Relationship between Head Nurses’ perception of their Emotional Intelligence and their Staff Nurses’ Job Satisfaction

Tarek Ramadan Rashad¹, Gehen Mohamed Ahmed Mostafa², Hemat Abdel Azeem Mostafa³

¹(B.Sc. Nursing, Central Nursing Directorate, Ministry of Health and Population, Department of Nursing Administration, Faculty of Nursing, Helwan University)
²(Professor and Head of Nursing Administration Department, Faculty of Nursing, Helwan University)
³(Professor of Nursing Administration, Faculty of Nursing, Ain Shams University)

Abstract

Background: Nurses are the corner stone of the health care systems and their satisfaction is a must. Emotional intelligence of head nurses may help in increasing staff nurses job satisfaction. Aim: The aim of this study is to explore the relationship between Head Nurses’ perception of their emotional intelligence and Staff Nurses’ job satisfaction. Setting: The study was carried out at Om El Masryeen general hospital, in Giza Subjects: All available Head Nurses at the time of data collection were included in the study (N=30). Also, all available staff nurses at the time of data collection were included in the study (N=113). Design: Descriptive correlational research design was utilized to carry this study. Data collection tools: Tool 1: Emotional Intelligence Self-Assessment questionnaire. Tool 2: The Index of Work Satisfaction Questionnaire. Results: Half of head nurses had moderate level of perception regarding their emotional intelligence and more than half of staff nurses who had moderate level of job satisfaction. Conclusion: A statistically significant positive correlation between emotional intelligence and job satisfaction. Recommendations: The study recommended that design training programs for head nurses to improve their emotional intelligence competencies. Further studies to investigate the effect of strategies to improve emotional intelligence of head nurses.

Key words: Emotional intelligence, Head nurses, Job satisfaction, Staff nurses, Perception
1. Introduction

The head nurses' role is currently seen as one of the hardest, most complex roles in healthcare. The head nurse is accountable for translating strategic goals and objectives expressed at the operational level into practice. Thus, the position of head nurse requires an ability to interpret general concepts and integrate them into specific clinical and management performance, while simultaneously determining and monitoring outcomes through managerial and clinical supervision. (Imelda et.al, 2020)

Nurses are the largest human resource group in the healthcare system. They should be managed in a way that leads to job satisfaction (JS) and high quality care. Job satisfaction is a global feeling or attitude toward various aspects of a job and is an affective orientation toward work that an employee perceives. Nursing authorities have a critical role in promoting JS among staff nurses. Of the nurse managers, head nurses directly deal with nursing staff in performing day-to-day operations and nursing care. They also establish unit policies and coordinate the staff nurses' duties. Head nurses must be concerned about organizational and nurse staff's needs simultaneously to solve the problems that may arise in the hospital wards or units. As the effectiveness of head nurses influences the organization's productivity and staff satisfaction, their management skills have to be promoted. (Specchia et.al, 2021)

Emotional intelligence (EI) is a social skill and an important component of communication. It can be expressed as the ability to correctly identify emotions, make proper decisions and solve problems (Shirazi et al., 2021). Emotional intelligence is a way of recognizing, understanding and choosing how people think, feel and act. It shapes interaction with others and understanding of them, it defines how and what people learn. Emotional intelligence is defined as the ability to recognize and understand emotions in yourself and others, and your ability to use this awareness to manage your behavior and relationships. Emotional intelligence differs from traditional intelligence with a focus on skills and abilities in the emotional realm including self-awareness, others awareness of emotion, and empathy, whereas traditional intelligence involves verbal, spatial, and logic processing abilities (Chong, 2020)

Additionally, emotional intelligence consist of five components are (self-awareness, self-regulation, motivation, empathy and social Skills). The ability to use emotions to facilitate problem solving or generate excitement in the performance group has an important role. Progression of positive emotions within the group facilitates collaboration and group participation and reduces conflict and also increases staff job satisfaction (Azad et.al, 2020).

Relationships within the workplace played a role in job satisfaction; with findings suggesting supervisor- subordinate relationships, patient role clarity, and autonomy are strong predictors of job satisfaction. Team member relationships also play a role in job satisfaction. Finally, income affects job satisfaction, despite the lack of reporting detailing the cause. To be satisfied in their jobs, people want recognition and the potential for advancement. Recognition, job enrichment, quality management, and career opportunities contribute to job satisfaction (Shabaan, 2021).

It is generally considered that employees with higher emotional intelligence will influence job satisfaction. This is because the employees with higher emotional intelligence are able to develop strategies to overcome the possible consequences which may arise out of stress whereas those with less emotional intelligence won't be in a position to overcome the stress situations. In addition, in a group setting employees with higher EI will be able to influence the emotions of others in such a manner that, they will be able to boost their own as well as their co-workers' morale. The relationship between emotional intelligence and job satisfaction has gained the attention of researchers as it is reported that emotional intelligence plays a pivotal role in predicting job satisfaction among employees. (Gong et.al, 2020)
1.1. Significance of the Study

EI plays a crucial role in the employee job satisfaction and their work. It has always been challenging issue for nurses. Emotion (feeling and moods) serves important aspects of human lives which also includes the aspects of leadership practices. Decision making is one of the major components of leadership practice, and effective decision making is greatly influenced by the ability to manage emotion or in other words EI. As claimed by Wirawan et.al (2019), people’s cognitive capabilities are informed and influenced by their emotions and their abilities to manage their emotions effectively. Thus, leaders’ behaviors and decisions are potentially impacted by the leaders’ emotions and capability to maintain controls over their emotions. (Wirawan et.al 2019)

EI is getting recognition rapidly as one of the most important aspect while maintaining the work environment of the organization. By identifying the impact that EI has over the employees and their job satisfaction in the organization will help them find qualified leaders and the training that are necessary for the leaders. The reason for this study was to know how these factors will improve the relation between the leaders and their subordinates. (Jha and Bhattacharya, 2021)

1.2. Aim of the study

The aim of this study is to explore the relationship between Head Nurses’ perception of their emotional intelligence and Staff Nurses’ job satisfaction through:

- Assessing Head Nurses’ perception of their emotional intelligence.
- Assessing Staff Nurses’ job satisfaction.
- Finding out the relation between Head Nurses’ perception of their emotional intelligence and their Staff Nurses’ job satisfaction.

1.3. Research questions

- What is the Head Nurses’ perception of their emotional intelligence?
- Are staff nurses satisfied with their job?
- Is there a relationship between Head Nurses’ perception of their emotional intelligence and their Staff Nurses’ job satisfaction?

2. Subjects and methods

2.1. Research design:

A descriptive correlational research design was utilized to carry this study.

2.2. Research setting:

The study was carried out at Om El Masryeen general hospital in all its units, affiliated to Ministry of Health and Population in Giza governorate. It consists of (4) buildings, the first building is administrative, the second contains inpatient (medical and surgical) rooms, the third contains (ICU-OR-ER – NICU - burn), and the fourth building contains dialysis unit, cardiac cath, and OPD. The study was carried out at (ICU- OR- ER – NICU – OPD- burn – in patient – dialysis – cardiac cath).

2.3. Subjects:

The subjects will be composed of two groups:

First group:
All available Head Nurses at the time of data collection (30) were included in the study.

Second group:
All available staff nurses at the time of data collection (113) were included in the study.
2.4. Tools of data collection:

Tool I: Emotional Intelligence Self-Assessment questionnaire (Appendix I). It consists of two parts:

Part 1: Personal characteristics sheet of the head nurses. This was including head nurses (age, gender, educational qualifications, unit and years of experience).

Part 2: Emotional Intelligence Self-Assessment questionnaire

It was developed by (Goleman et al, 2002) to measure emotional intelligence (EI) perception. The scale has a total of 50 items. It measures 5 components of (EI): self-awareness (10 items); self-regulation (10 items); self-motivation (10 items); social awareness (10 items); and social skills (10 items).

Scoring system:

The emotional intelligence self-assessment questionnaire responses were measured on 3-point Likert scale type ranging from (1) rarely to (3) always. Scoring system ranged from (50-150). It was calculated according to three levels based on (Landau & Everitt, 2003)

- High ($\geq$83-150)
- Moderate ($\geq$71 - <83)
- Low (50 - <71)

Tool II: The Index of Work Satisfaction Questionnaire (Appendix II)

It consists of two parts:

Part 1: Personal characteristics sheet of the staff nurses. This was including staff nurses (age, gender, educational qualifications, unit and years of experience).

Part 2: The Index of Work Satisfaction Questionnaire.

It was be modified by the researcher from (Stamps, 2001). It was be self-administered questionnaire measuring components of job satisfaction. These components were including (6) dimensions: organizational policies (7 items), task requirements (6 items), professional status (7 items), autonomy (8 items), interaction (10 items), and pay (6 items).

Scoring system:

The indexes of work satisfaction questionnaire responses were be measured on 3-point Likert scale ranging from (1) disagree to (3) agree. Scoring system ranged from (44-132). It was calculated according to three levels based on (Landau & Everitt, 2003).

- High ($\geq$ 86-132)
- Moderate ($\geq$73 - <86)
- Low (44 - < 73)

2.5. Validity of the tool:

The data collection tools were tested for content validity by group of expertise from the psychiatric health nursing and nursing administration specialties. The jury group of experts specialized in nursing administration and psychiatric nursing from four universities, as follow: one assistant professor of nursing administration from Helwan University; one professor of nursing administration from Portsaid University; one assistant professor of nursing administration and one professor in psychiatric nursing from Benha University; one assistant professor of nursing administration from Ain Shams University. Tools translation was modified based on experts responses.
2.6. **Reliability of the tool:**

Cronbach’s alpha is commonly used as a measure of the internal consistency (reliability). The coefficient normally ranges between 0 and 1. The closer it is to 1.0, the greater the internal consistency of the items in the scale. Nunnaly (1978) has indicated (0.7) to be an acceptable reliability coefficient but lower coefficients (0.6) are sometimes used in the literature. Cronbach’s Alpha for the total scale (for the first tool): 0.790 and (for the second tool): 0.749.

2.7. **Pilot study:**

Pilot study was done on 10% of the total number of nurses, which was (3) head nurses and (10) staff nurses from previously mentioned settings. The aim of the pilot study was to determine the clarity, feasibility and applicability of the study tools, and estimate the time needed for filing the questionnaires and also to test the clarity of language and translation. Those participants in the pilot study were included in the main study sample.

2.8. **Fieldwork**

The actual fieldwork started at the beginning of February 2019 after securing all official permissions. It was completed by the middle of May 2019. The researcher collected data through meeting subjects individually and groups, explaining the aim of the study and method of filling out the questionnaire, and obtaining a verbal consent to participate. The researcher assured the study subjects were allowed to choose to participate or not in the study and their responses was confidential. The researcher was present all the time during fulfilling the forms to answer any questions. The time needed to complete the first tool was ranged between (10-15) minutes and the second tool was ranged between (15-20) minutes. The researcher checked the completeness of each filled sheet to ensure the absence of any missing data.

2.9. **Ethical considerations:**

The study protocol was approved by the ethics and research committee in the faculty of Nursing Helwan University. Official permissions to conduct the study were secured. All participants gave their oral consent to participate in the study. They were informed about the study purpose, procedure and about their rights to refuse or withdraw without giving reasons. They were reassured about the anonymity of the information collected, and that it would be used only for the purpose of scientific research.

2.10. **Data management:**

Data entry and statistical analysis were done using SPSS 22.0 statistical software package. Data were presented as mean and standard deviation (SD) values. Reliability of the questionnaire was assessed using Cronbach’s alpha reliability coefficient. Pearson's correlation coefficient was used to determine significant correlations between the variables. Chi-Square test (χ²) was used to test the relation between the variables. Data were presented using descriptive statistics in the form of frequencies, percentages. The significance level was set at $P$-value ≤ 0.05.
3. Results

Table (1): personal characteristics of head nurses (N=30)

<table>
<thead>
<tr>
<th>Demographic characteristics</th>
<th>No</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>➢ Age groups (years)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ ≥30- &lt; 40</td>
<td>12</td>
<td>40.0</td>
</tr>
<tr>
<td>▪ ≥ 40- 50</td>
<td>18</td>
<td>60.0</td>
</tr>
<tr>
<td>➢ Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>➢ Educational qualifications</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Nursing diploma</td>
<td>27</td>
<td>90.0</td>
</tr>
<tr>
<td>▪ High average diploma</td>
<td>1</td>
<td>3.3</td>
</tr>
<tr>
<td>▪ Bachelor degree in nursing</td>
<td>2</td>
<td>6.7</td>
</tr>
<tr>
<td>➢ Unit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ inpatient</td>
<td>5</td>
<td>16.7</td>
</tr>
<tr>
<td>▪ dialysis</td>
<td>3</td>
<td>10.0</td>
</tr>
<tr>
<td>▪ ICU</td>
<td>3</td>
<td>10.0</td>
</tr>
<tr>
<td>▪ OPD</td>
<td>3</td>
<td>10.0</td>
</tr>
<tr>
<td>▪ OR</td>
<td>4</td>
<td>13.3</td>
</tr>
<tr>
<td>▪ ER</td>
<td>4</td>
<td>13.3</td>
</tr>
<tr>
<td>▪ Cath lab</td>
<td>3</td>
<td>10.0</td>
</tr>
<tr>
<td>▪ NICU</td>
<td>3</td>
<td>10.0</td>
</tr>
<tr>
<td>▪ Burn</td>
<td>2</td>
<td>6.7</td>
</tr>
<tr>
<td>➢ Years of experience</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ ≥ 10 - &lt; 15 years</td>
<td>5</td>
<td>16.7</td>
</tr>
<tr>
<td>▪ ≥ 15 years</td>
<td>25</td>
<td>83.3</td>
</tr>
</tbody>
</table>

Table (1) depicts the demographic characteristics of head nurses. Three-fifths of them (60.0%) were < 40- 50 years old, whereas (40.0%) were 30- > 40 years old. Regarding gender, all of them (100%) were females. According to their educational qualifications, the majority of them (90.0%) were diploma/ secondary nurses, while only (6.7%) of them were bachelor nurses.

As regards the number of head nurses in hospital units, more than half of them (53.3%) worked in critical units (ICU, OR, ER, NICU, burns), whereas (16.7% were in inpatient wards. Concerning years of experience, the majority of them (83.3%) had ≥ 15 years of experience, whereas only (16.7%) of them had more than 10 or less than 15 years of experience.

Table (2): Personal characteristics of staff nurses (N=113)

<table>
<thead>
<tr>
<th>Demographic characteristics</th>
<th>No</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>➢ Age groups (years)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ 20 - &lt; 30</td>
<td>47</td>
<td>41.6</td>
</tr>
<tr>
<td>▪ ≥30- &lt; 40</td>
<td>45</td>
<td>39.8</td>
</tr>
<tr>
<td>▪ ≥ 40- &lt; 50</td>
<td>21</td>
<td>18.6</td>
</tr>
<tr>
<td>➢ Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Male</td>
<td>12</td>
<td>10.6</td>
</tr>
<tr>
<td>▪ Female</td>
<td>101</td>
<td>89.4</td>
</tr>
<tr>
<td>➢ Educational qualifications</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Nursing diploma</td>
<td>65</td>
<td>57.5</td>
</tr>
<tr>
<td>▪ High average diploma</td>
<td>37</td>
<td>32.7</td>
</tr>
<tr>
<td>▪ Bachelor degree in nursing</td>
<td>11</td>
<td>9.7</td>
</tr>
</tbody>
</table>
Table (2) describes the demographic characteristics of staff nurses, more than two fifths of them (41.6%) were more than 20 and less than 30 years old; compared to (39.8) were from 30 to less than 40 years old, whereas only (18.6%) had equal to and more than 40 and less than 50 years old. Pertaining to gender, majority of them (89.4%) were females and only (10.6%) were males. According to their educational qualifications, the majority of them (90.0%) were diploma/secondary nurses, while only (6.7%) of them were bachelor nurses.

As regards the number of head nurses in hospital units, more than one half of them (53.9%) worked in critical units (ICU, OR, ER, NICU, burn); whereas (17.7%) of them were in inpatient wards. Concerning years of experience, approximately two fifths of them (39.8%) had equal or more than 15 years of experience, compared to (14.2) had more than 10 and less than 15 years of experience, whereas more than one fifth (21.2%) of them had more than 5 and less than 10 years of experience.

Low (50 - <71); Moderate (≥71 - < 83); and High (≥83-150)

Figure (1): Perception levels of emotional intelligence (EI) among head nurses
Figure (1) traces perception levels of emotional intelligence among the studied head nurses. One fifth (20%) of head nurses’ emotional intelligence was high, whereas half (50%) of them were moderate, and approximately one third (30%) were low.

Low (44 - 73); Moderate (73 - 86); and High (86 - 132)

Figure (2): levels of job satisfaction among staff nurses

Figure (2) depicts levels of job satisfaction among the studied staff nurses. Approximately one-fifth (20.6 %) of staff nurses’ job satisfaction were high, whereas (53.1%) of them were moderate, and approximately one forth (26.3%) were low.

Table (3). Correlation between head nurses’ emotional intelligence and staff nurses’ job satisfaction

<table>
<thead>
<tr>
<th>Emotional intelligence dimensions</th>
<th>Job satisfaction dimensions</th>
<th>Organizational policies</th>
<th>Task requirement</th>
<th>Professional status</th>
<th>Autonomy</th>
<th>Interaction</th>
<th>Pay</th>
<th>Total Job Satisfaction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-awareness</td>
<td>r</td>
<td>.363*</td>
<td>-.005</td>
<td>.012</td>
<td>.360</td>
<td>.264</td>
<td>.044</td>
<td>.370*</td>
</tr>
<tr>
<td></td>
<td>P</td>
<td>.049</td>
<td>.981</td>
<td>.950</td>
<td>.051</td>
<td>.159</td>
<td>.817</td>
<td>.044</td>
</tr>
<tr>
<td>Self-regulation</td>
<td>r</td>
<td>.425*</td>
<td>.222</td>
<td>-.25</td>
<td>.122</td>
<td>-.018</td>
<td>.244</td>
<td>.349</td>
</tr>
<tr>
<td></td>
<td>P</td>
<td>.019</td>
<td>.239</td>
<td>.894</td>
<td>.520</td>
<td>.925</td>
<td>.194</td>
<td>.059</td>
</tr>
<tr>
<td>Self-motivation</td>
<td>r</td>
<td>-.005</td>
<td>.274</td>
<td>.023</td>
<td>.063</td>
<td>.029</td>
<td>.040</td>
<td>.188</td>
</tr>
<tr>
<td></td>
<td>P</td>
<td>.979</td>
<td>.143</td>
<td>.902</td>
<td>.740</td>
<td>.878</td>
<td>.833</td>
<td>.321</td>
</tr>
</tbody>
</table>
Table (3) reveals a statistically significant correlation between self awareness and organizational policies & total job satisfaction (p=.049 & p=.044) respectively. According to self regulation, there was a statistically significant correlation between self regulation and organizational policies (p=.019).

As regards social awareness, there was a statistically significant correlation between social awareness and professional status (p=.044), while there was a statistically significant correlation between social skills and task requirements (p=.034), and between social skills and total job satisfaction (p=.027).

Also there was a statistically significant correlation between total emotional intelligence of head nurses and total job satisfaction scores (P=.022).
Figure (3). Correlation between head nurses’ emotional intelligence and staff nurses’ job satisfaction

Figure (3) shows a statistically significant relationship between head nurses’ total emotional intelligence and overall job satisfaction (r = 0.417, p = .022).

4. Discussion

Emotional intelligence among head nurses provides oversight for the nursing staff and increases their job satisfaction. Also, it helps head nurses’ complete administrative tasks to ensure the health-care facility is running smoothly (Meier, 2020). This study was formulated to explore the relationship between head nurses’ perception of their emotional intelligence and their staff nurses’ job satisfaction.

Emotional intelligence is a main element. Emotions have their own place and value in the areas of leadership and organization (Saleh & Eldeep, 2020). The current study showed that half of head nurses have a moderate level in their perception regarding emotional intelligence, and approximately one fifth of them have a high level of emotional intelligence. This may be due to head nurses consider themselves as having the abilities of self-awareness, self-regulation, self-motivation, social awareness, and relationship management.

This result was in harmony with the results of Saleh & Eldeep (2020), who studied emotional intelligence among nurse managers at Sohag and Damanhour university hospitals and found that approximately half of nurse managers had a moderate level of emotional intelligence at Damanhour university hospitals and 41.7% have a moderate level of emotional intelligence at Sohag university hospitals.

This result was inconsistent with the results of Ibrahim & Elsabahy (2020), who showed that nursing managers had a high level of emotional intelligence, especially for their ability to perceive emotions. In the same line, Tyczkowski et al. (2015) reported that a convenience sample of nursing managers employed in six large Midwestern health systems had a high level of emotional intelligence. On the other hand, Prufeta (2017) found that nursing managers at a large, urban academic medical center in the Northeast region of the United States had a low level of emotional intelligence and needed development or improvement.

Job satisfaction is especially important in-service organizations such as hospitals, and particularly at the level of nurses (Nemati & Navidi, 2016). The current study revealed that more than half of nurses have a moderate level of job satisfaction and approximately one-quarter of them have a low level of job satisfaction.

This may be due to their being satisfied with what they are doing at work. Also, teamwork and cooperation among various levels of nursing personnel help them be more
satisfied. The results of the current study were congruent with the results of Motlagh et al. (2020), who demonstrated that job satisfaction was at a moderate level among the studied nurses. This result was incongruent with the results of a study by Mousavi et al. (2016) who indicated that job satisfaction was at a favorable level in Amir Alam Hospital in Tehran, Iran, which was higher than that observed in the present study.

Emotional intelligence has been used by the administrative authorities in many workplaces to explain issues related to job satisfaction, performance, absenteeism, organizational commitment, and leadership (Fekry & Mohammed, 2018). The current study showed that there was a statistically significant positive correlation between the emotional intelligence of head nurses and staff nurses' job satisfaction. This may be due to head nurses who have emotional intelligence helping staff nurses to be more satisfied with their work through respect, helpfulness, and co-operation.

This is in line with the study conducted by Boafo et al. (2014) and Fekry & Mohammed (2018) that revealed there was a positive relationship between emotional intelligence and job satisfaction. Furthermore, Rahmati (2016) discovered a direct relationship between emotional intelligence and job satisfaction among primary healthcare providers in Iran's sisten region.

Furthermore, (Suleman et al., 2020) revealed that there was a moderate positive correlation between emotional intelligence and job satisfaction, which means that emotional intelligence is directly associated with job satisfaction. It is evident from this relationship that the higher the emotional intelligence of head nurses, the higher the staff nurses' job satisfaction.

Additionally, they clarified that the reason behind that could be that respondents with higher levels of emotional intelligence use mechanisms that help others adapt to the poor conditions in the hospital environment, such as inadequate resources, work overload, and completing tasks without adequate reward. Those with a low level of emotional intelligence, on the other hand, lacked the ability to help staff nurses adapt properly to critical situations and become less satisfied. Also, high emotional intelligence helps head nurses be able to acknowledge, manage, and use their emotions to eliminate ensuing barriers and improve their career horizons more than those with low emotional intelligence and help others be satisfied.

On the contrary, El Badawy et al. (2014) found that emotional intelligence was not related to job satisfaction, while Gill et al. (2012) revealed a negative correlation between emotional intelligence and job satisfaction. A possible cause for such a contradiction in the findings of the above studies may be due to the different statistical tools used for evaluation of emotional intelligence and job satisfaction.
In the current study, among the five dimensions of emotional intelligence, only self-awareness and social skills dimensions among head nurses were found to be significantly correlated with job satisfaction of staff nurses. This finding indicated that the ability of head nurses to understand and visualize the emotional constituents of themselves and staff nurses has a relationship with staff nurses' job satisfaction. It could be explained that head nurses with high social awareness are better equipped to evaluate and manage the emotions of their staff nurses. This certainly helped to foster positive and nurturing head nurse-staff nurse relationships, resulting in a greater degree of job satisfaction.

This finding is congruent with the work of Mousavi et al. (2012), who revealed that social awareness and empathy were predictors of job satisfaction and partially agreed with the finding of Seyal & Afzaal (2013), who pointed out that among the five components of emotional intelligence; only self-management and self-awareness had a positive significant correlation with job satisfaction.

Additionally, Suleman et al. (2020) showed that there was a moderate correlation between all the subdimensions of emotional intelligence and job satisfaction, such as self-motivation, self-awareness, empathy, managing relations, emotional stability, integrity, value orientation, self-development, commitment, and altruistic behavior. It explicitly indicates that all these subdimensions of emotional intelligence have a substantial positive relationship with job satisfaction, which shows that emotionally intelligent head nurses will help staff nurses have a higher level of job satisfaction.

5. Conclusion

This study examined the relationship between head nurses' emotional intelligence and their staff nurses' job satisfaction and found a statistically significant positive correlation between emotional intelligence and job satisfaction. It was reported that the half of head nurses had moderate level of perception regarding their emotional intelligence and more than half of staff nurses who had moderate level of job satisfaction.

6. Recommendations

The study recommended that design training programs for head nurses to improve their emotional intelligence competencies, include emotional intelligence in the nursing curriculum of nursing schools to improve technical nurses' skills of emotional intelligence, implement new strategies to improve job satisfaction of staff nurses, develop organizational policies to enhance staff nurses' job satisfaction as offering control over their scheduling. Recommendations for further research directions, Future studies needed to be conducted with different subjects and different settings to investigate the effect of strategies to improve emotional intelligence of head nurses.
7. References


11. **Mohammed, M., & Fekry, N. (2018).** Relationship between Head Nurses Emotional Intelligence and Staff Nurses Job Satisfaction. The Medical Journal of Cairo University, 86(December), 4065-4072.


16. Rahmati, A. (2016). Relationship between emotional intelligence and job satisfaction of primary health care providers (behavars)


