Nurse Work Engagement and Nurse Manager Emotional Intelligence: A Developmental Intervention

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Background
The healthcare industry is increasingly facing:
- Cost containment
- Demand for consumer-centric and payor-centric outcomes
- Compression of reimbursement
- Rapid trajectory to value-based care

Confounding by:
- Present and projected increases in nursing workforce shortages
- Rising demand for services
- Cost transparency

Engagement of nurses is foundational to adoption of best practices and to retention of employees, both of which favorably position value-based performance.

Engagement levels of nurses is cause for concern and lower than that of other direct care providers in the healthcare industry.

Purpose
To increase staff nurse level of work engagement with an intervention to improve nurse manager emotional intelligence.
To assess if staff nurse level of work engagement is sensitive to shift worked or years of experience in nursing.

Methods
Nine nurse managers covering medical-surgical units in an 885-bed academic medical center participated by voluntary enrollment in the 16-week development program.

Convenience sampling was used to survey staff nurses both pre and post the development program using the 3-item Utrecht Work Engagement Scale (UWES-3) survey which measures the attributes of vigor, dedication, and absorption.

The initial step was nurse manager completion of an online EQ-I 2.0 self-assessment followed by a detailed report and debrief with the coach which included goal-setting.

This was followed by monthly individual and group coaching sessions.

Sample
- Response to both pre/post surveys was similar at 22.76% and 21.68% respectively.
- Final sample size was 88 for the pre-survey and 66 for the post-survey.

Results
Previous studies have demonstrated higher levels of engagement in day shift nurses and those with greater than 10 years of experience but this study did not. The intervention demonstrated no effect on level of nurse work engagement.

Previous studies have shown that emotional intelligence is amenable to development but changes slowly over time. Duration of the project may have been insufficient to change nurse manager behaviors. The coaching was unstructured and behavior observations were not included. This may have been insufficient to drive behavior changes.

Receptiveness to coaching and intentionality are with-person. Level of nurse manager motivation was not assessed. During the period of the project there was short-staffing and stretched ratios. The many requests from the managers for voluntary overtime from staff may have been perceived as unsupportive. Each manager was responsible for multiple units, limiting availability to provide support to the staff.

Conclusion
Nurse work engagement is a complex phenomenon of critical importance to nurse executive leaders for driving clinical and workforce outcomes. The current body of evidence does not inform on effective and replicable strategies to drive improvement efforts.

References

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