research.....	85
Reflections	86
Conclusion	87
References.....	89
Appendix A: Interview Protocol.....	110
Appendix B: Interview Questions.....	113

List of Tables

Table 1. Sources of Data for Literature Review	12
Table 2. Themes and Number of Contributing Participants	63

Section 1: Foundation of the Study

Emotional intelligence (EI) has been determined to have a greater effect on a person than intelligent quotient (IQ; Bressert, 2018). This is because the emotional mind is more powerful and detrimental than may be recognized. This rationalizes the mind to its purposes, feelings, emotions, and reactions, so getting a grip on it is vital to individuals' personal and professional lives. Consequently, because EI is so essential, its workplace benefits have been demonstrated to improve interpersonal skills, employee turnover, and job satisfaction (Ansari & Malik, 2017; De Simone Planta & Cicotto, 2018; Goleman, 2006). Greater awareness of the distinctions influencing the factors that affect employees and, influence decisions to stay in or quit a job or profession is critical for creating strategies for retaining employees (Nelson-Brantley et al., 2018). The advancement of effective leadership strategies for retaining quality employees could lead to higher success for health care organizations across the world.

Background of the Problem

Gaining a competitive advantage in the ever-changing business world is indispensable for an organization. The sharing of information and knowledge paves a path to gaining a competitive edge, innovation, imagination, the latest technology; the effort is made to determine how EI can support employees' behavioral outcomes, motivation, job performance, job satisfaction, mental well-being, employee turnover, and attitudes in the workplace (Ansari & Malik, 2017). When a single health care worker such as a registered nurse (RN) leaves an organization, the costs related to replacement of labor, recruitment, onboarding, separation, and loss of revenue may be as high as \$90,000 (Koppel et al., 2017), which places the annual cost of employee turnover in the billions

for the health care industry (Phillips & Harris, 2017). Subsequently, reducing health care workers' turnover should be a main concern for leaders of hospitals, nursing homes, clinics, and any other health care business seeking to improve profitability; nonetheless, some leaders lack effective EI strategies for retaining these employees. Researchers have stated that having leaders with high EI is pivotal to the creation of work environments and cultures that are advantageous to worker retention (Brewer et al., 2016; Goleman, 2006; Nelson-Brantley, 2018). Researchers at the Gallup (2016) organization conducted a meta-analysis on 339 research studies from 230 different organizations in 73 countries and 49 industries. Research findings indicated a link between employee engagement and performance, researchers noted that incidents involving patients decreased by 70%, profitability increased by 21%, and turnover reduced by 59% when employees were engaged in the workplace (Gallup, 2016). A business strategic plan is enhanced and advanced by creating environments that promote positive relations among employees and management, balance the overall needs of workers with those of employers, and encourage employee engagement.

Problem Statement

The lack of EI in the nursing home industry negatively affects employee turnover rates, patient satisfaction, and overall performance outcomes (Cascio et al., 2017). In one recent study, annual turnover among skilled nursing employees was 84.6% (Fuqua et al., 2018). The general business problem is that nursing home leaders do not understand the business benefits of providing EI training. The specific business problem is that some nursing home leaders lack strategies to apply EI training to increase job satisfaction,

reduce employee turnover, and improve interpersonal skills for performance improvement.

Purpose Statement

The purpose of this multiple qualitative case study was to explore strategies that nursing home leaders use to apply EI training to reduce employee turnover, increase job satisfaction, and improve interpersonal skills for performance improvement. The population consisted of nursing home leaders such as salaried full-time managers, directors, and human resources professionals and administrators. The study addressed what, if any, EI strategies participants had implemented to reduce employee turnover, increase job satisfaction, and advance interpersonal skills for performance improvement. The selected population of leaders was appropriate for this study because, according to Al-Bahrani (2017), employee motivation in the workplace is directly affected by the level of the manager's EI. The research findings may contribute to potential social change by reducing patient readmissions to hospitals, reducing employee turnover, increasing job satisfaction, improving interpersonal skills, and improving nursing facilities' overall performance in serving customers.

Nature of the Study

I chose a qualitative methodology for this study. Researchers use the qualitative method to comprehend the subjective and socially constructed meanings articulated by those who participate in the subject research phenomenon (Vass et al., 2017). Because the purpose of this study was to explore strategies that nursing home leaders use to apply EI training to improvement performance, the qualitative method was appropriate.

Researchers use the quantitative method to answer closed-ended questions that are not

asked in interviewees' natural settings, and the research participants are not provided with an opportunity to explain their responses (Saunders et al., 2015). Because understanding the strategies that nursing home leaders use required participants to explain their responses, the quantitative method was not appropriate for this study. Yin (2018) specified that mixed method research permits the researcher to address a much more complex study, which forces a much richer and deeper selection of data by using both qualitative and quantitative research. Because there was no need for the quantitative component, the mixed method was not appropriate for addressing this study's purpose.

I analyzed three research designs that researchers can use for a qualitative study on strategies to apply EI training to reduce employee turnover, increase job satisfaction, and improve interpersonal skills in nursing home facilities: case studies, phenomenology, and ethnography. Researchers use case studies to explore phenomena through asking *what*, *how*, and *why* questions (Yin, 2018). A single case study was useful and a better choice for contributing to theory and knowledge by checking, challenging, and expanding the theory, and it captured common cases, which included normal, everyday occurrences of social life related to a theoretical concept (Yin, 2018). While a single case study is the appropriate choice when a researcher intends to study one specific group (Yin, 2018), a multiple case study is another option for comparing results among distinct cases or groups and can provide a deeper understanding of a subject (Bhatta, 2018; Yin, 2018). With a multiple case study, the researcher can analyze the data within each situation and across different situations. Some other benefits are that the evidence generated from a multiple case study is robust and reliable and the researcher can clarify whether the findings from the results are valuable or not as they go along.

Because I sought to develop insights into the strategies that nursing home leaders, human resources (HR) professionals, and directors of nurses use to apply EI training to reduce employee turnover, increase job satisfaction, and improve interpersonal skills to improve employees' performance, a single case study design was appropriate for this study.

According to Rodriguez and Smith (2018), researchers use phenomenology to explore phenomena through the lens of how those phenomena are perceived and experienced by people, and not how events may have occurred. Because I was not seeking to explore a situation through the lens of how it was perceived by another person, the phenomenological approach was not appropriate for this study. Ethnography involves the researcher participating, openly or secretly, in people's daily lives for a prolonged period, observing what happens, listening to what people say, asking questions through unstructured interviews, and collecting data for the purpose of providing a deep understanding and awareness of an individual and their work environment from a cultural perspective (Reeves et al., 2008). Because, for my study's purpose, I did not seek to participate in other people's lives or comprehend the meaning of actions and events to characterize a culture, an ethnographic approach was not an appropriate methodology for this study.

Research Question

What EI training strategies do nursing home leaders use to reduce employee turnover, increase job satisfaction, and develop interpersonal skills to improve performance?

Interview Questions

1. What EI training strategies have you implemented to reduce employee turnover?
2. What EI training strategies have you implemented to increase job satisfaction?
3. Based upon your organization's experience, how have these strategies reduced employee turnover?
4. Based upon your organization's experience, how have these strategies increased job satisfaction?
5. What, if any, EI training strategies have you implemented to improve employees' interpersonal skills?
6. Based upon your organization's experience, how have these strategies improved interpersonal skills?
7. What key barriers did you experience to implementing the strategies you just discussed?
8. What did your organization do to overcome those key barriers?
9. How did you assess the overall effectiveness of the strategies for improving your organization's performance?
10. What other information would you like to share about your organization's strategies for EI training and their effects in reducing employee turnover and improving job satisfaction, interpersonal skills, and organizational performance?

Conceptual Framework

The conceptual framework for this study was EI, originally introduced by Beldoch (1964) and further developed by Salovey and Mayer (1990) and Goleman (2006). Goleman illustrated that EI could be portrayed as a person's professional success that was dependent not only upon intellectual skills, but also on the ability to self-manage and interact socially with others (Ricciotti, 2016). According to Brackett et al. (2006), a person's emotions hold all the information about the person's psychological atmosphere, and the slightest change can prompt a verbal or nonverbal reaction. Multiple researchers have suggested that when EI is incorporated into an organization, organizational performance improves (Goleman, 2006; Ricciotti, 2016).

Nursing home workers are affected negatively by lack of EI training (Major, 2016; Van Zyl et al., 2017; Weiszbrod, 2015). It is therefore plausible that increasing people's EI level is one viable way for employers to decrease employee turnover, improve job satisfaction, and increase performance. Leaders hoping to enhance individuals' self-awareness, self-management, social awareness, and social skills in the workplace have discovered the advantages of EI skill development via formal training, feedback, open communication, flexibility, and constructive criticism among all employees (Al-Bahrani, 2017; Bacon & Corr, 2017; Beldoch, 1964; Cascio et al., 2017; Goleman, 2006; Major, 2016; Meires, 2018; Ricciotti, 2016; Salovey & Mayer, 1990). Because EI has demonstrated the capability to enhance the desirable social skills and abilities of employees, EI was expected to be an appropriate lens to understand the successful strategies that nursing home leaders use to develop and implement EI training

to reduce employee turnover, increase job satisfaction, and improve interpersonal skills and performance.

Operational Definition

Emotional intelligence (EI): EI is defined as the ability or aptitude of an individual to manage their own emotions and identify those of the people around them and decide how to proceed based on these emotions (Goleman, 2006; Pirvu, 2020; Srivastava et al., 2017).

Assumptions, Limitations, and Delimitations

Assumptions

Assumptions are facts accepted as accurate that have no empirical substantiation to support them and therefore cannot be verified (Kottler & Balkin, 2020). In this study, assumptions included the idea that the impact of leadership in the workplace plays a crucial role in boosting employee morale, reducing patient readmissions to hospitals, reducing employee turnover, increasing job satisfaction, improving interpersonal skills, and improving nursing facilities' overall financial success. A further assumption was that all voluntary participants would respond to the questions they were asked in a forthcoming and forthright manner.

Limitations

Limitations relate to potential weaknesses of a study (Queiróset al., 2017). Being the only researcher responsible for data collection and analysis in this case study, I recognized the potential for subconscious biases to be introduced into the research. Palaganas et al. (2017) reported that sometimes researchers can be the greatest risk to their own qualitative case studies because it is impractical for individuals to separate

themselves from a study. Another limitation was the geographical shortcomings with the selected population. The sample included leaders from several nursing home organizations the state of Florida. This limited the ability to view perspectives from other organizations and states. Views and perspectives of the employees focused only on one type of employer.

Delimitations

Delimitations “are in essence the limitations consciously set by the authors themselves” (Theofanidis & Fountouki, 2019, p. 55). In other words, delimitation narrows down the research study to convey the point of it. Delimitation aides in clarifying the focus of a case study. The first delimitation of this study was to choose participants in the nursing home industry who had direct experience leading and managing employees. Applying this delimitation assisted me in capturing the interview responses that offered data from leaders who had influence on engaging employees and improving overall performance.

The second delimitation was excluding professionals with less than 1 year of service. This research was dependent upon viable, reliable, trustworthy, and accurate presentations of data from the chosen participants. This elimination increased the probability that the participants had a thorough understanding of the nursing home industry and were familiar with the managing team.

The Significance of the Study

The nursing home industry lacks mechanisms for handling low-EI behaviors and attitudes that will eventually lead to voluntary and involuntary turnover (Cascio et al., 2017). The findings of this study contribute to the field of nursing care by offering

strategies to manage and improve effective work relationships among frontline employees and their managers. These strategies may result in reduced turnover rates, associated facility costs, and patient readmissions to hospitals.

Contribution to Business Practice

Major (2016) identified that a collective group of individuals with high EI differentiates high-performing teams from low-performing teams. Improved EI in the nursing home industry may lead to decreased costs for facilities and improve the quality of patient care. Nursing home managers will benefit from increased EI through increased employee morale, improved communication skills, lower patient readmissions, and increased employee tenure for reducing costs and increasing organizations' performance.

Implications for Social Change

Changes in human relationships and interactions are at the core of what constitutes social change. EI has been demonstrated to promote emotional knowledge, perception, and regulation, as well as general intelligence (Mayer & Salovey, 1990). The social change implications of this study are that if EI can help individuals become more socially competent, they will have better relationships with other individuals in their communities and workplace (Dhani, 2017). EI has the potential to allow all human beings to effectively manage their own feelings, attitude, and mood while being less likely to jump to conclusions and understand each other's actions and emotions. EI has been demonstrated to be a common denominator of a satisfying life, psychological understanding, a healthy and successful interactions in the workplace and personal relationships. In contrast, a low level of EI is related to violent conduct and illegal and abusive use of drugs and alcohol (Dhani, 2017). The advantages of increased EI in the

workplace include enhanced intra- and interpersonal skills among employees, which result in improved relationships outside the workplace. These improved relationships can benefit communities through improved psychological and physical health and reduced dysfunctional social behavior, resulting in improved quality of life for the members of communities.

A Review of the Professional and Academic Literature

The purpose of this qualitative case study was to explore the lived experiences of nursing home leaders in their aspiration to create strategies to engage employees to connect and foster quality patient care for all. When employees are disconnected from the organization's mission, this may increase the likelihood of financial distress. The literature review was constructed by organizing content and information searches using a search strategy focused on Walden University Library databases and Google Scholar by reviewing peer-reviewed journal submissions in the following health care databases: ProQuest, Business Source Complete, ABIFORM, and Premier. The following keywords guided my database searches: *emotional intelligence theory, motivation, leadership, employee engagement, patient satisfaction, turnover in healthcare, nursing home performance, patient satisfaction, and workplace culture.*

Table 1*Sources of Data for Literature Review*

Publications	Published within 5 years of expected graduation date		% of sources
		Older than 5 years	
Journal articles	83	45	100%
% of total	100%	35%	65%

The Distinction Between Emotional Intelligence and Intelligence Quotient

People are more willing to align themselves with someone who is exemplifying emotional and social adeptness than with someone boasting about their intelligence quotient (IQ) score and how intellectually astute they are (Bradberry & Greaves, 2009; Goleman, 2006). EI is more important than IQ when it comes to achieving career success (Bressert, 2018; Campbellsville University, 2016; Goleman, 1997). EI is the capacity for an individual to understand other people, what keeps them motivated, and how to work collaboratively (Cleary et al., 2018). EI can be the solution to staff turnover, job satisfaction, company performance, and customer satisfaction. Employees with low EI are unable to identify their mood range; they are unable to express it in a healthy manner, which can only cause confusion in the workplace. Through EI training, employees can experience a stress-free workplace culture, problems can be communicated with compassion, teamwork collaboration can be high, and supervisors can witness a successful company with high-performing teams (Goleman, 2006).

Similarly, Bradberry and Greaves (2009) presented a short description of how people recognize and react to what they perceive. They stated that bodily sensations enter via the spinal cord and are processed by the ancient portion of the brain called the *limbic system*. This system is responsible for the managing of emotions and feelings. From this same system, the nerve instincts travel to the cortex, where people make all of their logical decisions. The issue here is that humans may make all of their quick decisions in the limbic area before they apply any rational thought to an event. By intentionally training themselves emotionally, individuals can interrupt unexamined emotions, swapping more appropriate behavior for the various occasions in their lives. According to Bradberry and Greaves, when EI was initially known it was the missing link and a very interesting find because people with a high ranking of IQ surpass those with an average IQ just 20% of the time, whereas people with average IQs outshined those with high IQs 70% of the time and the reason is the presence of EI. In other words, high IQ does not make much of a difference, missing anomaly was EQ. About 8 years after Bradberry and Greaves wrote the book *Emotional Intelligence 2.0* and claimed that EQ mattered more than IQ, Serrat (2017) contended the same.

Bradberry and Greaves suggested that if people are interested in making more money or performing better, both aspirations may be within reach if they learn to expand their EQ. EQ increases individuals' performance and overall success; it accounts for 58% of performance in all types of jobs and is the toughest driver of leadership and personal quality. One can be a high performer with low EI, but the chances are slim. Serrat (2017) described EI as the ability, skill, self-perceived ability, or capability to identify, evaluate, and control the emotions of oneself, of others, and of many groups. The theory is

enjoying substantial support in the literature and has had fruitful applications in many domains. IQ is a score stemming from one of several regimented tests to measure intelligence. Serrat stated that success does not automatically follow those who possess a high IQ rating; rather, it accrues to those with a combination of both EI and IQ. EI has been used to assess exceptionalness and sometimes strengthen recruitment. Watson (2019) contended that IQ, or traditional intelligence, is too limited; some people are academically brilliant yet socially and interpersonally incompetent. IQ is the ability to engage in abstract reasoning and the capacity to sharpen knowledge and solve problems, which is usually measured by assessing one's flowing intelligence, their ability to think laterally and recognize patterns.

Goleman (1997) stated that IQ only accounts for 10% of the ingredients people would need to succeed; the other 90% depends on EI. They are five major categories of EI skills that are recognized by researchers: self-awareness, self-regulation, social skills, empathy, and motivation. All employees should cultivate and nurture EI skills that are required to comprehend better, empathize, and negotiate with other people. Especially as the economy has become more global, succeeding at such skills will benefit us in our personal and professional life.

Leelavati & Chalam, (2020) in the early 1950's conducted a study on the IQ and EI tests of 79 PhD holders, they followed them from the time they graduated to the different and many events that happened in their live. After 40 years of the researchers reviewing and analyzing the participants' entire careers, choices throughout their lives, and curriculum vitae, as well as questioning their superiors and direct reports, the findings indicated that having social skills and emotional aptitudes was more important

than IQ by fourfold. This is not to say that social skills alone bring success. After individuals have exhibited a level of IQ, EI's role took them to the finish line (Leelavati & Chalam, 2020).

Emotional Intelligence and Its Effects

Bryant (2017) reported that the cost for long-term care facilities or nursing homes to replace employees costs between \$22,000 and \$63,000 annually per separated worker. According to Sharon and Grinberg (2018), EI has a strong emphasis on empathy and comprehension of one's own emotions and those of others. A human being's cognitive process, which is involved in the assessment of stressful situations, is associated with the development of EI. EI lowers the side effects of stress; for instance, it may encourage flexibility in situations of job insecurity (van Zyl et al. 2017). When people not only develop an awareness of EI management of the people around them, but also are equipped to manage tough relationships in many situations.

It is in the best interest of all organizational leaders to obtain a competitive advantage in this unpredictable economy, and EI is one such advantage. Ansari and Malik's (2017) conducted a study of 121 workers employed with 13 service industry companies in northern parts of India. The researchers examined the effects of EI and trust among the employees on sharing information, they did this by testing the moderating side effects of confidence in coworkers on EI, and the sharing of knowledge among each other. The value of employees sharing knowledge among themselves sets the culture of the workplace as they interact socially in the exchange of experiences and information to better manage customers, patients, and each other.

The findings of Ansari and Malik's study indicate that trust among coworkers and EI had an immense effect on the information sharing of all company personnel. However, trust among workers did not move EI knowledge sharing. The benefit of Ansari and Malik's study is that it enhanced the existing literature on EI and the sharing of information among employees in India and possibly in other parts of the world. Business leaders should aim to implement strategies for cultivating high levels of EI skills in workers because high EI may motivate workers to share and interact harmoniously with their peers and managers.

Ariga et al., (2020) conducted research that exemplified the importance of nurses' performance and how invaluable nurses are to achieving patient outcomes in hospitals. Therefore, the factors related to nurses' performance merit investigation. EI and workplace culture are believed to be related to nurse performance. This study utilized a cross-sectional design with 126 associate nurses who were carefully chosen using a simple random sampling technique. EI, workplace culture, and nurse performance were evaluated using valid questionnaires. Spearman-Rank correlation test was used for data analysis. The results indicated that most of the nurses had high performance, EI, and workplace culture. There were significant relationships between EI, workplace culture, and nurse performance, with strong ($r = .68$; $p = .01$) and medium levels ($r = .30$; $p = .01$), respectively.

These findings suggest that nurses with high EI and good-quality workplace culture would show excellent performance in offering professional nursing care to their patients. It is recommended for hospital managers and nurse managers to improve the EI of nurses and create a better workplace culture to improve nurses' performance. The

study findings show that health care workers such as nurses with EI can manage pressure, change work demands and urgency, and adjust to changing environmental demands.

Jimenez (2018) conducted a study about the transformational leadership approach and EI supporting managers' performance. This study described the influence that a transformational style and the EI flexibility subscale have on structural performance during change initiatives. EI and leadership theory represented the theoretical lens and framework in this research study. The EI flexibility subscale was evaluated with the EQ Inventory 2.0 (EQi 2.0), and transformational style was reviewed with the Multifactor Leadership Questionnaire (MLQ 5X). The study consisted of a population of 180 managers from a nonprofit company in Texas. The data collected were studied using multiple linear regression and Pearson correlational model to gauge whether a link existed between managers' EI flexibility subscale and transformational style. The findings showed a connection between the EI flexibility subscale and the transformational style. Jimenez's research study may be advantageous to leaders in all industries experiencing organizational change who are seeking to apply the EI flexibility subscale and transformational leadership style during the execution of change initiatives.

In the 21st century, business leaders, unlike those of prior centuries, are facing a cataclysm and high degree of uncertainty due to political, environmental, social, technological, legal, and economic forces, and these changes are what most professional organizations use to evaluate the overall performance of their businesses (Okyere et al., 2020). Because of the ever-changing global competition among companies the increased need for their greatest commodity—human capital—EI has become the focus of attention of many studies as an explanation for why some persons are more capable than others in

managing issues concerning organizational change. Van Zyl et al. (2017) concurred with this conclusion because without employees performing their job daily, businesses all over the world would not be as successful as their leaders would like them to be.

A workplace culture where open communication is flourishing, and everyone is conscious of each other's emotions and feelings is one that should be revered. According to Church and Burke (2018), if employers implemented change with a focus on people and their interpersonal relationships in the organization, then and only then would they be better off when applying any type of change initiatives. The focus of business leaders is on the future of quality talent management and not just bodies filling positions. Furthermore, due to this nurturing, a positive work culture where communication is open and constructive feedback reciprocated is an ideal place that improves interpersonal skills for the overall organization's performance improvement.

The concept of "for every action, there is a reaction" applies in the workplace, at home, at school, in public, or anywhere human beings may find themselves. Psychologists call this *emotional contagion*—the phenomenon whereby one person's emotions, feelings, and behavior directly trigger the same emotions and behaviors in other people around them (Barsade, 2002). According to Sutton (2007), patronizing people in the workplace does terrible damage to them and their employer. Sometimes, being a jerk or an *asshole* as Sutton puts it, allows an individual to win; however, even though they may win, they are still labeled a jerk, and no one wants to be around such a person. Demeaning people does the opposite of motivation; it discourages; it makes one sad, and when people become this way, they refuse to learn, grow, listen, share and even care (Sutton, 2007). A disengaged employee does nothing productive for an organization.

Equally important, as people continue to cope with the COVID-19 pandemic, it is appropriate to consider and reflect on the effect of leadership characteristics and organizational well-being on the procedures and delivery of health care. Long before this pandemic occurred, physician burnout, mental fatigue, and depersonalization affected more than 40% to 50% of health care workers such as physicians and was increasingly recognized as a public health emergency (Stapleton & Opiari, 2020). Effective leadership demands numerous executive, organizational, and technical skills, complemented by EI. A leader's own level of burnout and exhaustion has been shown to adversely affect their professional satisfaction (Stapleton & Opiari, 2020). When leaders are emotionally exhausted and depersonalization kicks in, many articles suggest that the team members whom they supervise will likely be negatively affected.

Motivated employees have long been part of workplace initiatives to aid in fostering a positive culture. The idea is that if employees are driven to success by having a high job performance outcome, this is a good indicator that they will provide an excellent customer service experience (Al Bahrami, 2017). Researchers have suggested that *doing good* is a commonly valued consequence (Al Bahrami, 2017; Church & Burke, 2018; Srivastava & Yadav, 2017). Castanheira (2016) surveyed over 350 customer service candidates, with results showing that the social impact and social worth of employees positively affected the customer's experience, making employees' work engagement and dedication much higher and therefore increasing profits for the employer.

Though Castanheira's (2016) findings indicated some positive results for workers and their jobs, the author failed to acknowledge that these agents are human beings, and

they are governed by their emotions, which can change quite a bit. Perhaps some employees sense more social impact and gain more gratefulness from customers because they provide better service on a particular day (Goleman, 1997). Castanbeira's results showed that employees were rated as good performers by supervisors 1 month later. This study had important implications, as it showed that perceptions of social impact and social worth among employees are imperative to driving a healthy experience at work. Pirvu (2020) reported that business owners are starting to wake up and realize the importance of their employees' emotional health in service-based industries, but unfortunately, research related to best practices in HR for fostering workers' emotional performance has failed to keep up some of these failures were what their thoughts were about their benefits, employer practices, exit interviews, and recommendations to management. Pirvu highlighted the three integrated models – skills, motivation, and opportunity to do better; if they were implemented by HR professionals should assist in increasing workers' EI and satisfaction within the workplace.

Nightingale et al. (2018) conducted research to further knowledge on the lack of compassion and care in the long-term care industry toward the elders in the United Kingdom. In this study, the participants were expected to have some level of EI. In contrast, Brody (2004) argued that EI has been overrated, suggesting that an individual may know the appropriate way to respond to someone sensitively, but this does not mean that they will necessarily act this way in practice. Indeed, contextual factors, such as social support or current stressors, may play a part in the outcome of an action.

Using the integrative review design, Nightingale et al., (2018) explored the relationship between health care professionals' EI and their interactive care. The review

analyzed nurses, nurse leaders, and physicians. The results indicated that care nurses' EI was connected to both physical and expressive caring, but EI may not be as crucial for nurse leaders and physicians. Age, experience, burnout, and job satisfaction may also be relevant factors for both caring and EI. As a result, the authors provided evidence that developing EI in nurses may positively impact certain caring behaviors, but other groups may be different.

Individuals with high EI are empathetic, sympathetic, and delicate to the feelings of others (Goleman, 1997). Srivastava and Yadav (2017) discussed how EI is a personal attribute that helps immensely when it comes to conflict management. The researcher's theory is in close alignment with Daniel Goleman's five key areas of EI, specifically: self-awareness, self-regulation, motivation, empathy, and social skills. The Srivastava and Yadav analyzed that because employees are the organization's greatest assets, ensuring that the right person is doing the right job at the right time is essential for making the system work for all. The results of the study exemplify that conflict management and team building ability of employees is affected by all four of Goleman's critical areas of EI. It is recognized that it all starts by realizing the need for tactfulness and resolution of issues that will involve a win-win for all, and disagreements are welcomed with continuous and open dialogue.

Individuals with an average score of EI afford people the ability to acknowledge their emotional state and that of all others around them. A parameter that can rescue workers from feelings of passionate disagreement, nervousness, pressures, and exhaustion are all benefits of EI (Mir & Sehgal, 2017). In other words, if feelings are left unchecked and or unresolved like anything that festers, it will cause more harm than good

in the end. Mir and Sehgal's (2017) study revealed that both male and female workers have some level of EI score, and their EI competence score can be increased so those same abilities will be readily accessible when needed in times of interpersonal issues. Thus, studies like this one are needed to remind practitioners that having employees with tangible and intangible skills and resources is crucial to the value of the organization's performance management. Nursing positions in the health care field are not only considered essential and necessary, but they should be filled with nurses with high levels of EI. Pérez-Fuentes et al., (2018) emphasized that nurses with higher levels of EI also score much more highly in engagement, with the interpersonal factor being the most significant predictor of engagement. Interpersonal factors, such as social support and the employee-supervisor relationship. This, in turn, fosters continued collaborative participation and performance. When nurses are engaged, it maximizes their psychological and physiological performance. This can only happen when management invests in EI training programs to improve the performance of nurses in the workplace.

Comparatively, here is another study where the author examined employee engagement as a potential mediator of the association between EI and job satisfaction. Extremera et al., (2018) pointed out that employees' EI was positively linked to engagement dimensions such as vigor, dedication, and absorption, as well as overall job satisfaction. The study contributes to the understanding of the processes involved in maintaining and enhancing positive attitudes at work, providing the first, encouraging evidence that work engagement plays a role in the EI-job satisfaction link.

The continuous drive, consistency, and enthusiasm employees need to thrive daily at work correlates with them having EI, which eventually brings about job satisfaction.

When employees are satisfied at work, it increases productivity, decreases turnover, less absenteeism, reduces workplace accidents, and unionization. If employees feel that their jobs are enjoyable and exciting, they will be more willing to put in extra effort for the benefit of the entire organization (Pirvu, 2020). Pirvu stated that EI has always been lurking around and leaving its footprints of emotions throughout each business and industry workplace. EI is central to four major areas of business: selecting and hiring quality candidates, building high-performance teams, career advancement, and rearrangements and workforce planning decisions. Businesses are managed by human beings who operate based on their emotions; these feelings tell us what is going on around us all.

Individuals must recognize how they feel in each situation to understand how decisions and choices are made (Pirvu, 2020). EI is defined as the ability or aptitude to be able to manage one's own emotions and identify those of the people around you and decide how to proceed based on these emotions (Goleman, 2006; Srivastava et al., 2017). Numerous researchers have acknowledged the emotional characteristics of dealing with change, yet there is very little research available that recognizes the emotional skills required to manage organizational change effectively. Scholars have even mentioned the provision of social backing as a technique for enabling that change (Pirvu, 2020); however, researchers are finding that this support can sometimes be an after the fact response to an ongoing problem rather than a proactive method of giving supervisors and employees the tool they require to communicate and collaborate harmoniously.

Some may contend that EI is for the soft and has no place in the workplace, but when people in the workplace do not act with EI, the negative expenses can be

enormous. Bitter conflict, low morale, and bad stress all limit business efficacy. In addition, the financial cost of litigation when people are disparaging or being bullied, overwhelmed, and demoralized (Lone, 2018; Prezerakos, 2018). The sooner nursing home practitioners implement policies and training that are comprised of EI, the sooner they will see positive business outcomes, cultivating teamwork and partnership, customer service, and the managing of diversity. Positively, this critical personal resource can be improved through appropriate coaching and training of each staff member.

Being part of a workplace culture where open communication is flourishing, and everyone is conscious of each other emotions and feelings within each coworker is one that should be admired. According to Church and Burke (2018), if employers implemented change with a focus on the people and their interpersonal relationship among them in the organization, then and only then would there be better off when applying any type of change changes. The future focus is on talent management and not just bodies filling a position. Most, if not all, jobs require teamwork; it requires that employees collaborate and interact with each other to accomplish projects and assignments. EI asks the questions, are some people good team players? Some people consistently cause their group to exceed its predicted performance, why is this true for some and not others (Weidmann & Deming, 2020). EI creates a path for employees to excel in the workplace with their interpersonal and intrapersonal skills when working together with coworkers, which will reduce employee turnover, increase job satisfaction, and improve interpersonal skills for performance improvement (Weidmann & Deming, 2020).

Building a workplace that is filled with people that are conscientious of their emotions, behaviors, how they impact those around them, and welcome the learning curve that comes along with managing them should be part of every business workforce purpose. Especially when it can lead to better business decisions, employees with high EI are more likely to control themselves; they are keen listeners, reflective, and are open to constructive criticism. Afonso et al., (2017) reiterated that since employees spend half of our lives in the workplace, those hours must be spent in a happy and engaged state. Keeping employees motivated and engaged is an aim that employers have been struggling with for quite some time, and EI can be that bridge that can allow them to attain this finally. Moreover, the idea that a psychologically healthy workplace can be a place in which we can foster desirable employee welfare measures has been encouraged over the years. According to a common business quote phrase, “happy employees, happy customers.” With this simple logic in mind, if implemented, EI can create an atmosphere that is like no other; it will be foster a culture of constant knowledge, collaboration, change and then rinse and repeat. Weidman et al. (2020) and Church et al. (2018) agree employees that are valued for who they are, value each other and are invested in the organization's overall performance improvement.

Furthermore, Issah (2018) explored that taking a closer look at EI through the microscope of leaders making changes within an organization. Precisely, Issah pinpointed out the different standpoints of EI and the related five parts, which are self-awareness, self-regulation, self-motivation, empathy, and social skill. Because no one likes to change from their normal status quo or say good-bye to what they believe EI must be at the forefront of any leadership change initiative. Issah (2018) identified three perspectives of

EI: the ability model, traits, and the mixed model. The ability model considers the ability of the person to develop emotional data and use it according to the social environment. Trait focuses on a person's behavior and their perceived abilities. The mixed model is a combination of mental and dispositions abilities. They were summarizing that EI contributes to change leadership, concentrating on creating a team to affect positive change and overpower resistance to change. Church et al., (2018) and Issah (2018) both examined EI and how it affects the workplace when changes take place. Consequently, both agreed that when EI is included with the people in mind, the results are positive for all included.

Considering the effects of EI on teenagers, Nouri et al., (2017) conducted a research study based on the effects of the EI training of 100 male high school students in Iran. The students were selected randomly picked for the controlled group and experimental group. Using the Statistical Package for the Social Science which is a patented trade name for the software along with another test to aid in the data analysis exemplified that the training of EI based on social support was successful in reducing stress and endorsing the communication skills of students amongst their peers and teachers. Empirical research studies report over and over that more than 80% of successful people are at the top of their careers due to interpersonal, intrapersonal EI skills that can only be acquired through human interaction (Nouri et al., 2017). Keeping people motivated has long been part of the conversation in businesses, schools, and even in our personal and professional life. This research paper adds to the body of knowledge by inviting nursing home leaders, health care employees, and even students across universities to seek out ways to increase their EI skills.

EI has been demonstrated again and again to be a pertinent resource linked with a healthier adaptation of one's personal and social skills. Delhom et al., (2020) focused their study on the benefits of EI not only for the health care workers providing the care but, how about the residents and or patients needing the care. Within older adults, it has been associated with concepts such as life contentment and toughness, which is linked in the field of gerontology, which is the study of aging and in older adults (Delhom et al., 2020). The researchers in this field are different and are trained in various areas such as social science, psychology, physiology, policy, and public health (University of Georgia, 2020). Overall, Delhom et al., (2020) study showed there was an increase in "life satisfaction and resilience." EI skills are considered to produce positive, reasoning and behavioral outcomes for change adaptation during aging. Thus, the contributions to the quality of life of the elderly are important because of increased longevity.

According to Janssen et al. (2018), "mindfulness meditation is an attitude and a method for reducing personal suffering and developing insight, compassion, and wisdom" (p. x). Subsequently, mindfulness intercessions in the workplace aim at workplace functioning: improving decision-making, productivity, interpersonal skills, reducing stress, organizational relationships, perspective-taking, resilience, and self-care. This definition aligns with the concept of EI and how crucial it is to identify one's emotions with nothing short of love. Mindfulness has been shown to improve and promote person-centered attitudes and construct a community among all clinicians (citation). Horton and Epstein (2020) suggested several practical strategies can be implemented by those working in health care as they seek out to exemplify more mindful leadership. Some of those strategies ranged from deep listening to emotional

self-adeptness, in addition to how they can be cultivated and improved by mindfulness practices.

One claim that has been used in relation to EI is that “you can’t teach old dogs’ new tricks” meaning, people who are accustomed to doing things in a particular way will not abandon their habits. In a study carried out on professional executives of about age 50 years old executives, it was noticed that emotional proficiency increased by 66.5% after the completion of a personality development course, contradicting that claims altogether (Leelavati & Chalam, 2020). If an individual was asked to reduce their rage and speak civilly, this might not happen instantly but with purposeful practice, this can be accomplished. An ample amount of research was carried out on the topic (Goleman 2006; Leelavati & Chalam 2020) EI, and it is apparent from the studies that genetics plays a significant role in establishing EI levels of a person. One's experiences as a child also have a major role in influencing a child into a person with high EI. Every person wants to change for the better, but only a few tries to adjust their behavior and or attitude. At first, if a person is trying to change their emotions such as fear, anger, it may not be expressed out on their physical appearance, but the emotional eruption may be happening inside (Leelavati & Chalam, 2020). Peoples EI changes as they age as a person come across life-altering experiences. EI aids in bridging a balance between work and life. It helps to realize both physical and mental health.

Emotional Intelligence in Health Care

EI has been examined in substance abuse centers because substance abuse is an ongoing societal problem that impacts people in communities globally, either through direct personal impact or the associated financial costs. Nevertheless, substance abuse is

repairable, but if the therapist leaves the organization after improving a client, the probabilities of that person going back to the abuse are very high. Jafferian (2016) conducted a study to evaluate the repercussions of a supervisee's perceptions of their manager's cultural humility and the supervisor's working alliance. The non-experimental correlational study was done to examine the relationship between perceived EI of midlevel managers at an abuse center and the turnover intentions of the employees who reported to them. The findings demonstrated that employees who rated their managers with high EI were less likely to leave the organization than those that reported their managers with low EI. Here is another study that reminds one again that there are more benefits of having EI as part of an organization's mission than not having EI as part of the overall business strategies. The potential to reduce employee turnover, increase job satisfaction, and improve interpersonal skills for performance improvement keeps sounding loud and clear.

Ostensibly, extensive scientific evidence has validated the significant role that EI plays in the nursing home setting; however, researchers continue to argue the need to enhance and promote this concept, especially in multifaceted clinical settings (Jurado et al., 2018). Nightingale et al., (2018) invested their time to further the knowledge on the lack of compassion and care there is in the long-term care industry towards the elders. In our current society, candidates are expected to have a decent level of EI, though it was argued that EI had been vastly overrated. Using the integrative review design, Nightingale et al., explored the relationship EI has in health care professionals and their interactive care. The research indicates that EI care nurses connected to both physical and expressive caring, but EI may not be as crucial for nurse leaders and physicians. It is

important to note that the age, knowledge, burnout, and job satisfaction may also be relevant factors for both caring and EI.

Comparatively, the drift of population ageing is a critical universal condition and is expected to impose dire socio-economic complications on our current populations in the future (Asiamah & Azinga, 2017). It is influencing the global burden of disease is increasing, and the consequences of this situation for the future are breathtaking. Asiamah et al., (2017) experience and recommend a framework that would guide the development and institutionalization of a specialized system of geriatric care, now called emotional geriatric care. If baby boomers are retiring and unable to care for themselves, they are retiring to nursing homes and independent living centers, which will require a need for nursing care of some sort. Positive connotation between EI and health care performance and quality is continually growing. Though EI research is still lacking in many authorities and little of the previous empirical evidence exists in some countries, most studies have indicated that the application of EI in health care contributes to health care quality and performance enhancement in the workplace.

Previous studies have established that senior care employees are exposed to a significant number of factors that can disturb their levels of job satisfaction and job-related bad stress. Although working with older adults is emotionally challenging, little research has been conducted on the role played by perceptions of emotionally demonstrative rules, alongside more traditional work characteristics and individual factors, in the forecast of elderly care employees' wellbeing (Lee & Jang, 2019). Lee and Jang (2019) examined the role played by work characteristics, job stresses, job control, emotional display rules, and individual distresses factors to predict job satisfaction

and exhaustion among care nurses. The results of the survey reveal two main developments of burnout and job satisfaction among women geriatric care workers, specifically, job control process and job demand. That leaders must inform nurses about how to cope with emotional demonstration rules in retirement and long-term care homes as they are ones who have direct contact with the patients.

According to the Bureau of Labor Statistics (May, 2020), employment of registered nurses is expected to grow by 12% from 2018 through 2028. This is much faster than the average for all other occupations in the United States. This growth will occur for many reasons, including an augmented emphasis on preventive care that is increasing rates of chronic conditions. Such as diabetes and obesity, and a need for health care service industries from the baby-boom population, especially as this group lives longer and has a more active lifestyle. Phillip and Harris (2017) study were developed to map what is known about EI in relative to employee job satisfaction and retention in nursing, and the tools that are utilized to determine EI in this context. They concluded that nurses were unsatisfied when their communications were overlooked, or their attempts to create a shared dream and teamwork were ignored by management. The shortage of practicing has long been a problem for health care organizations, with the use of EI concept it may provide fresh insights into ways to keep nurses engaged in the practice and to improve in their nurse retention.

According to Kaspar and Hartig (2016), the care of older people described as involving considerable emotion-related affordances. Researchers in vocational training and nursing disagree on whether emotion-related skills could be theorized and assessed as professional competence (Kaspar & Hartig, 2016). Studies on emotion work and empathy

regularly neglect the multidimensionality of these problems and their relation to care development and are rarely conclusive concerning nursing behavior in practice. To test the position of emotion-related skills as a facet of client-directed geriatric nursing competence, 402 final-year nursing students responded to a 62-item computer-based test. Emotion-related test items did not form a separate subdomain and were found to be discriminating across the whole competence continuum. Responsibilities concerning emotional work and empathy are consistent indicators for various levels of client-directed nursing competence. Claims for a distinct emotion-related competence in geriatric nursing, however, appear excessive with a process-oriented perspective.

Delhom et al., (2020) described that a mediation based on EI is effective in older adults. EI is a robust interpretation tool of negative mood. Applying emotional skills appropriately can help to improve positive emotional states and lessen negative ones. The researchers sought to implement EI intercession designed to develop clarity, repair EI components and handling strategies, and reduce negative mood in older adults. Participants were randomly appointed to the treatment or control group. The participants comprised of 111 healthy older adults; 51 in the treatment group and 60 in the control group. An EI program was executed. The program was administered over 10 sessions lasting about 90 min each. Measuring EI components (attention, clarity, and repair), handling strategies, despair, and mood were evaluated. After the EI mediation, the participants revealed significant increases in their levels of clearness and emotional repair and in-between levels of attention. The intervention was found to influence “adaptation results, increasing the use of adaptive coping strategies and decreasing the use of

maladaptive strategies, as well as reducing hopelessness and depressive symptoms” (Delhom et al, 2020, p. x).

Alsufyani et al., (2020) stated EI refers to a social skill, which enables individuals to regulate in a healthy manner of emotion and cope up with the various demands and environmental demands. This assists in enriching professional competence that enable better delivery of services. The nursing professional describes a social and personal aspect that EI involves and further interprets a meaningful role of EI in both the thoughtfulness and moral element of clinical practice. The nursing professionals who acquire increased EI few experience “emotional psychosomatic symptoms and emotional exhaustion, greater workshop collaboration and teamwork, more satisfaction with their jobs, fewer unidentified patient care needs, and better emotional health” (Alsufyani p. 82). EI welcomes not only a person’s awareness of emotions; it paves a path for them to provide quality care and support to their patients. Additionally, the ability to discover and understand EI will remain an indispensable aspect of the clinical nursing practice moving forward, despite the misinterpretation and confusion about EI as a concept.

Caring for our older adults is one that can be enjoyable and stressful all at the same time Ploeg, et al., (2020) and ever-growing as stated already by the BLS as baby boomers are living longer. Nursing homes (NHs) are no strangers to risks and employee burnout (citation). Nevertheless, some professionals in this setting manage to surpass others with overcoming the burnout with the assistance of their EI (Demerouti, 2014). In the same way, Aldaz et al., (2019) has described two critical predictors of burnout in nursing settings are alexithymia (a lack of skills to detect and describe one's own

emotions) and EI (the ability to interpret, to comprehend and regulate emotions; Goleman, 2006; Katsifaraki & Wood, 2014; Shead et al., 2015).

Aldaz et al., (2019) performed research to identify the explanatory power of alexithymia and EI over burnout and to explore their shared descriptive capacity over burnout in the context of baby boomers needing care. One hundred and fifty-nine participants voluntarily and anonymously completed the survey; neither did they know the purpose of the survey. The data was checked using regression analyses. The analysis showed that alexithymia made a slight contribution to the detachment and personal achievement dimensions of burnout, controlling for the influence of work characteristics. In contrast, EI did not have incremental validity over alexithymia in defining burnout. In essence, Alexithymia, rather than EI, is a more influential descriptive variable for burnout among certified nursing assistants (CNAs) working in nursing homes (NH). Aldaz et al., (2019) stated that researchers should consider this when studying personal tools to prevent and manage burnout among these assistants. Training nursing assistants to detect and communicate emotions should be considered as part of their training programs and or in NHs is an established strategy to avoid burnout and to improve the quality of our elderly. Previous research has examined the association of EI in health care, I have found minimal studies examining EI in nursing homes; and how those leaders lack the strategies to apply the training to reduce employee turnover, increase job satisfaction, and improve interpersonal skills for performance improvement. The research findings of Aldaz et al., (2019) contributed to the research by pointing out that alexithymia added to the nursing assistants burning out, not EI. Instead, it stipulated that because these CNAs lacked EI

skills, they missed out on mitigating the effects of alexithymia, which added to their burnout and the employer's turnover rates.

Crowne et al., (2017) examined the effectiveness of EI and leadership development that involves 20 nurse leaders in NHs. They also explored the relationship between EI and transformational leadership. The findings of their research indicate the EI educational enhancement was adequate, while the personal leadership development did not have any effect. Besides, the data showed a significant positive relationship between EI and transformational leadership (Crowne et al., (2017). Furthermore, this study, just like this current study, was focused on nurse leaders in NHs, so the findings may not be generalized to other populations. Likewise, the findings of this research added to the data on EI and the importance of nursing home leaders adopting training initiatives on EI skills. This may provide information that would be useful to others who wish to develop EI and or leadership education for their health care employees and, in return, retain knowledge within the organization.

End-of-life care in the neonatal intensive care unit is considered one of the most challenging duties for nurses (Lewis, 2019). The adverse emotions that are linked with moral distress may result in insufficient level care, or for nurses to become disconnected. In similar fashion Aldaz et al., (2019) concept of alexithymia, Lewis, 2019 arrived at the same concept that if employees, whether nurses, CNA's or any employee that was not engaged in their workplace it would cost employers increased cost in employee turnover among other things. The evidence supports the effectiveness of EI in bedside nurses as a technique to improve quality nurses and patient results. Additionally, research recommends and suggests that various training interventions can improve EI and the

interventions should be incorporated into strategies and staff training (Aldaz et al. 2019; Alsufyani, 2020; Crowne et al. 2017; Lewis, 2019).

Work stress that eventually leads to burnout in the workplace has long been deemed one of the reasons why many NH employees leave their jobs (Nespereira-Campuzano et al., 2017). Nespereira-Campuzano et al., (2017) surveyed approximately 60 professionals to determine stress levels in relation to EI in nurses and health care assistants. Moreover, the findings of Nightingale et al., (2018) indicated that the EI care nurses were connected to both physical and expressive caring, the burnout, and job satisfaction may also be relevant factors for both caring and EI. The burnout levels of the sample were medium-high. EI is associated with work stress, and the understanding of one's emotional well-being affects their fulfillment. Health care professionals with more job stability and moderate levels of EI show a better capacity to feel and express feelings (Nespereira-Campuzano et al., 2017).

Transition

In Section 1, I discussed the background of the problem, explaining why the lack of EI in the nursing home industry negatively affects employee turnover rates, patient satisfaction, and overall performance outcomes. The purpose statement explains why this was a vital business problem that should be explored. The research question explores answers focused on what strategies nursing homes can implement to influence employee engagement in health care. The literature review is focused on various aspects of EI theory, motivation, leadership, employee engagement, patient satisfaction, turnover in health care, nursing home performance, patient satisfaction, and workplace culture. In the literature review, the research established specific drivers that influence employee

engagement. In Section 2, I provide detailed information regarding the role of the researcher, the participants, population and sampling, ethical research, data collection instrument and technique, data analysis, validity and reliability, the research design and research methodology for considering the problem statement. In Section 3, I will present the application to the professional practice, the implication for social change, the recommendation for action and further research, some reflections, the results of this study and the meaning of the study related to the business practice.

Section 2: The Project

Section 2 begins with the purpose of the study. This is followed by descriptions of the role of the researcher, the participants, research method and design, population and sampling, and ethical research considerations. In the second half of this section, I describe the data collection instruments, data collection techniques, organization techniques, analysis, and the reliability and validity of the data.

Purpose Statement

The purpose of this multiple qualitative case study was to explore strategies that nursing home leaders use to apply EI training to reduce employee turnover, increase job satisfaction, and improve interpersonal skills for performance improvement. The population consisted of nursing home leaders such as salaried full-time managers, directors, and human resources professionals and administrators. I sought to determine which, if any, EI strategies they had implemented to reduce employee turnover, increase job satisfaction, and advance interpersonal skills for performance improvement. The selected population of leaders was appropriate for this study because, according to Al-Bahrani (2017), employee motivation in the workplace is directly affected by the level of the manager's EI. The research findings may contribute to potential social change by reducing patient readmissions to hospitals, reducing employee turnover, increasing job satisfaction, improving interpersonal skills, and improving nursing facilities' overall performance in serving customers.

Role of the Researcher

My role as a researcher in this qualitative study was to simplify the data-gathering process, initiate and complete data analysis of peer-reviewed and seminal works, and

present the results and findings as practical information for educators, business owners, government initiatives, and all interested parties. Researchers must be aware of any ethical and legal standards as they relate to their research because they can prevent issues that may arise during the research process (Seyedsafi, 2017). Keeping the entire research study as professional and research focused as possible is essential for accuracy, protection of all participants' welfare, and the protection of intellectual property rights (American Psychological Association, 2010). I had no direct affiliation with any of the participants, and as such, no ethical issues existed in this research. I know about the research topic due to my 13 years of administration and organizational experience in the health care and nursing industry as a HR professional.

In my role as the researcher, I presented the interview questions, reviewed publicly archived company documents, recruited participants, transcribed and summarized the interviews, and analyzed and interpreted the data. I followed all of the guiding principles established to ensure a rigorous study in addition to respecting all participants, a thorough informed consent, and adhering to measures to protect the privacy and confidentiality of the participants (Brothers, 2019). I used a set of 10 questions (see Appendix B) for managers and performed interviews in a formal setting. The participants consisted of salaried full-time managers, directors, executive leaders, and administrators working in the nursing home industry in Florida. These participants knew in advance that their participation in this research study was voluntary. They did not suffer any penalty now or at any time for being a part of this study.

There are numerous approaches available for qualitative researchers to address biases. Reflexivity is one of them. It is the process of making researchers' implicit

assumptions explicit (Beger, 2013; Cruz, 2015), meaning that it is a method of constant reflection on the research process by a researcher conducting research. In its most basic term, reflexivity is a sense of self-awareness. Qualitative researchers use the strategy of reflexivity to boost research rigor (Palaganas et al., 2017). Strategies for reflexivity may consist of critical reflection (Phillippi & Lauderdale, 2018), reflective journaling, or simply internally reflecting thoughtfully on the research process (Fusch & Ness, 2015). Reflexivity can also benefit researchers by helping them to become conscious of how the morals, principles, opinions, and experiences that they have brought to research can be a positive outcome. For these reasons, reflexive journaling was one of the tactics I used to mitigate the effects of my personal biases in the research processes and steps. During the data collection and analysis process, I recorded my explicit and implicit ideas and themes in a journal to aid me in sorting my thoughts and recording data points about my observations.

Fusch and Ness (2015) reported that an interview protocol (see Appendix A) is an exceptional tool for lessening researcher bias. A protocol is a list to guide the overall interview process; it not only contains the questions that will be explored during the interviews but is also primed to ensure that the same line of inquiry is ethically and equally practiced with each person interviewed. This process paved a clear path to ensure transparency and transferability. The interview questions and the research question must support each other (Yeong, 2018). An interview protocol can add to the objectivity, credibility, and trustworthiness of studies (Moser & Korstjens, 2018). For these reasons, I employed the protocol to guide the interview process with each participant. Thus, I was able to preserve consistency between participant interviews.

The Belmont Report provides a standard of ethics and serves as an ethical framework for research involving human subjects or participants. The sole purpose of the *Belmont Report* is to govern the moral conduct of human research (Miracle, 2016; National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 1979; Sims, 2010). The report consists of three ethical principles: beneficence, justice, and respect for each person. The application of the principles involves a researcher acknowledging first the “do no harm” approach; this is done by informing the Institutional Review Board (IRB) as well as any potential participants about the researcher’s plan to reduce risks as much as possible, by being transparent on how the study will be conducted, and by explaining measures that will be taken to protect the rights of the subjects.

All researchers must be willing and able to share the discoveries of their research (National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 1979). Fair-mindedness is an important concept that paves the way to trust and justice; receiving less than the standard of care is unacceptable (National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 1979). The last principle of respect for people highlights a person being able to comprehend the information that is being presented to them and be completely autonomous. Once enough correct information has been received, people should be able to make their own decisions, and those decisions must be respected. Moreover, the same respect must be given to vulnerable persons such as the elderly and children, and the mentally disabled should not be included in most cases.

Participants

The criteria for participants usually derive from a study's research question (Farooq & de Villiers, 2017). Participants were selected from nursing homes in the state of Florida. These participants consisted of salaried full-time managers, directors, and executive leaders and administrators working in the nursing home industry in the state of Florida. The reason that these leaders were selected from various nursing homes was due to the fact that in the state of Florida, most of employees in health care, work in the nursing department not administrative, which the director of nursing and administrator oversees. Moreover, obtaining the opinion of this particular group allowed me to address a considerable percentage of the interpersonal issues that may or may not be in this nursing home. Another reason that these leaders were chosen was that nothing takes place in the nursing home without these leaders' approval. The decisions these leaders make regularly affect the lives of all employees in the facility, whether they are CNAs, nurses, or employees in the other administration departments. How these leaders behave in all they do is a critical factor for the work life and daily performance of the employees they supervise because employees look for guidance and direction from their leaders and trust them not to lead them astray.

Furthermore, Saunders, Lewis, & Thornhill (2015) contended that obtaining access to data that will illuminate research is essential. I have worked in 10 different nursing homes in the state of Florida as a receptionist, admission coordinator, HR coordinator, manager and director, with 13 years of overall experience. My familiarity and knowledge have afforded me the ability to understand business practices, how policies are developed, and private information about the culture and experience of

employees' actions. According to Henry (2011) and Rezvani et al., (2019), people, in general, will trust other human beings when they (a) are consistently truthful and honest; (b) keep their promises; (c) are unbiased and seek justice for all; (d) have respect for others, not because of their role, but because it is the right thing to do as a human being; (e) remain accountable and cooperative; and (f) promote communication and inclusivity.

I informed the interviewees that I was working on my doctoral study in business administration, I explained my business problem, and described how my findings may benefit everyone. Then, I continued by explaining their role in my project and if they would allow me the pleasure of interviewing them. I assured each participant of the privacy of the information that they shared with me and the gravity of my role as the researcher, not to mention the ethics and integrity that the research demanded, in an effort for them to feel safe and free and able to be honest and transparent.

Research Method

Quantitative and qualitative are the primary research methodologies used in social and human sciences (Smith, 2017). I selected a qualitative methodology for this study. Using qualitative data to test a theory is what research study is all about; it paves the way for researchers to grasp the subjective and socially built meanings articulated by those who participate in a research phenomenon (Saunders et al., 2015). Smith (2019) stated that qualitative research is subjective and is seen through the eyes of the participants in the research. According to Smith (2019), researchers use qualitative methodology to develop a theoretical explanation, while, the data is still being collected and analyzed, as a result of making the research project data-driven (Smith, 2019). Qualitative methodology is quite different from a subjective approach with the views of whatever the

participant's perspective is. The process is more inductive, and based on the patterns developed, the findings will be the basis for the research (Smith, 2017). Onwuegbuzie and Leech (2005) ascertained that the method a researcher chooses should be determined by the research questions and aim of the study. Both qualitative and quantitative methods can aid researchers in understanding the world they are in and how people interact with each other. The qualitative method was the best approach for this research because I sought to evaluate the participants' perceptions, emotions, and personal experiences in their own environment.

According to Smith (2019), quantitative research involves a deductive approach, meaning that data are collected from an experiment or survey, and based on the research results, a hypothesis derives, a cause-effect. Researchers use the quantitative method for measurement and analysis of numerical data collected through polls, questionnaires, and surveys. Researchers use the quantitative research method to measure behaviors; however, quantitative research findings cannot indicate why people exhibit behavior or how to change behavior. Smith (2019) explained that researchers can use the qualitative research method to identify and understand why participants behave in a particular manner.

Shorten and Smith (2017) expounded that the mixed method should only be used when the research questions cannot be answered by either the qualitative or quantitative method alone. Mixing methods within one study can add to the complication and confusion of conducting research. To limit this confusion with the mixed method, researchers Shorten and Smith recommended that a researcher prepare for the additional resources needed, such as time for training and personnel for thorough data analysis and

data synthesis. Because the mixed method is used to collect, analyze, and combine both quantitative and qualitative data within a study to produce conclusions that are more credible (Ivankova & Wingo, 2018), this method was not appropriate for this study.

Research Design

This research study was prepared using a case study design. According to Yin (2006), a case study design is descriptive in nature. I used the case study design to explore what EI training strategies nursing home leaders use to reduce employee turnover, increase job satisfaction, and improve interpersonal skills to improve performance. According to Rodriguez and Smith (2018), researchers use phenomenology to explore phenomena through the lens of how those phenomena are perceived and experienced by people, and not how events may have occurred. Because I was not seeking to explore a situation through the lens of how it was perceived by another person, the phenomenological approach was not appropriate for this study. Ethnography involves the researcher participating, openly or secretly, in people's daily lives for a prolonged period, observing what happens, listening to what people say, asking questions through unstructured interviews, and collecting data for the purpose of providing a deep understanding of and awareness into an individual and their work environment from a cultural perspective (Reeves et al., 2008). For the purpose of this study, I did not seek to participate in other people's lives or comprehend the meaning of actions and events to characterize a culture; thus, an ethnographic approach was not an appropriate methodology for this study.

Case study is a popular technique because researchers can use case studies to develop theories by tying together conclusions and observations from existing literature

and experience with a rough association to data. One of the advantages of case study is the ability to make a close connection with empirical reality. This linkage permits the development of viable, related, and valid theories (Bhatta, 2018).

Researchers use case studies to look at phenomena in their real-life settings and differentiate the research strategy from many others. Although a survey design is performed in a real-world setting, the ability to comprehend side effects is not limited by the number of variables for which the data can be collected (Yin, 2018). Furthermore, researchers use case studies to describe the situation or phenomenon of EI training with in-depth description. Yin (2018) further reported that researchers normally use case studies when the borders inside the problem studied and the setting within which it is calculated are not always visible, meaning that context is everything as it relates to case studies.

Population and Sampling

The population for the study consisted of salaried full-time managers, directors, executive leaders, and administrators working in the nursing home industry in the state of Florida. The sampling method that I selected was purposeful sampling. According to Hamilton and Finley (2019), purposeful sampling is primarily used in qualitative research for the documentation and selection for comprehensive cases. It also includes selecting individuals who are experts and knowledgeable in a specific industry or phenomenon. The population for this study consisted of individuals who are decision-makers in the workplace, where they are involved in everyday nursing home operations and fully understand the ramifications of each department and the business.

Researchers use data saturation to demonstrate that a research study is valid and reliable. A large sample size does not guarantee data saturation. Data saturation is achieved when themes are repeated, further coding is no longer achievable, and another researcher can follow and replicate the study and arrive at the same results (Fusch & Ness, 2015; Guest et al., 2020). Data saturation makes research worthwhile, providing productive rigor and adding to the credibility and transparency of the research, the researcher's credibility, and the contribution to the field. I ensured the data saturation was achieved for this research by continuing to interview participants, and if necessary, recruiting and interviewing additional participants until no new themes emerged.

Ethical Research

Researchers are mandated to follow all applicable codes of ethics in relation to dealing with human subjects (Msoroka & Amundsen, 2018). For the rights and protection of all participants, the entire process of sampling and data collection was not taken place until IRB approval was received. To guarantee that all participants made an informed decision, each one received the IRB-approved consent form, which included the purpose and justification for the research study, guarantee of privacy protection, and information about me. All the consent forms included IRB approval number **02-25-22-0864281** and the contact information for the institution and to confirm the research study's legitimacy. The informed consent form indicated that there was no reward for participating in the study. The participants' ability to remove themselves from the study at any time was available. Participants could withdraw from participation by email or telephone. To ensure confidentiality, I replaced participant names with identifiers such as MA, MJ, AM and so forth. When the study was completed, the final document included Walden

University's IRB approval number. The data will be locked, protected, and kept safe for 5 years. After 5 years, all papers will be discarded and shredded; files will be deleted from all computers, including any removable or nonremovable media devices; and all recordings will be expunged.

Data Collection Instruments

As the interviewer I conducted semistructured audio recording interviews, I served as the primary data collection instrument. The integrity of the research was not only contingent on the execution of processes but also on the self-awareness of the researcher in addition, the interaction between the participants and the interviewer facilitated invaluable information about their life experiences (Barrett & Twycross, 2018; Noble & Heale, 2019; Queirós, Faria, & Almeida, 2017).

The semistructured interview protocol included a list of deeper open-ended questions, and semistructured interview questions that established a suitable instrument for collecting viewpoints from participants (Evans, 2017). The data collection instrument consisted of an audio recording software called Zoom in combination with notebooks and writing instrument. My personal journal allowed me to take notes while listening to the participants. I took into consideration the goal of the study by creating the collection instrument to solicit answers to my research questions. The recorded audio allowed me to listen intently in the way they responded to the questions, the excitement in their tone and pitch that will enhance the theming and analysis of the data (Labra et al., 2019). My evaluation of the interview answers may show a reasoning on common themes listed in the literature review.

I planned to ask each participant the same set of questions, which ensured consistency. Only those individuals who satisfied the eligibility criteria and provided voluntary consent to participate was interviewed. As I mentioned above, all interviews were conducted via virtual Zoom meetings due to the COVID-19 pandemic to keep all parties safe and protected from any exposure. During each interview, I briefly introduced myself to each participant and describe the nature of the study, reminding them that participation is voluntary and that their identity will remain confidential and anonymous. Additionally, I reminded each participant to ask questions and share personal experiences and information about the questions that were asked. After the brief introduction, I asked each participant the permission to begin the interview and seek approval to audiotape or record the interview.

During the interview meetings, I explained the purpose of the study and the required criteria. I also informed each participant that they may withdraw from participation at any time before, during, or after the interview. I also specified that there would be no participant reward or compensation; however, I informed each participant I will email a copy of the final study once approved and published.

I conducted the interview sessions in the same location via Zoom audio meeting or over the phone depending on the participants availability. All interviews were scheduled according to a time and date that is convenient for each participant to accommodate personal and professional time schedules. I asked them for permission to record the interviews before each session. As the participants respond to the questions, I kept a personal journal to take relevant notes. I plan to share my transcribed interview notes with the participants in addition to providing any additional information on the original

set of questions. These instruments will ensure the transcriptions are reliable and can be validated by the interviewees. All the information gathered from the interviews will be stored on an external hard drive and it will remain in a safe and secure location in my home for 5 years. The secondary data will be collected from the organization's public record that will add to the depth of general information of the study.

Data Collection Technique

In this qualitative case study, the data collection consisted of semistructured interviews via audio recording. The participants will provide the information that was later analyzed and transcribed. Additionally, a review of the company documents relevant to the purpose of this study was performed, along with a review of news articles and press releases about the companies. Though the company archives have always been a secondary source for data, Johnston (2017) described that technological advance have led to substantial amounts of data that have been collected, recorded, and archived, and readily accessible for research also known as web scraping. In addition, Martins (2018) suggested governmental sources are another avenue that should be explored if they come from transparent and reliable governmental agencies. Interviews are a suitable method for collecting data and forming rapport in a case study format (Yin, 2014).

The semistructured interviews was between 30 minutes to 1 hour in length with managers, directors, administrators, and human resources professionals working in the nursing home industry. The interview process was conducted according to an interview protocol (Appendix A). The protocol included the researcher introducing the interview purpose and thanking the participant for taking the time to be interviewed. I then began to ask each interview question, observing tone, pitch and how the interviewer responded. If

necessary, questions were repeated or paraphrased as needed, as follow-up questions to gain better understanding of participant responses. At the end of each interview, I thanked each participant for their time.

As with any research project, data collection is important because this step determines the results of the entire research. There are several advantages and disadvantages to using semistructured interviews as the data collection process. One advantage to conducting semistructured interviews is that participants can provide valuable information specific to their personal experiences (Evans, 2017). Another advantage is that semistructured interviews provide the researcher and participants the opportunity to explore a subject or issue and develop a better understanding of that issue (Evans, 2017; Taylor et al., 2015). Some drawbacks included the quality of the data one received will often depend on the ability, and to some degree, the perception of the interviewer. Other disadvantages included the limited sample size, the area in which the interviews are conducted, and the number of qualified respondents within that area (Yin, 2018).

I used member checking which provided a chance to validate findings by sharing the interview analysis and interpretations with each participant (Candela, 2019). In addition to, recording each interview and the transcription of the responses for analysis, I also kept track of developing data understandings through reflective journals. In these notes, I focused on the five elements of EI self-awareness, self-regulation, motivation, empathy, and social skills. These themes were associated to the main research question of this research study. The semistructured format allowed participants to be comfortable and free to share answers that created opportunities for follow-up questions and responses.

Data Organization Technique

All raw information gathered was stored on a portable drive and laptop computer: as interview recordings, and my journal of reflexivity notes. The data will be locked, password protected, and safely stored for 5 years Yin (2018) highlighted the need for case study researchers to construct a case study archive; this is an organized collection of all data collected from the case study. The archival study data should include formal data, such as interview audio recordings, and all other data pertaining to the study (Sutton & Austin, 2015).

The archival database should have a split between the raw information and the reports to expedite the analysis, such as triangulation (Smith, 2018). Hence, to facilitate proper evaluation and create an audit footpath, I created an electronic archival database by scanning the hard copies of the company documents and reflexivity notes I collected them on a portable drive, where I stored all the data utilizing an organized structure. To safeguard proper analysis, researchers should log their data collected with characteristics including type, time, person, date, and location of the source (Meyer & Willis 2019; Smith 2018). In addition, reflexive journaling supports reflexivity is similarly useful at seeing the audit trail (Meyer & Willis; 2019). According to Smith (2018), there should be a clear linkage between the supporting evidence and the study findings. I used my journal to capture the different aspects of data and determinations throughout the research that will assist with the evaluation process and create a trail of the pathway to the findings identified by the research.

I compiled and labeled all data collected, including interview audio recordings, and documents in the archival case database to permit easy retrieval and inspecting.

Thereafter, cataloging and categorizing took into consideration the safety and protection of the participants and the case as a whole. According to Luby and Richardson (2018), data organization techniques are implemented to enhance input, output proficiency, and minimize storage overhead, while simultaneously maintaining significant data loss, restore efficiency, and the overall raw data. After 5 years, all papers will be shredded, all electronic files will be deleted from all computers, including any removable or non-removable media devices, and all recordings will be erased.

Data Analysis

Data analysis transpires while the researcher is completely immersed in the data collection progression. The purpose of data analysis is to discover, evaluate, and explore patterns (Kte'pi, 2018). Methodological triangulation entails using more than one kind of approach to study a phenomenon. It has been found to be advantageous in providing confirmation of findings, a more inclusive data, and an enhanced understanding of the research question (Bekhet & Zauszniewski, 2012). Triangulation can take place in a couple of ways; by using multiple data sources, investigator researching many researchers and theory triangulation which is looking at the phenomenon from many different perspectives.

According to Moon (2019), investigator triangulation is the use of more than one person as an investigator, interviewer, researcher in a study. The ability to confirm results across investigators without afore-mentioned discussion or alliance between them can drastically improve the credibility of the findings. Theory triangulation is the use of many theories or assumptions when analyzing a phenomenon. The idea is to look at a situation or phenomenon from different viewpoints, different questions in mind and different

lenses. The third type of data triangulation is method triangulation includes multiple research methods to the data collection process. Lastly, data source triangulation is parallel to the methods triangulation but concentrates much more on acquiring the data from multiple sources inside a single data collection method to confirm that a more thorough assessment is obtained (Moon, 2019). Due to the research question and research design a combination of the method and data triangulation was used in this study, as the data will come from participants interviews, the public information available online about the company and online web scraping thereby providing a more complete picture than just using one method such as participants interviews and including only participants who met the requirements.

The software tools that are programmed to assist scholars are an exceptional complement for researchers when interviews are complete, and the data is ready to be analyzed. Computer-assisted qualitative data analysis software for researchers is less common than software used for quantitative studies (Leech & Onwuegbuzie, 2011). Software analysis tools allow researchers to ingress the transcribed interview data and dictate interpretation into the software qualitative research study (Onwuegbuzie et al., 2012). In addition, methodological triangulation can be used as a strategy to ensure reliability by cross-checking numerous data sources such as the information retrieved from the individual interviews, company documents and focus group session (Ingham-Broomfield, 2015; Joslin & Muller, 2016; Yin, 2018).

Braun and Clarke (2006) established six steps of thematic data analysis, which are similar to Yin's (2011) 5 steps to data analysis: (a) familiarize yourself with your data.

(b) generating initial codes (c) searching for themes. (d) review themes. (e) define and name themes, and (f) produce the report.

Becoming Familiar with the Data

Qualitative data come in various forms, including multimedia, focus groups, photographs, and in this case, recorded observations (Nowell et al., 2017). In this section, because the data is collected via an interactive means, as the interviewer, I came to the analysis process with an objective and open mindset. I documented these thoughts, questions, and interpretations. To become engaged in the data entails the repeated reading of the data in an active way searching and searching for meanings and patterns. Braun and Clark (2006) recommended that before a researcher begins to code the data, they read the entire data set at least once as ideas and possible patterns may begin to take shape as data and its meaning begin to unfold. I recorded my reflective and theoretical thoughts and ideas that may develop throughout this process.

Generating Initial Codes

Once I familiarized myself with the data, in this section I now started to separate the different ideas and codes that I noticed. Because in the previous section, I was able to develop some preliminary ideas about codes it helped me code and start separating the different themes that will arise. A theorizing activity of ideas that required me to constantly revisit the data. During coding, I identified important parts of text and attach labels to mark them as they relate to a theme or similar issue in the data. A good code is one that captures the qualitative richness of the problem (Braun & Clarke, 2006). I worked through the entire data set systematically, carefully providing full and equal attention to each section.

Searching for Themes

In this section, I started to sort and gathered the potential relevant coded data extracts into themes that I later reviewed. If a theme is a pattern that describes something significant or interesting about the data as it pertains to the research question; it is easy to see how themes can overlap and seem like each other. Initial codes may start to form major themes, and others may produce subthemes. I may run into a scenario where some codes do not belong anywhere which may get placed under miscellaneous for temporary housing. Braun and Clarke (2006) suggested that researchers keep detailed notes, something I did to ensure I captured the growth and hierarchies of concepts and themes to be included in the inspection trail and help determine confirmability.

Reviewing the Themes

During this phase, I reviewed, modified, and produced the initial themes that may be identified. Asking myself, do they make sense? How does it apply to the research question? If the themes overlap, are they really separate themes? Did the data sustain the theme? Are there any other themes that I may have missed? I cut and paste themes that can be used in other main themes. Considering how each theme fits into the overall narrative about the entire data set in relation to the research questions.

Defining and Naming the Themes

During this phase, I determined what facet of the data each theme captures and determine what is interesting about them and why. As the researcher, for each theme I wrote a granular analysis, pinpointing the story that the telling, ensuring that the title theme names be captivating immediately catching the eye of the reader as Braun and Clarke (2006) recommended.

Producing the Report

Finally, in this section I wrote-up a thematic analysis report that is concise, logical, nonrepetitive, coherent and an interesting account of the data within the themes. I used the Dedoose web application software for the qualitative analysis to assist me in organizing the interview discussion notes for further analysis and thematic coding. Then I used Microsoft Word to store my observation notes and preliminary analysis and Excel for unifying the codes from my manual analysis. In qualitative studies, the coding process concentrates on *how* and or what of the problem. In addition to the comparisons and modifications within and between categories and transcriptions (Morse, 2015; Yin, 2018). For this study, I planned and developed the themes from the transcriptions of individual interviews. I compared the developing themes to the fundamentals of the selected conceptual framework EI and whether some nursing homes lack the strategies to apply EI training to increase job satisfaction, reduce employee turnover, and improve interpersonal skills for performance improvement.

Reliability and Validity

Different methods exist for achieving quality and trustworthiness in qualitative and quantitative research (Graneheim & Lundman, 2004). The terms used in qualitative studies for establishing trustworthiness are dependability, credibility, and transferability (Graneheim & Lundman, 2004; Hayashi et al., 2019). Quality and trustworthiness may be confirmed using methodological triangulation, record review, and member checking (Birt et al., 2016). The exploration of the data collection instrument included findings from the individual interviews and company documents such as published policies and practices.

The process involved researching recent news articles, policies, shared values, mission, business operations, and shared employee benefits.

Reliability

The reliability of a research study can be a question of whether the researcher provides a satisfactorily full description of their study's processes to qualify other researchers to duplicate the study to confirm the results (Yin, 2018). In other words, it is the degree to which, research method delivers a balanced and consistent outcome again and again. The reliability was reached by ensuring there is a clear path for other researchers to follow and conduct the same study and produce the same outcome.

Dependability

Dependability referred to the regularity and reliability of the research discoveries and the level to which research processes are carefully documented, permitting someone outside the research to follow, review, and critique the research process (Harvey, 2015; Winter & Collins, 2015). I documented the research design and implementation, including the methodology and methods, the details of data collection (e.g., the researcher's reflexivity journal). The self-assessment of partiality can reduce bias (when appropriate to do so) and boost the dependability by increasing transparency of the entire research.

Validity

Validity guarantees the models used for the research apply to decisions made based on the outcomes (MacPhail et al., 2015). According to Patino and Ferreira (2018) the validity of a research study incorporates two domains: internal and external validity. Internal validity is identified as the extent to which the detected results represent the

truthfulness in the population we are exploring. External validity is the result of a study is generalizable to other nursing home leaders in a daily long-term care, especially for the population that the experiment is thought to represent (Patino & Ferreira, 2018). The validity of the research will be maintained by including an error-free measurement and in the selection of participants, only those that meet the requirement as nursing home leaders.

Credibility

Credibility is the first standard of research reliability that must be established. Researchers have considered it as an essential aspect when forming trustworthiness. The two most important techniques to ensure credibility are member checking and triangulation. The process of member checking can assist in confirming the credibility of the collected information and analyzing the results through the lens of the participants (Hayashiet al., 2019; Birt et al., 2016). The participants will have the opportunity to review the discoveries and confirm the credibility of the information after the data analysis and the research has been published. The following technique is triangulation; researchers sometimes use methodological triangulation to unite multiple sources of information to assure credibility (Birt et al., 2016; Hayashi et al., 2019; Yin, 2018). I triangulated the data from individual interviews and public company policies.

Transferability

With qualitative research, part of transferring the results of a study is the responsibility of the reader (Khamis Amin et al., 2020). However, as the researcher, they are not alone in this endeavor; a thick description is part of my strategy. I provided a thick description of the setting, the subjects, and other persons involved, quotes, and any

other data requiring interpretation and synthesis to point the reader to transfer the findings to their own context and the message is clearly understood and thereby allowing them to transfer the interpretations to other situations in their life (Khamis Amin et al., 2020). With a structured interview protocol, data saturation and my observation of each participant during the interview are all tools that will aid me in achieving transferability. My role as the researcher was to determine transferability by carefully documenting my data collection process, organization, analysis processes, and wrote my findings with as much detail as possible.

Confirmability

Khamis Amin et al. (2020) posed that one can augment the confirmability in the research study by verifying that the results can be or are supported by others such as the participants, other researchers. Confirmability is concerned with establishing that data and interpretations of the findings are not illusions of the inquirer's imagination but are evidently originated from the data. Inquiring during interviews and, cross-questioning from different perspectives, triangulation, etc. are practices a researcher may use to enhance the confirmability.

Data Saturation

Data saturation would occur when I find no new evidence of added patterns or themes developing from the data collected. According to Faulker and Trotter (2017), when no new themes and or codes start to repeat themselves, it was clear signal that the analysis is nearing saturation. I collected enough data to achieve the necessary research purpose, I reported how, when, and to what degree the I achieved data saturation.

Transition and Summary

In Section 2, I outlined the purpose statement, discussed the eligibility, required criteria, and strategies for retrieving participants. The research method and design were also identified and substantiated. Section 2 includes a description of the population and the plans to protect the ethics of the research, and the data collection instrument. I also presented (a) the data collection technique, (b) a detailed description of the data analysis process, and (c) reliability and validity in Section 2. In Section 3, I presented the application to the professional practice, the implication for social change, the recommendation for action and further research, some reflections, the results of this study and the meaning of the study related to the business practice.

Section 3: Application to Professional Practice and Implications for Change

Section 3, the final section of this study, begins with the introduction of the findings from the analysis of the data collected. In this section, I presented the study's findings, including the developing themes. Additionally, I discussed the findings' application to professional practice, implications for social change, recommendations for action and further research, reflections, results of this study, and the meaning of the study related to business practice.

Introduction

The purpose of this single qualitative case study was to explore strategies that nursing home leaders use to apply EI training to reduce employee turnover, increase job satisfaction, and improve interpersonal skills for performance improvement. The findings presented in the next section were obtained from the data collected during the interviews of the four participants: a nursing home administrator, nurse managers, and a HR professional from multiple nursing home facilities in the state of Florida. The analysis of the data exposed four major themes: (a) encouraging effective communication and empowerment, (b) organization of employee resources, (c) fair-minded treatment and respect, and (d) fostering a teamwork atmosphere. These common themes between all the participants' experiences in the workplace improved the EI strategies they implemented to reduce employee turnover, increase job satisfaction, and develop interpersonal skills to improve their facility performance.

Presentation of the Findings

The research question for this study was the following: What EI training strategies do nursing home leaders use to reduce employee turnover, increase job satisfaction, and

develop interpersonal skills to improve performance? Effectively addressing conflicts in businesses can enhance employees' performance and the quality of output delivered by them (Copanitsanou et al., 2017; Ezeani, 2022). The lack of soft skills in health care institutions and workplace disagreements can negatively affect the quality of care provided to patients (Weiszbrod, 2020). The data analysis from this study revealed some evolving themes in the strategies that leaders use to address workplace disputes and issues in the nursing home industry. The themes were (a) encouraging effective communication and empowerment, (b) organization of employee resources, (c) fair-minded treatment and respect, and (d) fostering a teamwork atmosphere. These themes were developed from Dedoose using the collected data from the interview transcripts. Table 2 shows the themes and the participants' contributions to the themes.

Table 2

Themes and Number of Contributing Participants

Themes	No. of participants who contributed
Theme 1: Encouraging effective communication and empowerment	4
Theme 2: Organization of employee resources	4
Theme 3: Fair-minded treatment and respect	4
Theme 4: Fostering teamwork atmosphere	3

All four participants contributed to three of the themes, but one did not contribute to the third theme, which was fostering a teamwork atmosphere. The other four participants contributed significantly to the theme.

Theme 1: Encouraging Effective Communication and Empowerment

The four participants interviewed mentioned that a successful strategy that they had used was encouraging effective communication and empowerment when implementing any EI strategies to improve employee performance. Their comments underlined the need for leaders to be open and transparent to employees about the department goals and knowing how their day-to-day performance applies to them. The importance of effective communication style and empowerment for leaders is well documented in the literature on communication (Meires, 2018). According to Yin et al. (2020), a leader's communication method has the potential to lead to workplace confusion and conflicts between employees. This can happen when a leader is unclear or when limited information is shared with employees, which eventually results in poor performance (Mukhtar et al., 2020). All participants used various communication styles to get the message across and tripled the information received to ensure comprehension.

During the interview, Participant MJ highlighted that communication was key to the survival of any EI initiative they did. MJ stated, "Being in the weeds with the front-line staff, explaining each process step by step timely was important." MJ then added that employees seeing the leader not only giving the command of *what* to do, but also working side by side with employees on the *how* was refreshing and empowered them to own their roles. Lastly, the participant stated that after doing this for some time, off and on, they saw some employees' attitude change for the better.

Participant DS similarly emphasized that for employees to stay actively engaged in the workplace, it is of paramount importance for leaders to make them feel that they have a say in their daily routine as it relates to the patients or their work. DS stated, "we

approach everyone with respect and routinely asked them for their feedback on department goals, thoughts on patients' eating habits and suggestions for improvement." The participants emphasized that if leaders are not open to employees' thoughts and feedback, employees will lose interest and will slowly become mentally and then physically disengaged employees who no longer care about their patients' well-being. If this occurs, their job duties will be done with less drive, which welcomes mistakes and patients' discharge to hospitals because they missed something.

Participant AM empowered and effectively communicated with employees by "using objective language in addressing any workplace situation." Instead of using a judgmental tone or words, AM resolved situations by understanding their root cause and empowering the employees involved to work together to resolve them. AM sought to demonstrate to employees that they were all in this together and their patients were dependent upon them. AM acknowledged that sometimes it was difficult when they had to put their social learning skills into practice, but the more they consistently worked together to resolve workplace conflicts, the better they all became for it. For example, AM explained, "I would make a deliberate effort to sit down side by side with the nurse instead of in the middle of them to provide a level of amiability and support." This made the nurse feel heard and respected, in contrast to AM standing over them and pointing a finger with command after command. AM would unequivocally and explicitly state the ground rules so that everyone knew and understood that the opportunity to have a safe dialogue was welcome.

Participant MA also contributed to this theme. Participant MA identified that getting to know employees is a critical part of knowing how to communicate with them.

MA noted,

It is particularly important to be available to get to know your team outside of a workplace because it will provide missed perspectives that is not always visible in the workplace. When employees come to work, they are bringing their whole-selves; each they are humans with each their own personal and complex lives so, if someone comes in one day all teary eyed, it's perfectly alright to ask if they are okay and allow them some time to get themselves together or take a few minutes break before starting their shift.

Last, MA added that if employees are allowed to see that it is all right to be their authentic selves at work. They will offer that same space to customers and patients, which will ensure that they have a best-in-class customer service experience because we are all humans' beings having human experiences so it is perfectly fine to be ourselves in the workplace.

The Correlation to the Literature

Mukhtar et al.'s (2020) research on the role of leadership and interpersonal communication indicated that when information is uncertain, employees may not all have a common understanding of the leader's point, which may lead to a conflict or misunderstanding. Among employees, communication styles may differ due to circumstances that include cultural differences (Brett, 2018; Meires, 2018; Nouri et al., 2017). For example, an employee whose culture uses a direct communication style or body language such as pointing may offend an employee in whose culture pointing

fingers is perceived as condescending. Church and Burke (2018) stated that if employers implemented change with a focus on the people and their interpersonal relationships among them in the organization, then and only then would they be better off when communicating any type of change initiatives. A positive work culture where communication is open and constructive feedback is reciprocated is an ideal place that improves interpersonal skills for the overall organization's performance improvement. On the contrary, Eisenkopf (2018) and Yin et al., (2020) indicated that effective communication among all parties in the workplace may reduce and control workplace conflicts.

The Correlation to the Conceptual Framework

The responses from the participants showed that they were able to successfully implement EI strategies that enhanced employees' performance in the workplace by effectively communicating with and empowering them. In their responses, they acknowledged that nurses, CNAs, and other administrative staff were open and receptive to resolving conflict, working in teams to accomplish tasks, respecting one another, and fostering empathy toward their coworkers and patients. Human beings in an organization or social construct who receive these kinds of intangible benefits will reciprocate through positive actions and behaviors that will assure their continuance (Al-Bahrani, 2017; Bacon & Corr, 2017; Beldoch, 1964; Cascio et al., 2017; Goleman, 2006; Major, 2016; Meires, 2018; Ricciotti, 2016; Salovey & Mayer, 1990). Employees will respond positively to their managers and the organization only when they believe and can rely on the fact that these benefits exist. People want to be good to those who are good to them; after a while, it becomes a natural exchange, thereby improving their work performance.

Theme 2: Organization of Employee Resources

The four participants interviewed mentioned the importance of the organization of employee resource initiatives in addressing EI. These initiatives included trainings and mentorship for managers and employees alike; these trainings were related to organizational changes and departmental goals. Evaluation of the information from participant interviews revealed that the use of organizational employee resources was of paramount importance to employees having access to information; these included management and peer support, access to an in-house hub of information for employees such as an intranet, and the availability of a HR department (Saundry et al., 2021; Valenti et al., 2021). Participant MA called out the support and help that he received from peers and the constant training and informal conversation that he received from management, which kept him afloat in addressing workplace issues such as misunderstanding and miscommunication, which happened often, especially during team projects. MA added, “We provide ongoing training to front-line employees on a variety of topics, but we emphasize training on workplace disagreements and the strategies they need to manage them.” In addition, they indicated that having a good quality HR department had assisted in delivering healthy workplace interactions. They said, “The HR team has been of invaluable assistance when I did not know what to do when an employee yelled and used profanity at me; they were able to guide me in an efficient manner.” MA stated,

I am always connected to the employee’s intranet, which we can download the employee handbook, company policies, and standard procedures ready to show peers and my employees where I am coming from. So, knowing a lot about your

organization's policies, knowing about the decisions, and the State of Florida labor laws can go a long way once you are informed.

Participant DS pointed out that having a strong support group around them in the workplace was key. They also recognized having a HR department as a positive contributor to managing tensions effectively. DS stated, "If you do not feel like you understood what the directive is for this department goal, I would reach out and ask any follow-up questions and always remember that open communication is important for a productive outcome." Participant MJ noted that their primary resource within the organization was the leadership support that was received from their peers and mentors. Participant AM also pointed out that the helpful advice from peers and HR professionals was vital to managing EI strategies in the workplace. This participant stated that even though the organization provided many training and mentorship meetings to employees and their customer base, "my management experiences and skills were taught to me by my peers, managers, and coworkers as opposed taking classes at a local college." Participant AM also referred to the employee handbooks and accessible policies and the regulations guidebook as the facility resources that helped in establishing EI strategies and resolving occupational stress. Participant AM added that HR and the leadership team were significant when EI initiatives could not be implemented in the workplace independently.

The Correlation to the Literature

The study participants noted the availability of various organizational employee resources, including management and peer support, an in-house hub of information for employees such an intranet, and a HR department to sustainably implement EI strategies

to improve employees' performance in the workplace. In supporting this theme, literature on employee and organizational performance as a result of EI strategies identifies that access to an HR department and employee intranet is crucial to being a top performer in the workplace. The role played by HR professionals is effectively creating organizational approaches to conflict management and handling of people issues so that they can successfully accomplish their job (Mahoney & Klass, 2014; Saundry et al., 2021; Supramaniam, 2021). According to Supramaniam (2021), an organization's performance is directly linked to the output of its employees. Top performers have high EI, meaning that they can behave appropriately in interpersonally and intra-personally challenging situations and coach, train, and mentor their peers to do the same.

In addition to the HR department, researchers have confirmed that having these organizational employee resources support in the workplace was beneficial and necessary to employees' success. Nurse managers and administration leaders are usually faced with emotionally intense duties and responsibilities, making EI a very important factor for employees in removing occupational stress (Al-Bahrani, 2017; Meires, 2018; Saundry et al., 2021; Valenti et al., 2021). Moreover, studies such as this one are needed to remind practitioners that having employees with tangible and intangible skills and resources is crucial to the value of the organization's performance management. Nursing positions in the health care field are not only considered essential and necessary, but also should be filled with nurses with high levels of EI.

The Correlation to the Conceptual Framework

The responses from the participants showed that the availability of very helpful organizational employee resources was crucial to not only addressing workplace

conflicts, but also implementing EI strategies to boost employee performance. The participants highlighted at least one form of organizational employee resource as a support method in how they successfully enhanced the workplace experience in their department and companywide. Therefore, this theme aligns with the EI concept because managers were able to understand, use, and manage their own emotions in a positive way to relieve stress and improve communication among their teams (Al-Bahrani, 2017; Goleman, 2006; Major, 2016; Meires, 2018; Ricciotti, 2016; Salovey & Mayer, 1990; Saundry et al., 2021; Valenti et al., 2021).

In their studies, Salovey and Mayer (1990) and Saundry et al. (2021) stipulated that alleviating workplace conflicts fairly will lead to positive outcomes with employees and those whom they encounter on a daily basis, such as patients and family members. Meira and Hancer (2021) noted that the accessibility of organizational employee resources could substantially increase positive relationships between employees and their organizations. This would drive employees' positive response to organizational initiatives and changes, which would support EI strategies for improving their performance in the workplace.

Theme 3: Fair-Minded Treatment and Respect

Cambridge Dictionary (2022) states that to be equally fair is to treat everyone around oneself equally. All the participants interviewed stated that acknowledging the employees' views, feelings, and perceptions on different workplace issues was another important way in which they were able to strategically implement EI strategies that enhanced the employees' performance. These acknowledgements came in the form of treating employees fairly, which validated their feelings. Treating employees fairly meant

that no one received special treatment because of their title or nepotism; rather, each person was respected and treated as a human being. Henry (2011) and Rezvani et al. (2019) claimed that people, in general, will trust another human being when they (a) are consistently truthful and honest; (b) keep their promises; (c) are unbiased and seek justice for all; (d) have respect for others, not because of their role but because it is the right thing to do as a human being; (e) remain accountable and cooperative; and (f) promote communication and inclusivity.

Participant MJ stated that their strategy was simple, when new employees started to work on day one. Elaborating,

You do not have to like each other but, you do have to respect each other as long as you are here at work. That means that you speak kindly, you say thank you, you say excuse me, you say good morning, you will say am sorry, among others. When you encounter a work situation or problem before you come to your supervisor and ask them to solve it, try to think of the solution and collaborate with your peers if you have to but while you in this place of work you will learn to think critically for yourself and be a problem solver. We are only as strong as our peers, so let us be here for one another, we welcome comradery, engagement, we laugh and have fun as this is the only way to ensure each of us to have a healthy, efficient, and productive environment for our patients and ourselves.

In their responses, Participant AM and MA recognized that communicating with employees consistently in a respectful manner and treating them like they care because they did provide them a huge advantage to implement EI strategies that they all slowly recognized was vital to the efficacy of their department. Participant AM emphasized the

importance of “The biggest step in the process is that you have to connect emotionally with your employees and realize that they are people just like you.” Noting that knowing the basics of your employee’s personal life is helpful. They concluded by saying,

Let them feel that you will be there with them in the good, the bad and ugly. Get to know your employee’s name, if they have any children, parents they are caring for, if they had a death in their family call them, reorganization does not always have to be done with money.” The intangible method is winner as well.

Participant MA focused on not just getting to know the employees’ basic work routine but also knowing the date of their birthday. Lunch was purchased for the entire staff, not just for those that had a birthday but it was equally shared with everyone. Participant MA expounded that it was key that everyone’s perception of respect and fairness was acknowledged.

Participant DS also highlighted the importance of being fair, empathetic and respectful by listening to employees and making them a part of the department changes in addition to creating a personal development plan for each of them. Participant DS realized that conflicts at work would usually arise when employees did not feel heard or that their leaders did not care for them. Elaborating,

I started by listening to the team and understanding them, I put a development improvement plan for each of my staff, I included them in departmental decision and gave them responsibilities, I leveraged their diversity and taught them to work together (I made sure I had skills mix and different nationalities in each shift; Indians, Philippines, Arabs, and Hispanics, African Americans etc). Once they started empathizing with me and the others, I started training them through team

building activities to be empathetic with their peers through discussions about events, and with the patients and their families through anticipation and proactiveness. Building bonds and strengthening the team's capabilities was my major goal and I worked on this before anything else as this paved the way for our team to be successful and retaining our employees and reducing patients readmissions to the hospitals.

Employees started initially coming to work grumpy and serious then slowly they started smiling, making kind jokes, appreciating their peers and that was visible by the patients and family members that visited them.

The Correlation to the Literature

The participants' responses revealed that acknowledging employees through fair-mindedness and respect allowed the managers to not only understand them but to invest in their EI training all while welcoming them to have a seat at the table for the improvement of their patients and the facility's overall improvements. These responses and the subsequent theme correlate with the literature on fairness and respect towards all employees in the workplace. Researchers have demonstrated that when conflicts arise in the workplace, being fair and equitable EI strategies enhances trust among the employees and employer in the organization (Major, 2016; Meires, 2018; Ricciotti, 2016; Salovey & Mayer, 1990; Saundry et al., 2021; Valenti et al., 2021).

The Correlation to the Conceptual Framework

The responses from the participants indicated that they were able to positively implement EI strategies that changed the trajectory of their nursing homes and the employees that work there. Each one of the participants also noted the importance of fair-

mindedness and respect for all putting these strategies into place. This theme is in alignment EI concept because it poses that employees will respond to their managers actions that they perceive as beneficial to them (Zhao et al., 2020). People today are informed and know when someone is not being honest and transparent with them, so for a manager to be anything less is a sign of disrespect and showing that employee that you do not value them as an employee. As Henry and Rezvani reminded us, humans trust each other only when there is honesty, consistency, fair across all interactions, respect others, hold themselves accountable, and believe in effective and inclusive communication. The administrative and nursing employees were flexible and optimistic in their responses to their managers, specifically when these factors are present align with the EI concept specifically the component of empathy. It was Theodore Roosevelt that stated “people don’t care about how much you know until they know how much you care”.

Theme 4: Fostering Teamwork Atmosphere

Three out of four participants noted that fostering a teamwork atmosphere improves the social skills tier in the concept of EI. Many workplace projects rely upon successful teamwork and empowerment to achieve their daily goals and to meet the needs of clients, customers and patients. It is an interactive process that relies upon all team members to promote, encourage and participate in order to cultivate a positive, effective team environment. Participant MJ discussed the importance of creating a culture where employees collaborate and inspire each other to better comprehend the demands and expectations of the upcoming department changes together. They firmly believe that this strategy has helped in training EI strategies that contributed to the success of these changes. Stating, “I pushed and motivated my CNAs to work together when trying to

figure out problems or conflicts.” Time and time again, they saw how this made the employees that were always so quiet slowly start to speak-up and become more confident.

Participant DS emphasized in their interview the value of letting everyone know that they are in this together no matter what. They stated that by holding focus groups and a team approach to almost everything identified the cause and effect of them reducing employee turnover, increasing job satisfaction and developing their interpersonal skills which benefited them all. They encouraged the managers to “start asking the hard questions to their employees or their peers when things did not make logical sense, this welcome healthy dialogue and held everyone accountable to their decisions” Comparable to Participant DS, Participant AM identified the significance of providing support to their employees that were challenged in the area interpersonal development which made them a better employee to work alongside.

I did not only ask them to do as I did but I asked them to as I do. I practiced what I spoke and required nothing less from them and they would turn around and do and require the same from their peers.

The Correlation to the Literature

The participants outlined the value of fostering empowerment and teamwork among their employees in their responses. They noted that when implementing EI training to employees it effectively improves the nursing home performance when managers took their times to show these skills to each one of their employees. This paved the way for employees to better understand and collaborate with their peers in spite of their background and experiences. This theme is supported in the literature on the

importance and effectiveness of being inspired as a team in a environment where we all can come together work towards the success of a project. Pérez-Fuentes et al., (2018) emphasized that nurses with higher levels of EI also score much more highly in engagement, with the interpersonal factor being the most significant predictor of engagement. This part of EI is social skills and the employees excelled when their leaders took their time and coached them to confidentially be leaders themselves. Cox (2022) expounded that in order to encourage positive, progressive, effective working environments, team members need to have an amalgamation of technical knowledge and well-developed EI including self-awareness, empathy, social awareness and be highly motivated and be able to stir and motivate their colleagues. A study by Rocchi et al., (2017) noted employees performance improved when employees effectively communicated and work in teams with their peers well.

The Correlation to the Conceptual Framework

The responses from the each of the participants also indicated that the position of fostering a teamwork and empowerment atmosphere among the employees enhances EI strategies that reduces employee turnover, job satisfaction, interpersonal skills which enhances the nursing facility. EI allows team members to take other's needs into consideration, to talk for coordination, and to collaborate in meaningful ways. It also permits individuals to grasp what others more easily communicating and the why. By building their EI skills it helps for the team to communicate even more effectively and therefore likeliness to improve their productivity and empower them all (Goleman, 2006; Saundry et al., 2021).

As noted in the participants responses fostering teamwork and an empowered atmosphere creates a situation where all those in the workplace are destined to have better work life encounters and more positive end of the day shifts. Blau, posed that these intangible benefits will lead to positive employee behavior (Frieder, 2018). People in the workplace need high EI skills, simply because they typically must manage and communicate with different personality types, people with different levels of EI, and vastly different communication styles without it you leave yourself and those around you open to more unnecessary unpleasant work experiences.

Applications to Professional Practice

The purpose of this study was to explore what EI strategies do nursing home leaders use to reduce employee turnover, increase job satisfaction, and develop interpersonal skills to improve performance. The lack of EI strategies in the workplace can lead to poor management among employees, high turnover in employees and patients which eventually leads to financial losses which then can lead to the nursing home's demise (Cascio et al., 2017; Fuqua et al., 2018). Goleman (1997; Serrat, 2017) posed that IQ accounts for only 10% of all that people need to perform successfully at work, on the other hand EI accounts for 90% which are the top performers. In one study, annual turnover among skilled nursing employees was 84.6% (Fuqua et al., 2018). Clearly revealing that the cost of not valuing EI negatively impacts the nursing home's performance, in addition it affects the wellbeing of the employees in the workplace. When the hard times come, usually the soft stuff goes away. But EI, as a result, is not soft at all. If emotional unconsciousness jeopardizes one's ability to perform effectively, resist aggressors, or be compassionate in a crisis situation, no amount of attention to any

organization's numbers will protect one's career. EI is not a luxury we can distribute in tough times. It is a basic tool that, should be implemented with finesse, as it is the key to a professional and successful environment.

The findings from this study showed that nursing home leaders have used (a) encouraging effective communication, and empowerment, (b) organization employee resources, (c) fair-minded treatment and respect, and (d) fostering a teamwork atmosphere. Thus, by applying these strategies identified in the themes, managers who are challenged with implementing EI skills can potentially be successful as well. Additionally, HR professionals and nursing home leaders can use the findings from this study to develop trainings for their employees and managers in an effort to reduce cost. The overall implication of this study for businesses was that applying the EI strategies leaders could potentially reduce employee turnover, increase job satisfaction, develop interpersonal skills and improve the nursing home performance and provide better care to patients.

Implications for Social Change

Research shows the negative implications in the workplace when the concept of EI is not a priority such as, poor communication, workplace conflicts, lack of teamwork and collaboration, disrespect and unfair treatment to name a few (Abd-Elrhaman & Ghoneimy, 2018; Al-Bahrani, 2017; Bacon & Corr, 2017; Cascio et al., 2017; Goleman, 2006; Major, 2016; Meires, 2018; Ricciotti, 2016). The effect of these workplace issues in nursing homes can potentially affect an entire community (Kim et al., 2017). This is due to the impact of these conflicts within the workplace on nursing staff can lead to poor delivery of care the patients and less than desired customer service outcomes to families

in the community. The findings in this study identified some useful EI strategies that nursing leaders and employees have used effectively run their shifts and reduce their turnover. This study's implications for social change was that it provides nursing homes leaders with additional strategies they can use to reduce turnover, increase job satisfaction and develop interpersonal skills and improve the nursing home performance successfully. When these EI strategies are applied effectively by nursing home leaders, in this study they identified could potentially improve employees' performance in a nursing home or any workplace. Furthermore, if employees and managers in the nursing home industry are better equipped to control their emotions, be empathetic towards their peers, can confidently and proactively able to hold themselves and others accountable, work harmoniously in teams, and communicate effectively then they will be able to reduce the of health care delivery in their communities. Hence, the implications of this study for positive social change suggested an efficient delivery of nursing home services to their communities, decrease in financial cost of those services, high employee retention, safer discharges of patients back to their families, improved interpersonal skills, an increased job satisfaction, a sustainable nursing home, and an overall improvement in the local community economy.

Recommendations for Action

The purpose of this study was to learn about the EI strategies that nursing home leaders have used to improve employee and their organization performance by reducing employee turnover, increasing job satisfaction, and developing interpersonal skills to improve performance. The themes that developed from the study are; (a) Encouraging effective communication, and empowerment, (b) Organization employee resources, (c)

Fair-minded treatment and respect, and (d) Fostering a teamwork atmosphere. These themes are consistent with the concept of EI because they are all geared toward fostering personal and professional development, it increases trust among employees and employer, and stops people from having negative experiences in the workplace, it creates intangible gifts, which are all benefits that edifies the employees in a wholesome way. The findings from this study indicated that nursing home leaders who welcomes these EI strategies identified in the study could potentially increase a healthy and productive employee and employee relationship which reduces turnover, increases job satisfaction, develop interpersonal skills to improve performance. Therefore, I make the following recommendations to nursing home leaders, HR professionals and managers.

The first recommendation is to encourage effective communication and empowerment through nursing homes leaders and HR professionals developing training for their managers and employees on how to create a work environment where employees are encouraged to feel like they can effectively communicate their feelings and feedback in a judgement free space. Participant DS emphasized that for employees to stay actively engaged in the workplace it was paramount that leaders to make them feel like they have a say in their daily routine as it relates to the patients, or their work was to be done. They stated, “we approach everyone with respect and routinely asked them for their feedback on department goals, thoughts on patients eating habits and suggestions for improvement.” They emphasized if leaders are not open to their thoughts and feedback they will lose interest, and they will slowly mentally and physically become disengaged employees that no longer care about their patients’ wellbeing, their job duties will be

performed with less drive, increased mistakes, and patients being wrongfully discharged to the hospitals.

Participant AM noted that the first approach to empowering and effectively communicating with employees was “using objective language in addressing any workplace situation.” Blaming words and tone were avoided and the situations was managing by identifying the root cause of why it happened and empowered employees involved to work together to resolve it. Following this recommendation to create an environment where they feel empowered and encourage to communicate effectively could help managers increase employer-employee relationship all while successfully performing.

The second recommendation is to use organization employee resources. I recommend that nursing home leaders provide consistent and frequent trainings, focus groups to aid on deep dive workplace conflicts and how to better help with patients cares, not to mention an intranet where they can access policies, employee resources.

Participant MA mentioned that the support and help from their peers and management constant training and informal conversation kept him afloat in addressing workplace issues such as misunderstanding and miscommunication that happens so often especially during team projects. Adding, “We provide ongoing training to nurses and front-line employees on a variety of topics, but we emphasize training on workplace disagreements and the strategies they need to manage them.” In addition, they indicated that having a good quality HR department has assisted in delivering healthy workplace interactions. They said, “The HR team has been of invaluable assistance when I did not know what to do when an employee yelled and used profanity at me; they were able to guide me in an

efficient manner.” As a result, I recommend also that nursing homes leaders ensure that they have employees available and working in the HR department in case they may have questions about the handbooks and provide guidance on employee rights.

The third recommendation is to they provide all employees with fair-minded treatment and with respect. All the participants in the study stated that ensuring all employees were treated fairly, equally and with respect was critical to changing the culture and welcoming EI coping skills for the managers and employees. Therefore, I recommend that nursing homes leaders, HR professionals, training and development managers, and nurse managers train their employees EI strategies that can help them in change management processes, team projects, relationship management, conflict resolution among other workplace initiatives. This training should focus on social skills, empathy, motivation, self-awareness, and self-regulation. According to Participant MJ, “You do not have to like each other but, you do have to respect each other if you are here at work. That means that you speak kindly, you say thank you, you say excuse me, you say good morning, you will say am sorry, among others.” In their responses, Participant AM and MA recognized that communicating with employees consistently in a respectful manner and treating them like they care because they did, gave them a huge advantage to implement EI strategies that they all slowly recognized was vital to the efficacy of their department. Participant DS also highlighted the importance of being fair, empathetic and respectful by listening to each employee and making them a part of the department changes in addition to creating a personal development plan for each of them. Participant DS realized that conflicts at work would usually arise when employees did not feel heard or that their leaders did not care for them. Participant DS elaborated,

I started by listening to the team and understanding them, I put a development improvement plan for each of my staff, I included them in departmental decision and gave them responsibilities, I leveraged their diversity and taught them to work together (I made sure I had skills mix and different nationalities in each shift; Indians, Philippines, Arabs, and Hispanics, African Americans etc).

This training will open their perspective and reinforce the ideology that respect, and equal treatment is valued by the organization and department, and it does not matter where the person comes from, or whether you agree or disagree they must adhere to it in all their interactions with each other. Finally, I recommend that the leaders pay close attention to their managers and employees' feedback and feelings and listen to them every chance they get.

The fourth recommendation is to foster a teamwork atmosphere. I recommend that nursing home leaders create a work an environment and culture that inspires collaboration and a mindset that they are all united- that they are in it together no matter what. Participant MJ discussed the importance of creating a culture where employees collaborate and inspire each other to better comprehend the demands and expectations of the upcoming department changes together. Stating, "I pushed and motivated my CNAs to work together when trying to figure out problems or conflicts." Time and time again, they saw how this made the employees that were always so quiet slowly start to speak-up and become more confident and support their peers.

Participant DS emphasized in the interview the value of letting everyone know that they are in this together as a team. Stating that by holding focus groups and a team approach to all conflict identified the cause and effect of them reducing employee

turnover, increasing job satisfaction and developing their interpersonal skills which benefited them all. They encouraged the managers to “start asking the hard questions to their employees or their peers when things did not make logical sense, this welcome healthy dialogue and held everyone accountable to their decisions” Comparable to Participant DS, Participant AM identified the significance of providing support to their employees that were challenged in the area of interpersonal development which made them a better employee to work alongside.

I did not only ask them to do as I did but I asked them to do as I do. I practiced what I spoke and required nothing less from them and they would turn around and do and require the same from their peers.

The findings of this study could help nursing home leaders to strategically address workplace conflicts and fosters care with patients, but also intrinsically motive employees and managers alike to experience better work relationships and communications. I will make this study available to those that participated in this study. Some other means of distributing the study will be through publishing it in academic databases, such as Academic Search, ProQuest, Google Scholar among others where researchers and other students can access accordingly.

Recommendations for Further Research

This study was conducted using qualitative case study research design. This study is one of the few to specifically highlight the importance of EI strategies, experiences of, and the value of it in the nursing home industry and the day to day lives of each employee in it. Because I, the researcher am the data collection instrument on this study with my own subconscious biases, one limitation is that it may be difficult for me to separate

myself from the study. Secondly, the study participants are nursing home leaders, HR professionals and nursing managers selected from various nursing homes in the state of Florida in the United States; therefore, the findings may not be transferable to other organizations (Palaganas et al. (2017; Queiróset al., 2017; Yin, 2018).

Therefore, I recommend that the future researchers consider using expanding the study population to include other locations or industries to for the findings to be more generalize to most if not all workplaces. This study revealed that people's openness to be self-aware is vital to improving and implementing EI strategies successfully to reduce employee turnover, increase job satisfaction, and develop interpersonal skills to improve performance in the nursing home industry.

Reflections

The study provided me the opportunity to peek into the complexities of what it is to lead employees in the nursing homes industries. While I was going into the study as someone who is a HR executive leader in the health care industry, I assumed that my knowledge of the industry might influence the study process but, I must admit I thought I was excited to do the interviews with the leaders, my excitement quickly turned into disappointment to hear those other experiences was worse than I thought. However, as soon as I realize this, I was proud and ecstatic to know that they were quite a few leaders out there that love what they did; that really and truly cared about their employees and not just about the business making money. I quickly realized how limited my knowledge was in this area in how these leaders devoted their lives to their patients, their training of their employees and ensuring that everyone was taken care of. After interviewing my second participant, I started seeing the same or similar themes emerge. I did not think that

these leaders were that invested and selflessly devoted sometimes than 10-hour days to their work life with a smile on their face. I mean, I knew some cared but these leaders have shown me another level of love for their workplace family that I have come to appreciate and admire.

The doctoral study process has earned my full admiration. It is no doubt difficult to understand and sometimes comprehending the thoroughness of the process without being it. The cost of a doctoral study goes beyond the financial commitment involved; it comes with other costs that include family time, emotional roller coaster, social life, and sleepless nights. The strain on your mind, body, and spirit cannot be overstated. Staying focus on the target and discipline is key. The lessons I have learned throughout this process has allowed to gain the knowledge from the research, my chair, my family that supports me, my academic advisor, and my fellow peers. All that I have received is second to none and will lead me in my now executive career as a HR leader. I will summarize by saying that the major lesson I have learned now, towards the end the study was that having a very strong support; my husband to push and remind me that the Dale in the future is already so proud that I stuck it through the process. I am also forever thankful for my chair, and academic advisor that helped me to stay the course. My overall, experience was a blessing, I have grown as a researcher, and I am overjoyed that I finally completed this study.

Conclusion

The lack of EI creates a negative workplace experience that affects employee turnover rates, patient satisfaction, and overall performance outcomes. This study explored the EI strategies that nursing home leaders use to improve nursing home

performance. The qualitative case study was guided by EI, a concept that focuses on the ability recognize, utilize, and manage your own emotions in constructive ways to reduce stress, communicate effectively, empathize with others, prevail over challenges, and soothe conflicts. Data were collected through interview responses from four nursing home leaders, nursing directors and HR professionals across various nursing homes in the state of Florida in the United States; additionally, research public knowledge of nursing homes provided support for the participants answers.

The findings from the study indicated that nursing home leaders use four primary EI strategies to boost nursing home performance; (a) Encouraging effective communication, and empowerment, (b) Organization employee resources, (c) Fair-minded treatment and respect, and (d) Fostering a teamwork atmosphere. These outcomes indicate that nursing home leaders and front-line employees can be trained to use, empathize, effectively communicate, reduce stress, and resolve conflict in the workplace which will reduce negative experiences which will reduce employee and patient turnover, increase job satisfaction, and develop interpersonal skills to improve the nursing home performance.

References

- Abd-Elrhaman, E. S. A., & Ghoneimy, A. G. H. (2018). The effect of conflict management program on quality of patient care. *American Journal of Nursing*, 7(5), 192–201. <https://doi.org/10.11648/j.ajns.20180705.16>
- Afonso, P., Fonseca, M., & Pires, J. F. (2017). Impact of working hours on sleep and mental health. *Journal of Occupational Medicine*, 67(5), 377–382. <https://doi.org/10.1093/occmed/kqx054>
- Al-Bahrani, A. (2017). *Employee perceptions of emotional intelligence among managers* (Publication No. 10288161) [Doctoral dissertation, Walden University]. ProQuest Dissertations and Theses Publishing.
- Aldaz, E., Aritzeta, A., & Galdona, N. (2019). The association between alexithymia, emotional intelligence and burnout among nursing assistants working in nursing home settings: A cross-sectional study. *Journal of Advanced Nursing*, 75, 2786–2796. <https://doi.org/10.1111/jan.14153>
- Alsufyani, A., Baker, O., & Alsufyani, Y. (2020). Consequences of emotional intelligence in nursing: A concept analysis. *Erbil Journal of Nursing and Midwifery*, 3(1), 82–90. <https://doi.org/10.15218/ejnm.2020.10>
- American Psychological Association. (2020). *Publication manual of the American Psychological Association* (7th ed.).
- Ansari, A. H., & Malik, S. (2017). Ability-based emotional intelligence and knowledge sharing. *VINE Journal of Information and Knowledge Management Systems*, 47(2), 211–227. <https://doi.org/10.1108/VJIKMS-09-2016-0050>
- Ariga, F., Purba, J., & Nasution, M. (2020). The relationship of emotional intelligence,

workplace culture, and nurse performance in a private hospital in Medan Indonesia. *Belitung Nursing Journal*, 6(3), 73–76.

<https://doi.org/10.33546/bnj.1063>

Bacon, A. M., & Corr, P. J. (2017). Motivating emotional intelligence: A reinforcement sensitivity theory (RST) perspective. *Motivation and Emotion*, 41(2), 254–264.

<https://doi.org/10.1007/s11031-017-9602-1>

Barrett, D., & Twycross, A. (2018). Data collection in qualitative research. *Evidence-Based Nursing*, 21, 63–64. <https://doi.org/10.1136/eb-2018-102939>

Bekhet, A. K., & Zauszniewski J. A. (2012). Methodological triangulation: An approach to understanding data. *Nurse Researcher*, 20(2), 40–43.

<https://doi.org/10.7748/nr2012.11.20.2.40.c9442>

Beldoch, M. (1964). Sensitivity to expression of emotional meaning in three modes of communication. In J. R. Davitz et al. (Eds.), *The communication of emotional meaning* (pp. 31–42). McGraw-Hill.

Berger, R. (2013). Now I see it, now I don't: Researcher's position and reflexivity in qualitative research. *Qualitative Research*, 15(2), 219–234.

<https://doi.org/10.1177/1468794112468475>

Bhatta, T. (2018). Case study research, philosophical position and theory building: A methodological discussion. *Dhaulagiri Journal of Sociology and Anthropology*, 12, 72–79. <https://doi.org/10.3126/dsaj.v12i0.22182>

Birt, L., Scott, S., Cavers, D., Campbell, C., & Walter, F. (2016). Member checking: A tool to enhance trustworthiness or merely a nod to validation? *Qualitative Health Research*, 26, 1802–1811. <https://doi.org/10.1177/1049732316654870>

- Brackett, M. A., Rivers, S. E., Shiffman, S., Lerner, N., & Salovey, P. (2006). Relating emotional abilities to social functioning: A comparison of self-report and performance measures of emotional intelligence. *Journal of Personality and Social Psychology, 91*, 780–795. <https://doi.org/10.1037/0022-3514.91.4.780>
- Bradberry, T., & Greaves, J. (2009). *Emotional intelligence 2.0*. TalentSmart.
- Brainy Quote. (2022). *Theodore Roosevelt quotes*.
https://www.brainyquote.com/quotes/theodore_roosevelt_140484
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology, 3*(2), 77–101.
<https://doi.org/10.1191/1478088706qp063oa>
- Bressert, S. (2018). What is emotional intelligence (EQ)? *Psych Central*.
<https://psychcentral.com/lib/what-is-emotional-intelligence-eq/>
- Brett, J. (2018). Intercultural challenges in managing workplace conflict—A call for research. *Cross Cultural & Strategic Management, 25*(1), 32–52.
<https://doi.org/10.1108/CCSM-11-2016-0190>
- Brewer, C. S., Kovner, C. T., Djukic, M., Fatehi, F., Greene, W., Chacko, T. P., & Yang, Y. (2016). Impact of transformational leadership on nurse work outcomes. *Journal of Advanced Nursing, 72*, 2879–2893. <https://doi.org/10.1111/jan.13055>
- Brody, N. (2004). What cognitive intelligence is and what emotional intelligence is not. *Psychological Inquiry, 15*(3), 234–238. <https://www.jstor.org/stable/20447233>
- Brothers, K. B., Rivera, S. M., Cadigan, R. J., Sharp, R. R., & Goldenberg, A. J. (2019). A Belmont reboot: Building a normative foundation for human research in the 21st century. *The Journal of Law, Medicine & Ethics, 47*(1), 165–172.

<https://doi.org/10.1177/1073110519840497>

Bryant, O. A. (2017). *Employee turnover in the long-term care industry* (Publication No. 10258132). [Doctoral dissertation, Walden University]. ProQuest Dissertations and Theses.

Bureau of Labor Statistics. (2020). *Occupational outlook handbook, registered nurses*. U.S. Department of Labor. <https://www.bls.gov/ooh/healthcare/registered-nurses.htm>

Candela, A. G. (2019). Exploring the function of member checking. *The Qualitative Report*, 24(3), 619-628. <https://nsuworks.nova.edu/tqr/>

Caramanica, R. M. (2017). *The direct and interactive impact of emotional intelligence and locus of control on private sector employees' perceived stress* (Publication No. 10607782). [Doctoral dissertation, Walden University]. ProQuest Dissertations and Theses.

Cascio, M. I., Magnano, P., Parenti, I., & Plaia, A. (2017). The role of emotional intelligence in healthcare professional burnout. *International Journal of Healthcare and Medical Sciences*, 3(2), 8-16.

<https://arpgweb.com/journal/journal/13>

Castanheira, F. (2016). Perceived social impact, social worth, and job performance: Mediation by motivation. *Journal of Organizational Behavior*, 37(6), 789-803.

<https://doi.org/10.1002/job.2056>

Castleberry, A., & Nolen, A. (2018). Thematic analysis of qualitative research data: Is it as easy as it sounds? *Currents in Pharmacy Teaching and Learning*, 10, 807-815.

<https://doi.org/10.1016/j.cptl.2018.03.019>

- Church, A. H., & Burke, W. W. (2018). Four trends shaping the future of organizations and organization development. *OD Practitioner*, 50(4), 48-56.
<https://doi.org/10.1177%2F1059601196211003>
- Cleary, M., Visentin, D., West, S., Lopez, V., & Kornhaber, R. (2018). Promoting emotional intelligence and resilience in undergraduate nursing students: An integrative review, nurse education today. *Science Direct*, 68.
<https://doi.org/10.1016/j.nedt.2018.05.018>.
- Copanitsanou, P., Fotos, N., & Brokalaki, H. (2017). Effects of work environment on patient and nurse outcomes. *British Journal of Nursing*, 26(3), 172-176.
<https://doi.org/10.12968/bjon.2017.26.3.172>
- Crowne, K. A., Young, T. M., Goldman, B., Patterson, B., Krouse, A. M., & Proenca, J. (2017). Leading nurses: Emotional intelligence and leadership development effectiveness. *Leadership in Health Services (1751-1879)*, 30(3), 217-232.
<https://doi.org/10.1108/LHS-12-2015-0055>
- Delhom, I., Satorres, E., & Meléndez, J. C. (2020). Can we improve emotional skills in older adults? Emotional intelligence, life satisfaction, and resilience. *Psychosocial Intervention*, 29(3), 133-139. <https://doi.org/10.5093/pi2020a8go>
- Demerouti, E. (2014). Individual strategies to prevent burnout. *Burnout at work. A psychological perspective* (pp. 32– 55). Psychology Press.
- De Simone, S., Planta, A., & Cicotto, G. (2018). The role of job satisfaction, work engagement, self-efficacy and agentic capacities on nurses' turnover intention and patient satisfaction. *Applied Nursing Research*, 39, 130-140.
<https://doi.org/10.1016/j.apnr.2017.11.004>

- Dhani, P. (2017). Implications of emotional intelligence. *Journal of the Korea Academia-Industrial Cooperation Society*, 17, 428-440.
<https://doi.org/10.5762/kais.2016.17.5.428>
- Dhingra, R., & Punia, B. K. (2016). Relational analysis of emotional intelligence and change management: A suggestive model for enriching change management skills. *Vision*, 20(4), 312–322. <https://doi.org/10.1177/0972262916668726>
- Evans, C. (2017). *Analyzing semi-structured interviews using thematic analysis: Exploring voluntary civic participation among adults*. SAGE.
<http://dx.doi.org/10.4135/9781526439284>
- Extremera, N., Mérida-López, S., Sánchez-Álvarez, N., & Quintana-Orts, C. (2018). How does emotional intelligence make one feel better at work? The mediational role of work engagement. *International Journal of Environmental Research and Public Health*, 15(9), 1-13. <https://doi.org/10.3390/ijerph15091909>
- Ezeani, I. (2022). *Strategies nursing managers use to prevent and address workplace conflicts* (Order No. 29253778). Available from Dissertations & Theses @ Walden University. (2684547389). Retrieved from
<https://www.proquest.com/dissertations-theses/strategies-nursing-managers-use-prevent-address/docview/2684547389/se-2>
- Fair-minded. (2022). *Cambridge dictionary*. Retrieved from
<https://dictionary.cambridge.org/us/dictionary/english/fair-minded>
- Farooq, M. B., & de Villiers, C. (2017). Telephonic qualitative research interviews: When to consider them and how to do them. *Meditari Accountancy Research*, 25(2), 291-316. <http://dx.doi.org/10.1108/MEDAR-10-2016-0083>

Faulker, S.L. & Trotter, S. P. (2017). Data saturation. *The international encyclopedia of communication research methods*.

<https://doi.org/10.1002/9781118901731.iecrm0060>

Fitzgerald, N., Platt, L., Heywood, S., & McCambridge, J. (2015). Large-scale implementation of alcohol brief interventions in new settings in Scotland: A qualitative interview study of a national programme. *BMC Public Health*, 15(1), 1-11. <https://doi.org/10.1186/s12889-015-1527-6>

Frieder, R. E. (2018). The rules of social exchange: Unchanged but more important than ever. *Industrial and Organizational Psychology*, 11(3), 535-541.

<https://doi.org/10.1017/iop.2018.108>

Fuqua, R. M., Walden, L., & Smith, K. (2018). Human resource management in health care: A case of turnover in long term care. *Advances in Social Sciences Research Journal*, 5(5), 173-180. <https://doi.org/10.14738/assrj.55.4551>

Fusch, P. I., & Ness, L. R. (2015). Are we there yet? Data saturation in qualitative research. *The Qualitative Report*, 20, 1408-1416.

<https://nsuworks.nova.edu/tqr/vol20/iss9/3>

Gallup (2016). *The relationship between engagement at work and organizational outcomes*. Gallup.

Gardner, H. (1993). *Multiple intelligence: Theory in practice*. Basic Books.

Goleman, D. (1997). Daniel Goleman's emotional intelligence: Why it can matter more than IQ. *The Psychologist-Manager Journal*, (1), 21.

<https://doi.org/10.1037/h0095822>

Goleman, D. (2006). *Social intelligence*. Bantam Dell.

- Graneheim, U. H., & Lundman, B. (2004). Qualitative content analysis in nursing research: Concepts, procedures and measures to achieve trustworthiness. *Nurse Education Today*, 24, 105-112. <https://doi.org/10.1016/j.nedt.2003.10.001>
- Guest, G., Namey, E., & Chen, M. (2020) A simple method to assess and report thematic saturation in qualitative research. *PLoS ONE*, 15(5).
<https://doi.org/10.1371/journal.pone.0232076>
- Habeeb, K. T. (2016). *Emotional intelligence, social intelligence, locus of control in relation to stress management in adolescent*. Laxim Book Publications.
- Hamilton, A.B., & Finley, E. P. (2019). Qualitative methods in implementation research: An introduction. *Psychiatry Research*, 283.
<https://doi.org/10.1016/j.psychres.2019.112516>
- Harper, M., & Cole, P. (2012). Member checking: Can benefits be gained similar to group therapy? *The Qualitative Report*, 17(2), 510-517.
<https://nsuworks.nova.edu/tqr/vol17/iss2/>
- Harvey, L. (2015). Beyond member-checking: A dialogic approach to the research interview. *International Journal of Research & Method in Education*, 38, 23-38.
<https://doi.org/10.1080/1743727X.2014.914487>
- Hayashi, P., Abib, G., & Hoppen, N. (2019). Validity in qualitative research: A processual approach. *The Qualitative Report*, 24(1), 98-112.
<https://nsuworks.nova.edu/tqr/>
- Henry, K. V. (2011). *A quantitative analysis of ethical leadership character traits and moral cognition among chief financial officer (CFO) leadership teams* (Publication No. 3439671). [Doctoral dissertation, Walden University].

ProQuest Dissertations and Theses.

Hijmans, E., & Wester, F. (2010). Comparing the case study with other methodologies.

In *Encyclopedia of case study research* (pp. 177-180). Sage.

Horton J., & Epstein R.M. (2020) Mindful leadership. In A. Viera & R. Kramer (eds.)

Management and leadership skills for medical faculty and healthcare executives. Springer.

Ingham-Broomfield, R. (2015). A nurses' guide to qualitative research. *Australian*

Journal of Advanced Nursing, 32(3), 34–41.

<https://search.informit.org/doi/10.3316/ielapa.509772218688556>

Issah, M. (2018). Change leadership: The role of emotional intelligence. *Sage*

Open. <https://doi.org/10.1177/2158244018800910>

Ivankova, N., & Wingo, N. (2018). Applying mixed methods in action research:

Methodological potentials and advantages. *American Behavioral Scientist*, 62(7),

978–997. <https://doi.org/10.1177/0002764218772673>

Jafferian, S. L. (2016). *Perceptions of leader emotional intelligence and subordinate*

turnover intentions in substance abuse treatment centers (Publication No.

3741444). [Doctoral dissertation, Walden University]. ProQuest Dissertations and

Theses.

Janssen, M., Heerkens, Y., Kuijer, W., van der Heijden, B., & Engels, J. (2018) Effects of

mindfulness-based stress reduction on employees' mental health: A systematic

review. *PLoS ONE* 13(1). <https://doi.org/10.1371/journal.pone.0191332>

Jiménez, M. (2018). Leadership style, organizational performance, and change through

the lens of emotional intelligence. *Foundations of Management*, 10(1), 237-250.

<http://dx.doi.org/10.2478/fman-2018-0018>

- Johnston, M. (2017). Secondary data analysis: A method of which the time has come. *Qualitative and Quantitative Methods in Libraries*, 3(3), 619-626.
<http://www.qqml-journal.net/index.php/qqml/article/view/169>
- Joslin, R., & Muller, R. (2016). Identifying interesting project phenomena using philosophical and methodological triangulation. *International Journal of Project Management*, 34, 1043-1056. <https://doi.org/10.1016/j.ijproman.2016.05.005>
- Jurado M., María, D.M., Pérez-Fuentes, M. D. C., Linares, G., J., Simón Márquez, M. D.M., & Martos Martínez, A. (2018). Burnout risk and protection factors in certified nursing aides. *Int. J. Environ. Res. Public Health*, 15(6) 1116.
<https://doi.org/10.3390/ijerph15061116>
- Kaspar, R., & Hartig, J. (2016). Emotional competencies in geriatric nursing: Empirical evidence from a computer based large scale assessment calibration study. *Advances in Health Sciences Education: Theory and Practice*, 21(1), 105–119. <https://doi.org/10.1007/s10459-015-9616-y>
- Katsifaraki, M., & Wood, R. L. (2014). The impact of alexithymia on burnout amongst relatives of people who suffer from traumatic brain injury. *Brain Injury*, 28, 1389– 1395. <https://doi.org/10.3109/02699052.2014.919538>
- Kim, S., Bochatay, N., Relyea-Chew, A., Buttrick, E., Amdahl, C., Kim, L., Frans, E., Mossanen, M., Khandekar, A., Fehr, R., & Lee, Y.M. (2017). Individual, interpersonal, and organisational factors of healthcare conflict: a scoping review. *Journal of Interprofessional Care*, 31(3), 282-290.
<https://doi.org/10.1080/13561820.2016.1272558>

- Khamis Amin, M.E., Nørgaard, L.S., Cavaco, A.M., Witry, M. J., Hillman, L., Cernasev, A., & Desselle, S.P. (2020). Establishing trustworthiness and authenticity in qualitative pharmacy research, *Research in Social and Administrative Pharmacy*, 16(10). <https://doi.org/10.1016/j.sapharm.2020.02.005>
- Kte'pi, B. M. (2018). Data analytics (DA). *Salem press encyclopedia of science*.
- Koppel, J., Deline, M., & Virkstis, K. (2017). The case for focusing on millennial retention. *Journal of Nursing Administration*, 47, 361-363.
<https://doi.org/10.1097/NNA.0000000000000495>
- Kottler, J. A., & Balkin, R. S. (2020). Some tenuous assumptions and conceptions. In *Myths, Misconceptions, and Invalid Assumptions About Counseling and Psychotherapy* (pp. 46-58). Oxford University Press.
- Labra, O., Castro, C., Wright, R., & Chamblas, I. (2020). Thematic analysis in social work: A case study. *Global Social Work-Cutting Edge Issues and Critical Reflections*, 1-20.
- Larsen, E. L., Nielsen, C. V., & Jensen, C. (2013). Getting the pain right: How low back pain patients manage and express their pain experiences. *Disability & Rehabilitation*, 35, 819-827. <https://doi.org/10.3109/09638288.2012.709302>
- Lee, M., & Jang, K.-S. (2019), Nurses' emotions, emotional labor, and job satisfaction, *International Journal of Workplace Health Management*, 13(1) 16-31. <https://doi.org/10.1108/IJWHM-01-2019-0012>
- Leelavati, T. S., & Chalam, G. V. (2020). Can emotional intelligence be developed? *International Journal of Multidisciplinary Educational Research*, 9(8), 104-109.
<https://doi.org/10.18488/journal.61.2020.81.26.36>

- Lewis, S. L. (2019). Emotional Intelligence in neonatal intensive care unit nurses. *Journal of Hospice & Palliative Nursing, 21*(4), 250–256.
<https://doi.org/10.1097/NJH.0000000000000561>
- Lone, M. A., & Lone, A. H. (2018). Does emotional intelligence predict leadership effectiveness? An Exploration in non-western context. *South Asian Journal of Human Resources Management, 5*(1), 28–39.
<https://doi.org/10.1177/2322093718766806>
- Luby, M. G., & Richardson, T. J. (2018). *U.S. Patent No. 10,001,944*. U.S. Patent and Trademark Office.
- MacPhail, C., Khoza, N., Abler, L., & Ranganathan, M. (2015). Process guidelines for establishing intercoder reliability in qualitative studies. *Qualitative Research, 16*, 198-212. <https://doi.org/10.1177/1468794115577012>
- Mahoney, D., & Klass, B. (2014). HRM and conflict management. In W. K. Roche , P. Teague , & A. Colvin (Eds.), *The Oxford handbook of conflict management in organizations* (pp. 79–105). Oxford, UK: Oxford University Press.
- Major, M. M. (2016). *The effect of emotionally intelligent relationships on patient satisfaction with nursing care* (Publication No. 10250903). [Doctoral dissertation, Walden University]. ProQuest Dissertations and Theses.
- Martins, F., Cunha, J., & Serra, F. (2018). Secondary data in research – Uses and opportunities. *PODIUM Sport, Leisure and Tourism Review, 7*(3), 1-4.
<https://doi.org/10.5585/podium.v7i3.316>
- Meira, J. V. & Hancer, M. (2021). Using the social exchange theory to explore the employee-organization relationship in the hospitality industry. *International*

Journal of Contemporary Hospitality Management, 33(2), 670–692.

<https://doi.org/10.1108/IJCHM-06-2020-0538>

Meires, J. (2018). Workplace incivility. The Essentials: Using emotional intelligence to curtail bullying in the workplace. *Urologic Nursing*, 38(3), 150-153.

<https://doi.org/10.7257/1053-816X.2018.38.3.150>

Meyer, K., & Willis, R. (2019). Looking back to move forward: The value of reflexive journaling for novice researchers. *Journal of Gerontological Social Work*, 62(5),

578-585. <https://doi.org/10.1080/01634372.2018.1559906>

Miracle, V. A. (2016). The Belmont report. *Dimensions of Critical Care Nursing*, 35(4),

223-228. <https://doi.org/10.1097/DCC.000000000000186>

Moon, M. D. (2019). Triangulation: A method to increase validity, reliability, and legitimation in clinical research. *Journal of Emergency Nursing*, 45(1), 103-105.

<https://doi.org/10.1016/j.jen.2018.11.004>

Morse, J. M. (2015). Critical analysis of strategies for determining rigor in qualitative inquiry. *Qualitative Health Research*, 25, 1212-1222.

<https://doi.org/10.1177/107780049500100302>

Moser, A., & Korstjens, I. (2018). Series: Practical guidance to qualitative research. Part 3: Sampling, data collection and analysis. *European Journal of General Practice*,

24(1), 9-18. <https://doi.org/10.1080/13814788.2017.1375091>

Mpuang, K. D., Mukhopadhyay, S., & Malatsi, N. (2015). Sign language as medium of instruction in Botswana primary schools: Voices from the field. *Deafness and Education International*, 17, 132-143.

<https://doi.org/10.1179/1557069x14y.0000000047>

- Mukhtar, M., Risnita, R., & Prasetyo, M. A. M. (2020). The influence of transformational leadership, interpersonal communication, and organizational conflict on organizational effectiveness. *International Journal of Educational Review*, 2(1), 1-17. <https://doi.org/10.33369/ijer.v2i1.10371>
- National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research. (1979). *The Belmont report: Ethical principles and guidelines for the Protection of human subjects of research*. Author. <https://hhs.gov/ohrp/humansubjects/guidance/Belmont.html>
- Nelson-Brantley, H. V., Park, S. H., & Bergquist-Beringer, S. (2018). Characteristics of the nursing practice environment associated with lower unit-level RN turnover. *Journal of Nursing Administration*, 48(1), 31-37. <https://doi.org/10.1097/NNA.0000000000000567>
- Nespereira-Campuzano, T., & Vázquez-Campo, M. (2017). Emotional intelligence and stress management in nursing professionals in a hospital emergency department, *Enfermería Clínica (English Edition)*, 27(3), 172-178. <https://doi.org/10.1016/j.enfcle.2017.02.008>
- Nightingale, S., Spiby, H., Sheen, K., & Slade, P. (2018). The impact of emotional intelligence in health care professionals on caring behaviour towards patients in clinical and long-term care settings: Findings from an integrative review. *International Journal of Nursing Studies*, 80, 106–117. <https://doi.org.10.1016/j.ijnurstu.2018.01.006>
- Noble, H., & Heale R. (2019). Triangulation in research, with examples *Evidence-Based Nursing*. 22. 67-68. <https://doi.org/10.1136/ebnurs-2019-103145>

- Nouri, N., Moeini, B., Ghaleiha, A., Faradmal, J., & Zareban, I. (2017). The effect of emotional intelligence training based on social support theory on reducing perceived stress and promoting communication skills among male high school students in Hamadan. *Journal of Education and Community Health*, 3(4), 45-51. <https://doi.org/10.18869/acadpub.jech.3.4.45>
- Nowell, L. S., Norris, J. M., White, D. E., & Moules, N. J. (2017). Thematic analysis: Striving to meet the trustworthiness criteria. *International Journal of Qualitative Methods*. <https://doi.org/10.1177/1609406917733847>
- Okyere, B., Frank, A. & Hope, E. (2020). Utilizing Mckinsey 7s model, swot analysis, PESTLE and balance scorecard to foster efficient implementation of organizational strategy. evidence from the community hospital group-Ghana limited. *International Journal of Business, Economics and Management*. <http://www.ijrbem.com/>
- Onwuegbuzie, A., & Leech, N. (2005). On becoming a pragmatic researcher: The importance of combining quantitative and qualitative research methodologies. *International Journal of Social Research Methodology*, 8(5), 375-387. <https://doi.org/10.1080/13645570500402447>
- Osterman, P. (2019) Improving long-term care by finally respecting home care aides: What makes a good life in late life? Citizenship and justice in aging societies, special report. *Hastings Center Report* 48, 5(2018), S67-S70. <https://doi.org/10.1002/hast.917>
- Palaganas, E. C., Sanchez, M. C., Molintas, M. P., & Caricativo, R. D. (2017). Reflexivity in qualitative research: A journey of learning. *The Qualitative Report*,

22, 426-438. <https://nsuworks.nova.edu/tqr/>

- Patino, C. M., & Ferreira, J. C. (2018). Internal and external validity: Can you apply research study results to your patients? *Jornal brasileiro de pneumologia : publicacao oficial da Sociedade Brasileira de Pneumologia e Tisiologia*, 44(3), 183. <https://doi.org/10.1590/S1806-37562018000000164>
- Pérez-Fuentes, M. D. C., Molero Jurado, M. D. M., Gázquez Linares, J. J., & Oropesa Ruiz, N. F. (2018). The role of emotional intelligence in engagement in nurses. *International Journal of Environmental Research and Public Health*, 15(9). <https://doi.org/10.3390/ijerph15091915>
- Phillips, J., & Harris, J. (2017). Emotional intelligence in nurse management and nurse job satisfaction and retention: A scoping review protocol. *JBIS Database of Systematic Reviews and Implementation Reports*, 15, 2651-2658. <https://doi.org/10.11124/JBISRIR-2016-003300>
- Pirvu, C. (2020). Emotional intelligence – A catalyst for sustainability in modern business. *Theoretical and Empirical Researches in Urban Management*, 15(4), 60-69. <https://doi.org/10.2307/26955975>
- Ploeg, J., Northwood, M., Duggleby, W., McAiney, C. A., Chambers, T., Peacock, S., Fisher, K., Ghosh, S., Markle-Reid, M., Swindle, J., Williams, A., & Triscott, J. A. (2020). Caregivers of older adults with dementia and multiple chronic conditions: Exploring their experiences with significant changes. *Dementia*, 19(8), 2601–2620. <https://doi.org/10.1177/1471301219834423>
- Prezerakos P. (2018). Nurse managers' emotional intelligence and effective leadership: A

review of the current evidence. *The Open Nursing Journal*, 86-92.

<https://doi.org/10.2174/1874434601812010086>

Psychology Today. (2020). *Mindfulness*.

<https://www.psychologytoday.com/us/basics/mindfulness>

Queirós, A., Faria, D., & Almeida, F. (2017). Strengths and limitations of qualitative and quantitative research methods. *European Journal of Education Studies*.

<http://dx.doi.org/10.46827/ejes.v0i0.1017>

Reeves, S., Kuper, A., & Hodges, B. D. (2008). Qualitative research methodologies: Ethnography. *British Medical Journal*, 337, 512-514.

<https://doi.org/10.1136/bmj.a1020>

Rezvani, A., Barrett, R. and Khosravi, P. (2019), Investigating the relationships among team emotional intelligence, trust, conflict and team performance, *Team Performance Management*, 25(2), 120-137. <https://doi.org/10.1108/TPM-03-2018-0019>

<https://doi.org/10.1108/TPM-03-2018-0019>

[2018-0019](https://doi.org/10.1108/TPM-03-2018-0019)

Ricciotti, N. A. (2016). *Emotional intelligence and instigation of workplace incivility in a business organization* (Publication No. 10156446). [Doctoral dissertation, Walden University]. ProQuest Dissertations and Theses.

Rocchi, M., Pelletier, L., Cheung, S., Baxter, D., & Beaudry, S. (2017). Assessing needsupportive and need-thwarting interpersonal behaviours: The Interpersonal Behaviours Questionnaire (IBQ). *Personality and Individual Differences*, 104, 423-433. <https://doi.org/10.1016/j.paid.2016.08.034>

Rodriguez, A., & Smith, J. (2018). Phenomenology as a healthcare research method.

Evidence-Based Nursing. <https://doi.org/10.1136/eb-2018-102990>

- Salovey, P., & Mayer, J. D. (1990). Emotional intelligence. *Imagination, Cognition and Personality*, 9, 185-211. <https://doi.org/10.2190/DUGG-P24E-52WK-6CDG>
- Saunders, M. N. K., Lewis, P., & Thornhill, A. (2015). *Research methods for business students* (7th ed.). Pearson Education.
- Saundry, R., Fisher, V., & Kinsey, S. (2021). Disconnected human resource? Proximity and the (mis)management of workplace conflict. *Human Resource Management Journal*, 31(2), 476-492. <https://doi.org/10.1111/1748-8583.12318>
- Sehgal, G. (2017). Emotional intelligence aptitude: An essential pillar for health service providers. *Indian Journal of Commerce and Management Studies*, 8(2), 109-114. <https://doi.org/10.18843/ijcms/v8i2/15>
- Serrat, O. (2017). Understanding and developing emotional intelligence. In *Knowledge solutions*. Springer.
- Seyedsafi, M. (2017). *Relationship between leadership styles, emotional intelligence, and project manager performance* (Publication No. 10623167). [Doctoral dissertation, Walden University]. ProQuest Dissertations and Theses.
- Shead, J., Scott, H., & Rose, J. (2015). Investigating predictors and moderators of burnout in staff working in services for people with intellectual disabilities: The role of emotional intelligence, exposure to violence and self-efficacy. *International Journal of Developmental Disabilities*, 62(4), 224–233. <https://doi.org/10.1179/2047387715Y.0000000009>
- Shorten, A., & Smith, J. (2017). Mixed methods research: Expanding the evidence base. *Evidence-Based Nursing*, 2017(20), 74-75. <https://doi.org/10.1136/eb-2017-102699>

- Sims, J. M. (2010). A brief review of the Belmont Report. *Dimensions of Critical Care Nursing*, 29(4), 173-174. <https://doi.org/10.1097/DCC.0b013e3181de9ec5>
- Smith, T. (2017). Qualitative and quantitative research. *Research Starters: Education (Online Edition)*.
- Smith, P. R. (2018). Collecting sufficient evidence when conducting a case study. *The Qualitative Report*, 23, 1048-1054. <https://nsuworks.nova.edu>
- Smith, T. (2019). Qualitative and quantitative research. *Salem Press Encyclopedia*.
- Srivastava, R., & Yadav, S. (2017). A research study on the affect of emotional intelligence on the ability to handle the conflict and team building. *Splint International Journal of Professionals*, 4(5), 86-93. <https://doi.org/10.19044/esj.2018.v14n25p256>
- Stapleton, F.B., & Oipari, V.P. (2020). The current health care crisis—inspirational leadership (or lack thereof) is contagious. *JAMA Netw Open*, 3(6), <https://doi.org/10.1001/jamanetworkopen.2020.8024>
- Supramaniam, S., Kuppusamy S. (2021). Impact of Emotional Intelligence on Organisational Performance: An Analysis in the Malaysian Public Administration. *Administrative Sciences* 11: 76. <https://doi.org/10.3390/admsci11030076>
- Sutton, R. I. (2007). *The no asshole rule: Building a civilized workplace and surviving one that isn't*. Warner Business Books.
- Sutton, J., & Austin, Z. (2015). Qualitative research: Data collection, analysis, and management. *Canadian Journal of Hospital Pharmacy*, 68, 226-231. <https://doi.org/10.4212/cjhp.v68i3.1456>
- Taylor, J., Coates, E., Brewster, L., Mountain, G., Wessels, B., & Hawley, M. S. (2015).

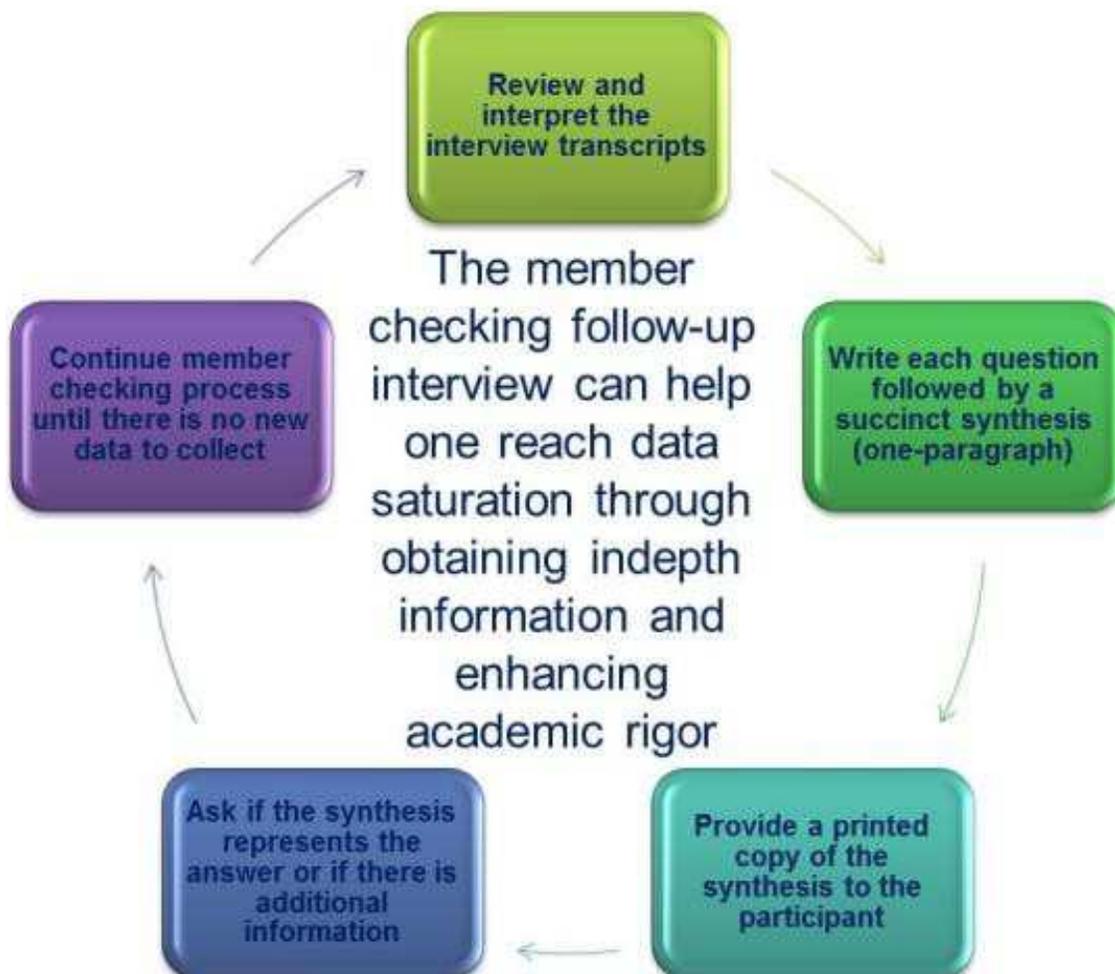
- Examining the use of telehealth in community nursing: Identifying the factors affecting frontline staff acceptance and telehealth adoption. *Journal of Advanced Nursing*, 71, 326-337. <https://doi.org/10.1111/jan.12480>
- Theofanidis, D., & Fountouki, A. (2019). Limitations and delimitations in the research process. *Perioperative nursing (GORNA)*, 7(3), 155–162. <http://doi.org/10.5281/zenodo.2552022>
- University of Georgia College of Public Health. (2020, July 7). *Definition of Gerontology*. Institute of Gerontology. <http://iog.publichealth.uga.edu/what-is-gerontology/>
- Valenti GD, Faraci P, Magnano P. Emotional Intelligence and Social Support: Two Key Factors in Preventing Occupational Stress during COVID-19. *Int J Environ Res Public Health*. 2021 Jun 28;18(13):6918. <https://doi:10.3390/ijerph18136918>
- Van Zyl, E., Nel, P., & Mokuoane, M. (2017). The effects of work stress and emotional intelligence on self-leadership among nurses in leadership positions in the Lesotho ministry of health and social welfare. *Africa Journal of Nursing & Midwifery*, 19(1), 88-104. <https://doi.org/10.25159/2520-5293/613>
- Vass, C., Rigby, D., & Payne, K. (2017). The role of qualitative research methods in discrete choice experiments: A systematic review and survey of authors. *Medical Decision Making*, 37(3), 298–313. <https://doi.org/10.1177/0272989X16683934>
- Watson, T. S. (2019). Intelligence quotient (IQ). *Salem Press Encyclopedia of Health*.
- Weidmann, B., & Deming, D. J. (2020). *Team players: How social skills improve group performance*. NBER Working Papers 27071, National Bureau of Economic Research. <https://doi.org/10.3386/w27071>

- Weiszbrod, T. (2015). Health care leader competencies and the relevance of emotional intelligence. *The Health Care Manager, 34*, 140-146.
<https://doi.org/10.1097/HCM.0000000000000060>
- Weiszbrod, T. (2020). Health Care Leader Competencies and the Relevance of Emotional Intelligence. *Health Care Manager, 39*(4), 190–196.
<https://doi.org/10.1097/HCM.00000000000000307>
- Wicks, J., Nakisher, S., & Grimm, L. (2013). Emotional intelligence (EI). *Salem Press Encyclopedia of Health*.
- Winter, S., & Collins, D. (2015). Why do we do, what we do? *Journal of Applied Sport Psychology, 27*, 35-51. <https://doi.org/10.1080/10413200.2014.941511>
- Yeong, M. L., Ismail, R., Ismail, N. H., & Hamzah, M. I. (2018). Interview protocol refinement: Fine-tuning qualitative research interview questions for multi-racial populations in Malaysia. *The Qualitative Report, 23*(11), 2700-2713. *ProQuest*
- Yin, R. K. (2018). *Case study research and applications: Design and methods* (6th ed.). Sage.
- Yin, J., Jia, M., Ma, Z., & Liao, G. (2020). Team leader's conflict management styles and innovation performance in entrepreneurial teams. *International Journal of Conflict Management, 31*(3), 373-392. <https://doi-org/10.1108/IJCMA-09-2019-0168>
- Zhao, P., Xu, X., Peng, Y., & Matthews, R. A. (2020). Justice, support, commitment, and time are intertwined: A social exchange perspective. *Journal of Vocational Behavior, 120*, Article 103432. <https://doi.org/10.1016/j.jvb.2020.103432>

Appendix A: Interview Protocol

Interview Protocol	
What you will do	What you will say—script
Introduce the interview and set the stage—often over a meal or coffee	Script XXXXXXXXXXXXXXXXXXXXXXXX
<ul style="list-style-type: none"> • Watch for non-verbal queues • Paraphrase as needed • Ask follow-up probing questions to get more in depth 	<ol style="list-style-type: none"> 1. Interview question 2. Interview question 3. Interview question 4. Interview question 5. Interview question 6. Interview question 7. Interview question 8. Interview question 9. Interview question 10. Last interview question should be a wrap up question such as: What additional experiences have you had...?
Wrap up interview thanking participant	Script XXXXXXXXXXXXXXXXXXXXXXXX
Schedule follow-up member checking interview	Script XXXXXXXXXXXXXXXXXXXXXXXX

Follow-up Member Checking Interview



Introduce follow-up interview and set the stage

Script XXXXXXXXXXXXXXXXXXXXXXXX

Share a copy of the succinct synthesis for each individual question

Script XXXXXXXXXXXXXXXXXXXXXXXXX

Bring in probing questions related to other information that you may have found— note the information must be related so that you are probing and adhering to the IRB approval.

Walk through each question, read the interpretation and ask:

Did I miss anything?
Or, What would you like to add?

1. Question and succinct synthesis of the interpretation—perhaps one paragraph or as needed
2. Question and succinct synthesis of the interpretation—perhaps one paragraph or as needed
3. Question and succinct synthesis of the interpretation—perhaps one paragraph or as needed
4. Question and succinct synthesis of the interpretation—perhaps one paragraph or as needed
5. Question and succinct synthesis of the interpretation—perhaps one paragraph or as needed
6. Question and succinct synthesis of the interpretation—perhaps one paragraph or as needed
7. Question and succinct synthesis of the interpretation—perhaps one paragraph or as needed
8. Question and succinct synthesis of the interpretation—perhaps one paragraph or as needed
9. Question and succinct synthesis of the interpretation—perhaps one paragraph or as needed
10. Question and succinct synthesis of the interpretation—perhaps one paragraph or as needed

Appendix B: Interview Questions

1. What EI training strategies have you implemented to reduce employee turnover?
2. What EI training strategies have you implemented to increase job satisfaction?
3. Based on your organization's experience, how have these strategies reduced employee turnover?
4. Based on your organization's experience, how have these strategies increased job satisfaction?
5. What, if any, EI training strategies have you implemented to improve employees' interpersonal skills?
6. Based on your organization's experience, how have these strategies improved interpersonal skills?
7. What key barriers did you experience in implementing the strategies you just discussed?
8. What did your organization do to overcome those key barriers?
9. How did you assess the overall effectiveness of the strategies for improving your organization's performance?
10. What other information would you like to share about your organization's strategies for EI training and how their effects on reducing employee turnover, job satisfaction, interpersonal skills, and organization performance?