The Effects of Emotional Intelligence on Patient Throughput
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Significance of the Problem
- Delays in patient throughput affect patient outcomes, patient satisfaction, and reimbursement.
- Patient complaints of long wait times to be seen by a doctor in the ED, coupled with overcrowding in the ED, have been identified as a national epidemic by the Institute of Medicine (Michelsen, Carlton, Gleason, & Cannon, 2014).
- If there is not a bed available, treatment can be compromised for all patients; it is imperative to address how to move patients out of the ED in a timely manner to allow access for new patients to receive care.

Objective
- The system goal for moving patients out of the ED to an inpatient bed is 30 minutes. Prior to implementation the average time was 62 minutes.
- Delays in discharging patients and delays in moving patients out of the ED once care is complete poses a risk for patients arriving to the ED resulting in severe consequences.
- The objective is to increase throughput, patient satisfaction, and associate satisfaction through emotional intelligence training to acute care nurses.

Search Strategy/Approach
- Keywords used in search: avoidance, behavior, emotional intelligence, distress, stress, patient turnover, admissions, overwhelmed, and patient churn
- Databases utilized: CINAHL andovid

Synthesis of Evidence
- Nurses compared admissions to code situations due to lengthy time it takes them away from other patients (Mowinski, Jenigs, Sandelowski, & Higgins, 2013).
- Evidence supports creating an Emotional Intelligence (EI) program to educate nurses on how emotional intelligence influences the ability to recognize, understand, and manage emotions to better adapt to change (Basogul & Ozgur, 2016).

Practice Change
- 100 Medicinal Surgical Nurses from 4 units (CRU, 2N, 3N and 4N) attended four hours of EI training focusing on how emotions affect patient throughput.
- This project was completed with two phases. The first phase was observing the current admission process and identifying barriers.
- The second phase was educating the RNs on the concepts of EI through a formal implementation process.
- Activities and information from the book, Emotionally Intelligent Leadership for Students: Facilitation and Activity Guide were used to create a lesson plan.
- The classes consisted of lecture, interactive activities, and reflection. During each component of EI, the throughput process was used to demonstrate how emotions affect nursing practice.
- The purpose of the education focused on decreasing anxiety about admissions and learning to anticipate rather than react to changes in work flow.

Discussion
- The complex adaptive system theory was used to illustrate how each part of the throughput process influences each component reciprocally, and the more connections, such as nurses reactions, increase the linear time line.
- Data collected demonstrated that charge nurses take 15 minutes to notify RN of admit, RN then takes 25 minutes to go to the ED to pick up patient, RN spends 20 minutes in ED receiving report and returning to inpatient unit.
- Of admit 98 out of 100 RNs were interviewed and stated that they had negative emotions when being told they would receive an admission causing them to avoid picking up patients.

Outcomes
- The success of the project was measured on Ready To Move (RTM) to occupied bed times.
- After two months of emotional intelligence training, RTM to occupied time, in the medical surgical units that received training, went from an average of 62 minutes prior to training to 42 minutes post training.
- RTM to occupied time is inversely related to ED patient satisfaction; therefore, patients who have lower wait times are more satisfied according to the Press Ganey survey results.
- Acute care nurses were able to prepare mentally for admissions which provided an increase in personal job satisfaction due to EI training.
- The sample size was limited to a 176 bed community hospital.

Implications for Practice
- Results indicate that EI training has a positive influence on patient throughput and patient satisfaction.
- Daily monitoring of throughput times and periodic re-education of EI concepts will sustain the culture of reducing delays in throughput.
- It is essential to continue to monitor the data on RTM to occupied times on a daily basis and coach RN’s who have increased times on EI concepts.
- Ultimately, the patient experience is in jeopardy every time the encounters are negative, whether it be delays or just attitude of the nurses.
- By teaching EI, nurses learn to manage the variability of their emotions that cause increased stress and avoidance behaviors.

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References
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