



The relationship between registered nurse emotional intelligence, turnover intention and job performance

Sandra S. Weiss, Russell Clayton & Laurence Weiss

To cite this article: Sandra S. Weiss, Russell Clayton & Laurence Weiss (06 Jul 2025): The relationship between registered nurse emotional intelligence, turnover intention and job performance, International Journal of Healthcare Management, DOI: [10.1080/20479700.2025.2520950](https://doi.org/10.1080/20479700.2025.2520950)

To link to this article: <https://doi.org/10.1080/20479700.2025.2520950>



Published online: 06 Jul 2025.



Submit your article to this journal [↗](#)



View related articles [↗](#)



View Crossmark data [↗](#)



The relationship between registered nurse emotional intelligence, turnover intention and job performance

Sandra S. Weiss^{a,b}, Russell Clayton^{a,b} and Laurence Weiss^c

^aMuma College of Business, University of South Florida, Tampa, FL, USA; ^bTGH-USF People Development Institute, Tampa, FL, USA;

^cHealthTrust Purchasing Group, St. Petersburg, FL, USA

ABSTRACT

This study provides insight into the impact that registered nurse (RN) emotional intelligence (EI) has on turnover intention and job performance. Data on emotional intelligence, turnover intention, and job performance were collected from RNs within Pinellas County, Florida. The final sample consisted of 189 surveys that were completed by nurses working in the hospital setting. Results showed a significant positive predictive relationship between EI and job performance, and a significant negative predictive relationship between EI and turnover intention. Improving RN EI has the potential to enhance dimensions related to job performance, which can increase patient safety and quality of care provided. Additionally, RNs with high EI were less likely to possess intention of leaving their workplace, which can result in cost savings for organizations. This study shows the importance that EI has on nursing practice and other factors associated with organizational success.

ARTICLE HISTORY

Received 11 July 2024

Accepted 11 June 2025

KEYWORDS

Emotional intelligence; turnover; job performance; healthcare quality; patient safety; hospital; registered nurse; nursing

Introduction

Nurses are core frontline caregivers and directly face challenges that could lead to emotional impacts, resulting in poor performance and job turnover. The global nursing workforce has experienced increased demand as a result of growing population needs, and the supply of nurses has not been able to meet this demand [1,2]. In the United States, the demand for nurses is expected to grow at approximately 6% from 2022–2032 [3]. The average cost of turnover for one registered nurse (RN) in the United States is \$56,300, with a range of \$45,100 to \$67,500 [4]. For comparison, in 2013, the average cost for turnover in New Zealand for each RN was \$NZ23,800, and R \$2,759.69 in Brazil in 2016 [5].

It is estimated that there is a current shortage of seven million nurses globally, which could continue to grow without urgent action to stabilize the workforce [2]. Reducing turnover and ensuring the existing workforce of nurses is able to excel at their jobs are two strategies organizations can use to help retain competent nurses and meet the increased demand on their staff [1]. When turnover is experienced, it can be difficult to onboard a new nurse. New nurses must learn the facility, their written policies, as well as organizational cultural idiosyncrasies that can make it difficult to acclimate to the new setting. Job performance depends on having the ability to communicate with the patient, clinical, and nonclinical staff. Nurses must communicate effectively in difficult situations in order to adequately care for their patients.

Higher nurse turnover is associated with higher patient fall rates, medication errors, general adverse events, and other medical errors [6]. Turnover among nurses can be a sign of stress, low satisfaction with the job, and professional discontent [7]. When there is a high rate of turnover, especially when turnover involves individuals that the organization would like to retain, it can be detrimental to the organization [8]. Having a better understanding of factors that can be associated with nurse turnover, particularly those that can be improved through training and development activities will be of great value to healthcare organizations, healthcare leaders, nurses, and the patients they serve.

Job stress has a negative relationship with job satisfaction and a positive relationship with turnover intention [9]. Emotionally intelligent nurses are better equipped to work in teams, deal with the stressors of the job, and interact with patients [10,11]. Globally, health organizations face understaffing, lack of resources, poor collaboration, and inadequate leadership support, which can negatively impact the goals of an organization [6]. Better understanding the relationship between RN EI, turnover intention, and job performance has the potential to help enhance the workplace as a whole.

Emotional intelligence

Emotions play a key role in the decision-making process. The defining characteristics of emotional intelligence (EI) includes self-awareness, self-regulation,

motivation, empathy, and social skills [12]. Having the ability to appraise one's own emotions in addition to the emotions of others is a critical skill that nurses should possess as the demands placed on them increase. Emotional intelligence is linked to improved decision-making and problem-solving abilities, as well as higher social skills and increased self-control [13].

Emotional intelligence is a necessary skill to ensure collaboration among fellow nurses and better care for patients [14]. The dimensions of EI can be useful during nursing practice to help sustain the demanding emotional labor that nurses encounter when caring for their patients [15]. Emotional intelligence can help nurses cope with the stress and demands placed on them daily, which can also reduce instances of burn-out [13]. In a high demand work environment, individuals with high EI are better able to work in a team and mitigate negativity in the workplace [16].

Turnover intention

The nursing literature defines turnover intention as the willingness of an employee to leave the workplace voluntarily [18]. Turnover intention is positively related to, and can be used as a surrogate for, turnover [18,19].

For nurses, many factors can contribute to the initial psychological responses to job characteristics. These include patient load, interpersonal relationships with other nurses, teamwork within the nursing unit, and organizational characteristics [20]. Nurses with higher job satisfaction have a lower turnover intention regardless of intensity of workload and leadership quality [20].

A study in Israel explored the relationship between EI and organizational withdrawal behaviors in financial senior managers. It found that EI predicts both a decrease in withdrawal intentions from the organization, along with better job performance [21]. One study of hospital nurses in Hawaii showed that there is a positive association between EI and employee retention [22]. Another study in Jordanian hospitals found a positive relationship between EI and intent to stay of nurses [23]. Two studies in Greece explored the relationship between EI and turnover intention. A study by Trivellas et al. [24], found that two dimensions of EI (self emotion appraisal and use of emotions) predicted a decrease in nurse turnover intention. Another study found that EI predicted lower turnover intention in nurses [25]. Finally, a study in Pakistan showed that EI had a negative relationship on turnover intention [26].

Job performance

Nurse job performance involves several factors including individual patient care interventions, balancing

the responsibility of caring for multiple patients, working as a team with other nurses and healthcare professionals, and interacting with patients and family members as an advocate and teacher. Nursing has been identified as one of the most stressful healthcare occupations [8]. Emotional intelligence has the potential to impact job performance in several ways. The ability to manage one's emotional state and handle a stressful environment is important for nurses to be successful in their job. Nurses work as part of an interdisciplinary healthcare team and as a team with other nurses on their unit; therefore, EI can contribute to effective communication and interactions with their team members. They must also be able to identify and understand the emotions of patients and their families to ensure successful collaboration [14]. The relationship between EI and job performance was explored in a study of Jordanian hospital nurses. The study found a positive relationship between EI and job performance [27]. Another study in Jordan determined EI predicted increased job performance in hospital nurses [28]. Studies in Saudi Arabia and India found similar results [29–31]. However, a study in Iran found no relationship between EI and job performance [32].

Pinellas County, Florida is the 13th oldest county in Florida by median age, and among the seven most populous counties in Florida, Pinellas County exhibits the highest median resident age [33]. The aging population in this county would be expected to require more high-quality healthcare, thus creating a more demanding workplace for nurses. While there is previous literature evaluating aspects of EI's effect on nurses' performance and turnover worldwide, there is a lack of research in the population of hospital-based nurses working in an aging, highly populated locality in the United States. This study seeks to contribute to the body of knowledge on this topic by exploring how EI predicts turnover intention and job performance of RNs working in hospitals in Pinellas County, Florida. The first hypothesis of this study is that increased EI will yield a lower turnover intention of the acute care RNs surveyed. The second hypothesis of this study is that increased EI yields a higher level of job performance for acute care RNs.

Research methodology

Research instruments

Survey responses for EI, turnover intention and job performances were obtained by Likert scales, which is ordinal data. These responses were converted to continuous data by calculating means for each of the scales. Emotional intelligence was measured using questions combined from two scales. The first 12 questions were from Wong and Law [34], and the final four

questions are from Gold and Hale [35]. Research supports the use of the Gold and Hale's scale, as an adaptation from the Wong and Law scale, and based on Bradberry and Greaves [36] to measure EI. Respondents rated themselves using a seven-point Likert scale with responses ranging from 'strongly disagree' to 'strongly agree.' The Wong and Law scale yields a Cronbach's alpha ranging from 0.84–0.93 [34]. Gold and Hale's scale is reliable, as it yields a Cronbach's alpha of 0.865 [35].

Turnover intention was measured by a two-question survey that was used and validated by Orvis et al [17]. Responses were collected using a five-point Likert scale. The two-question survey used to assess turnover intention yielded a high internal consistency, with a Cronbach's alpha of 0.97 [17].

Job performance was measured using two questions from Schat and Frone, using a five-point Likert scale. The questions that assessed job performance had high internal consistency, reporting a Cronbach's alpha of 0.89 [37]. Standard demographic data were also obtained. Questions asked of respondents are listed in Figure 1.

Participants and procedures

A prospective study design was implemented to explore the relationship between RN EI and job performance and turnover intention. This study was reviewed and approved by the Institutional Review Board at Saint Leo University, all participants reviewed and agreed to informed consent to participate in this research.

Participants were selected from a database of nearly 10,000 licensed RNs obtained from the Florida Department of Health Public Data Portal [38]. Inclusion criteria included RNs with a registered home address in Pinellas County, a clear and active RN license, currently practising in the acute care setting, and listing an email address.

Active, licensed nurses in good standing registered in Pinellas County, Florida who provided their email addresses to the Florida Department of Health were emailed a link to the study survey. Qualtrics was utilized to send out emails to 9,994 RNs in Pinellas County, Florida. Surveys were anonymised, so no internet protocol (IP) addresses or any identifiable information was linked to their responses. The survey responses were downloaded, then exported to Statistical Package for Social Sciences Software (SPSS).

Of the 9,994 surveys sent out, there were 470 completed surveys returned (4.7% response rate). Of the 470 completed surveys, 189 were completed by RNs working in the acute care setting. The acute care setting was the focus of this study as that is where a majority of RNs practice [39]. Since this study focused on hospital-based nurses, all analyses were run on the

189 surveys completed by those who identified as working in the acute care setting. The final sample was composed of 189 surveys returned from RNs working in acute care facilities. Demographics data are described in Table 1.

Statistical analysis

Data analysis was conducted using SPSS version 30. Likert scale results were averaged to obtain a mean score for each variable which was used to complete the statistical analysis. Higher scores on a Likert scale (e.g. job performance) indicated a higher level of the variable. Standard deviation, mean, and correlation for the variables were computed in SPSS. Listwise deletion was used to exclude any missing elements in the data collection. In order to assess reliability, Cronbach's alpha, a measure of internal consistency, was tested [35]. Pearson correlations were calculated between EI, turnover intention, and job performance to determine relationships between the study variables. A linear regression analysis was conducted to predict turnover intention and job performance for EI. To account for the potential confounding effects of age and tenure/employment length, both of which exhibited significant correlations with the dependent variables, these factors were included as control variables in the regression models.

Results

Findings

A significant negative relationship (Table 2) was found between EI and turnover intention, with a correlation of -0.228 ($P < 0.01$). A significant positive relationship was found between EI and job performance, with a correlation of 0.321 ($P < 0.01$). This means that job performance increased as EI increased in study participants. There was also a significant negative correlation, -0.232 ($P < 0.01$) between job performance and turnover intention. As job performance increases, turnover intention decreases. Correlation analysis shows that there is a negative relationship between EI and turnover intention and a positive relationship between EI and job performance.

EI to predict turnover intention (Model 1)

Model 1 was used to determine how EI predicts turnover intention. A linear regression was performed to determine this predictive relationship. The linear regression (Table 3) showed that emotional intelligence accounted for 6.2% of the variance in turnover intention. The model fit for this regression (including age and length of employment as control variable) was significant ($P < .01$), as indicated in the regression row

Emotional intelligence

Using a five-point Likert scale, from “strongly disagree” to “strongly agree,” answer the following 16 questions.

Self-emotion appraisal (SEA)

1. I have a good sense of why I have certain feelings most of the time.
2. I have a good understanding of my own emotions.
3. I really understand what I feel.
4. I always know whether or not I’m happy.

Others’ emotion appraisal (OEA)

5. I always know my friends’ emotions from their behavior.
6. I am a good observer of others’ emotions.
7. I am sensitive to the feelings and emotions of others.
8. I have good understanding of the emotions of people around me.

Regulation of emotion (ROE)

9. I am able to control my temper and handle difficulties rationally.
10. I am quite capable of controlling my own emotions.
11. I can always calm down quickly when I am very angry.
12. I have good control of my own emotions.

Relationship management (RM)

13. I enjoy helping others develop their skills.
14. I am able to orchestrate “win-win” situations.
15. I used different strategies to build consensus.
16. I have built and maintained extensive informal networks.

Turnover intention

Using a five-point Likert scale, from “not likely at all” to “extremely likely” answer the following two questions.

1. How likely is it that you will actively look for a job outside of your healthcare organization next year?
2. I will probably look for a job outside of my present organization in the next year or so.

Job performance

Using a five-point Likert scale from “poor” to “excellent,” respond to the following two questions.

1. Considering all of your job duties and responsibilities, how would your supervisor or boss rate your overall performance at work during the past 12 months?
2. Considering all of your job duties and responsibilities, how would your supervisor or boss rate the overall amount of work you accomplished during the past 12 months?

Demographic and RN practice questions

The following questions were asked to obtain demographic and practice information for survey respondents.

1. Age
2. Gender
 - a. Female
 - b. Male
3. Type of Nursing degree held
 - a. Associate’s degree
 - b. Bachelor’s degree
 - c. Master’s degree
 - d. Doctorate degree
4. Length of nursing career in years
5. Length of employment at current job in years
6. Workplace
 - a. Acute care hospital
 - b. Ambulatory care setting
 - c. Home health
 - d. Rehabilitation or skilled nursing facility
 - e. Other
7. Race
 - a. White
 - b. Black or African American
 - c. Asian
 - d. American Indian or Alaskan Native
 - e. Native Hawaiian or other Pacific Islander
 - f. Hispanic or Latino
 - g. Other

Figure 1. Survey questionnaire.

Table 1. Demographics ($n = 189$).

Characteristic	Frequency	(%)
Sex		
Female	172	91
Male	17	9
Age		
20–29 years	19	10.1
30–39 years	63	33.3
40–49 years	24	12.7
50–59 years	48	25.4
≥ 60 years	35	18.5
Education		
Associate degree	71	37.6
Bachelor's degree	92	48.6
Master's degree	24	12.7
Doctoral degree	2	1.1
Length of nursing career		
0–9 years	86	45.5
10–19 years	31	16.4
20–29 years	21	11.1
30–39 years	33	17.4
40–49 years	16	8.5
> 50 years	2	1.1
Time in current job		
0–9 years	145	76.7
10–19 years	27	14.3
20–29 years	13	6.9
≥ 30 years	4	2.1
Race		
White	171	90.5
Black or African American	5	2.6
Asian	5	2.6
Hawaiian	2	1.1
Other	6	3.2

of the ANOVA output section of SPSS (Figure 2). The regression model indicated a statistically significant relationship between emotional intelligence and turnover intention ($P = 0.001$) as noted in the SPSS output Coefficients table. An F statistic of 10.428 ($P = 0.001$) indicates the independent variable EI explains the variation in the dependent variable turnover intention. The beta coefficient for EI was -0.229 ($P = 0.001$), meaning for every 1 increase in EI, turnover intention decreases by 0.229. This supports previous research done by Trivellas et al. [40], who found that

two dimensions of EI (self emotion appraisal and use of emotion) were negatively associated with turnover intention.

Model 1 showed that there is a negative predictive relationship between EI and turnover intention, which agrees with the significant negative relationship found in the correlation analysis. Therefore, the hypothesis that there is a negative predictive relationship between RN EI and turnover intention was supported.

EI to predict job performance (Model 2)

The predictive relationship between EI and job performance was analyzed in Model 2, with a linear regression methodology. The model fit for this regression (including age and length of employment as control variable) was significant ($P < .001$), as indicated in the regression row of the ANOVA output section of SPSS (Figure 3). Emotional intelligence accounted for 12.6% of the variance in job performance. The regression model indicated a statistically significant relationship ($P < .001$) between emotional intelligence and job performance, as noted in the SPSS output Coefficients table. An F statistic of 21.265 ($P < 0.001$) indicates that the independent variable EI does a good job in explaining the variation in the dependent variable job performance. The beta coefficient for EI was 0.315 ($P < 0.001$), meaning for every 1 increase in EI, job performance increases by 0.315.

Model 2 showed that there is a positive predictive relationship between RN EI and job performance, which corresponded to the correlation analysis showing a positive relationship between EI and job performance. Therefore, the hypothesis that there is a positive predictive relationship between RN EI and

Table 2. Means, standard deviations, and correlations ($N = 189$).

Variable	Mean	SD	EI	TI	JP	Age	Tenure
EI	5.8192	0.537	1				
TI	2.9524	1.866	-0.228^{**}	1			
JP	4.2566	0.6834	0.321^{**}	-0.232^{**}	1		
Age	44.81	13.174	0.72	-0.63	0.162^*	1	
Tenure	6.66	7.495	0.004	-0.159^*	0.18^*	0.426^{**}	1

Note: $^*P < 0.05$, $^{**}P < 0.01$. EI: Emotional intelligence; TI: Turnover Intention; JP: Job Performance.

Table 3. Regression analysis.

Model		Unstandardised Coefficients		Standardised Coefficients		T	Sig
		B	Std. Error	Beta			
1	(Constant)	7.752	1.493			5.193	<0.001
	Tenure	-0.042	0.019	-0.169		-2.158	0.032
	Age	0.004	0.011	0.026		0.326	0.745
	EI	-0.795	0.246	-0.229		-3.229	0.001
2	(Constant)	1.624	0.528			3.078	0.002
	Tenure	0.013	0.007	0.146		1.934	0.055
	Age	0.004	0.004	0.077		1.025	0.307
	EI	0.401	0.087	0.315		4.611	<0.001

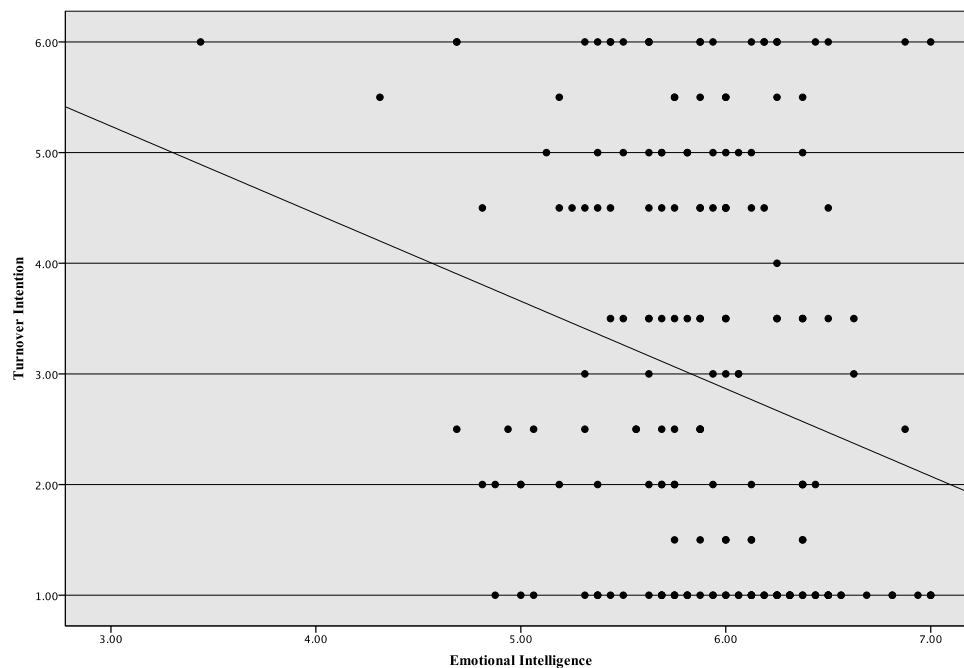


Figure 2. Emotional intelligence and turnover intention.

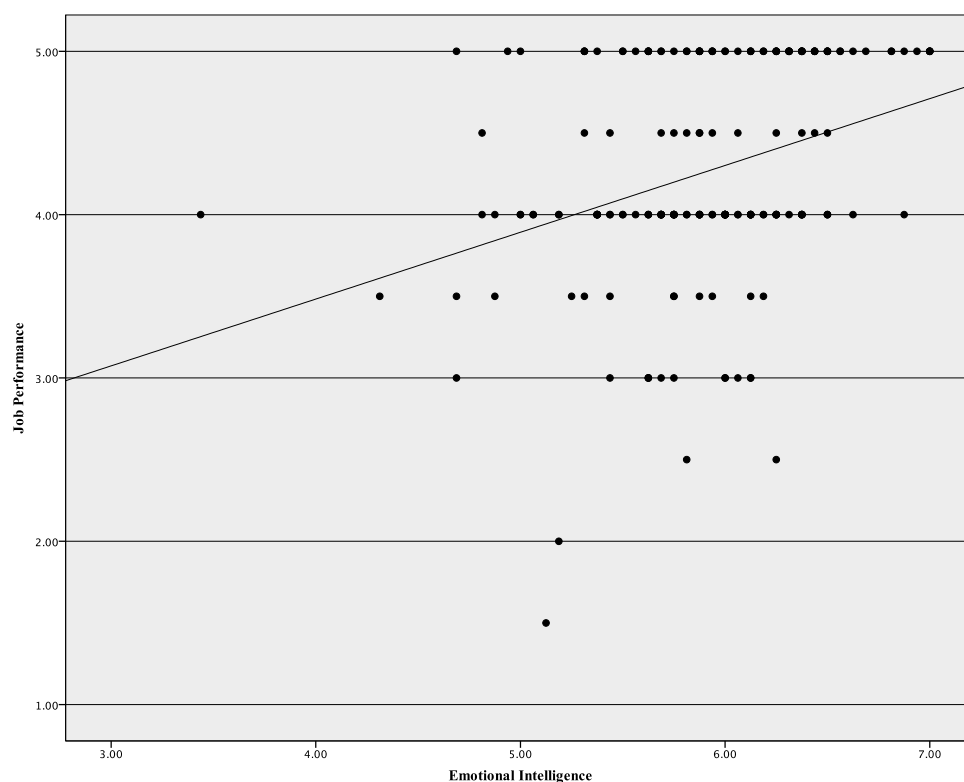


Figure 3. Emotional intelligence and job performance.

job performance was supported similar to findings by Greenidge et al. [41] and Wong and Law [34].

Conclusion

Discussion

Nurses have stressful jobs, balancing patient care, documentation, orders, communication, and urgent

changes. Emotionally intelligent nurses manage these tasks better, communicate efficiently with patients, families, and colleagues, and perform more accurately. Conversely, non-emotionally intelligent nurses may struggle with communication, misinterpret patient needs, and interact poorly with families and coworkers, impacting patient care and team dynamics. This can increase their emotional burden and inefficiency, affecting operations, quality, and safety.

This study contributes to literature supporting the role of EI in RN job performance and turnover intention, finding that EI contributes to variance in turnover intention and job performance. These figures, though seemingly small, are crucial for healthcare organizations aiming to improve retention and performance. Turnover intention and job performance of acute care RNs directly impact patients and hospitals.

While this study sample consisted of nurses working in a hospital setting in one county in Florida, the working conditions and skills needed to be successful are similar throughout the world [42]. It would be expected that hospital nurses working in population centers throughout the world are facing similar pressures, and the benefits of EI on turnover and job performance would be similar. Additionally, expectations surrounding patient satisfaction are of global concern, requiring effective communication and coping skills [43]. The results of this study can be used to develop strategies to improve nurse EI and therefore reduce turnover and improve job performance of hospital nurses.

Theoretical implications

Study findings align with existing literature regarding EI's impact on turnover intention and job performance. EI impacts turnover intention through job satisfaction and organizational commitment. Higher EI levels lead to greater job satisfaction and commitment, enhancing retention [24,26,31]. Emotionally intelligent nurses form positive relationships with coworkers and supervisors, further strengthening organizational commitment [24,26,28]. This adds to the body of knowledge related to the impact this research has in the United States.

Practical implications

Organizations can enhance their workforce by identifying candidates with higher EI and providing development opportunities for areas of improvement. Human resource professionals can screen for EI during hiring, focusing on emotionally intelligent responses in interviews, which can improve hiring efficiency and save time and money. Candidates with lower EI can still be hired if they show potential for growth in specific areas.

Incorporating EI and teamwork training into the onboarding process is essential. New nurses with lower EI can be paired with those with higher EI for mentoring. This can boost overall morale and enhance hospital performance. Training in key EI dimensions like time management, conflict resolution, motivation, stress management, empathy, and coaching can improve EI for both employees and managers.

Hospital-wide training, including all staff members, can reduce silos and promote cross-profession communication, leading to better job performance and reduced turnover.

Nursing schools should integrate EI components into their curriculum to prepare students for the workplace. Training in positive coping techniques and real-world scenarios during clinical rotations can help. Education on EI should be included in every nursing program, tailored to the specific needs of different patient groups. High-EI nurses can play a critical role in precepting students during clinical rotations, enhancing their EI development. This will strengthen the pipeline of high-EI nurses entering the workforce in addition to fostering a workplace culture that prioritizes emotional awareness, empathy, motivation, and other behaviors associated with high-EI individuals. The behavior of the preceptors sets the tone for sustainability and reinforcement of a high-EI culture.

Implementing these interventions can foster a culture of teamwork, performance, and commitment, improving patient care quality and reducing RN turnover costs, which can be as high as \$67,500 per RN [4]. Management practices that encompass, promote, and encourage emotional intelligence can enhance patient, staff, and organizational well-being.

Limitations and future research

Turnover intention measures a nurse's thoughts and may not fully reflect actual turnover. Even with high turnover intention, it may not accurately predict turnover itself, though it is the best predictor [43]. Nurses in different settings face unique challenges, which this study focused on within a specific sample. This study focused solely on hospital based, or acute care, nurses. Many use their RN license in non-clinical roles, facing different challenges from practicing nurses. Response bias and non-response bias are concerns due to self-reported survey responses. The assumption that respondents answered accurately and honestly could affect the survey's validity. Job performance was self-reported from the perspective of supervisors, not actual performance ratings or assessments. While self-reporting is correlated with supervisor ratings [37], it is a limitation. This study population was limited to one county in Florida, which may limit its generalizability in other regional areas.

Future research could explore the relationship that EI has with other factors affecting healthcare worker well-being and organizational productivity. There is a body of research focused on RNs, however other healthcare professionals are not equally represented in the literature. Future studies can explore EI's impact on providers, therapists,

pharmacists, and other licensed clinical healthcare professionals.

Conclusion

This study aimed to understand the relationship between EI, turnover intention, and job performance among RNs in Pinellas County, FL. A positive predictive relationship was found between EI and job performance, and a negative predictive relationship was found between EI and turnover intention. This is the first study that evaluated how EI impacts turnover intention and job performance specifically in Florida nurses. Registered nurse turnover intention and job performance impact patient care and organizational success. Healthcare organizations would benefit from focusing on EI components in hiring and training programs for RNs. Emotional intelligence should be further developed through ongoing training opportunities, beyond orientation and on-boarding. Employing nurses with high EI can save money, improve patient safety, and enhance care quality. Despite study limitations and the need for future research, this study demonstrates that EI significantly impacts turnover intention and job performance in acute care RNs.

Acknowledgements

Registered Nurses who completed the survey.

Disclosure statement

No potential conflict of interest was reported by the author(s).

Funding

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

Notes on contributors

Sandra S. Weiss (DBA – Saint Leo University) is an Assistant Professor of Instruction in the Muma College of Business at the University of South Florida and serves as faculty for the TGH-USF People Development Institute. Dr. Weiss is a Registered Nurse with certifications in healthcare quality and patient safety.

Russell Clayton (Ph.D. – University of Mississippi) is an Associate Professor of Instruction in the Muma College of Business at the University of South Florida and serves as a Manager of Operations for the TGH-USF People Development Institute.

Laurence Weiss (PharmD – Virginia Commonwealth University) is a Director of Pharmacy with over 25 years of experience in the healthcare industry.

References

- [1] Al Mohajer M. Understanding the gap between nursing workforce in the United States and population needs-a policy brief. *Avicenna J Med.* 2023 Sep 27;13(4):206–214. doi:10.1055/s-0043-1775724. PMID: 38144915; PMCID: PMC10736185.
- [2] Buchan J, Catton H. Recover to rebuild. Investing in the nursing workforce for health system effectiveness. International Council of Nurses; 2023 [cited 2024 July 2]. Available from: https://www.icn.ch/sites/default/files/2023-07/ICN_Recover-to-Rebuild_report_EN.pdf.
- [3] U. S. Bureau of Labor Statistics; Occupational outlook handbook: registered nurses; 2024 April 17 [cited 2024 July 2]. Available from: <https://www.bls.gov/ooh/healthcare/registered-nurses.htm>
- [4] Colosi B. (2024). NSI national health care retention & RN staffing report. NSI Nursing Solutions, Inc; 2024 [cited 2024 July 2]. Available from: https://www.nsinursingsolutions.com/Documents/Library/NSI_National_Health_Care_Retention_Report.pdf.
- [5] Bae SH. Noneconomic and economic impacts of nurse turnover in hospitals: a systematic review. *Int Nurs Rev.* 2022;69(3):392–404. doi:10.1111/inr.12769
- [6] Galanis P, Moisoglou I, Katsiouroumpa A, et al. Moral resilience reduces levels of quiet quitting, job burnout, and turnover intention among nurses: evidence in the post Covid-19 era. *Nurs Rep.* 2024;14(1):254–266. doi:10.3390/nursrep14010020
- [7] Unruh LY, Zhang NJ. Newly licensed registered nurse job turnover and turnover intent. *J Nurses Prof Dev.* 2014;30(5):220–230. doi:10.1097/nnd.0000000000000079
- [8] O'Brien-Pallas L, Griffin P, Shamian J, et al. The impact of nurse turnover on patient, nurse, and system outcomes: a pilot study and focus for a multicenter international study. *Policy Polit Nurs Pract.* 2006;7(3):169–179. doi:10.1177/1527154406291936
- [9] Manoppo VP. Transformational leadership as a factor that decreases turnover intention: a mediation of work stress and organizational citizenship behavior. *TQM J.* 2020;32(6):1395–1412. doi:10.1108/TQM-05-2020-0097
- [10] Raeissi P, Zandian H, Mirzarahimy T, et al. Relationship between communication skills and emotional intelligence among nurses. *Nurs Manag (Harrow).* 2019 Mar 26;26(2):31–35. doi:10.7748/nm.2019.e1820
- [11] Turjuman, F., Alilyyani, B. Emotional intelligence among nurses and its relationship with their performance and work engagement: a cross-sectional study. *J. Nurs Manag.* 2023 Nov 10 [cited 2024 July 2]. doi:10.1155/2023/5543299
- [12] Goleman D. Working with emotional intelligence. London: Bloomsbury; 1998.
- [13] McQueen ACH. Emotional intelligence in nursing work. *J Adv Nurs.* 2004;47(1):101–108. doi:10.1111/j.1365-2648.2004.03069.x
- [14] Al-Hamdan ZM, Alyahia M, Al-Maaitah R, et al. The relationship between emotional intelligence and nurse-nurse collaboration. *J Nurs Scholarsh.* 2021;53(5):615–622. doi:10.1111/jnu.12687
- [15] Rego A, Godinho L, McQueen A, et al. Emotional intelligence and caring behaviour in nursing. *Serv Ind J.* 2010;30(9):1419–1437. doi:10.1080/02642060802621486
- [16] Majeed N, Jamshed S. Nursing turnover intentions: the role of leader emotional intelligence and team

- culture. *J Nurs Manag.* 2021;29(2):229–239. doi:10.1111/jonm.13144
- [17] Orvis KA, Dudley NM, Cortina JM. Conscientiousness and reactions to psychological contract breach: a longitudinal field study: correction to Orvis, Dudley, & Cortina (2008). *J Appl Psychol.* 2010;93(5):976. doi:10.1037/a0020687
 - [18] Takase M. A concept analysis of turnover intention: implications for nursing management. *Collegian.* 2010;17(1):3–12. doi:10.1016/j.colegn.2009.05.001
 - [19] Bothma CFC, Roodt G. The validation of the turnover intention scale. *SA J Hum Resour Manag.* 2013;11(1):a507. doi:10.4102/sajhrm.v11i1.507
 - [20] Hayes LJ, O'Brien-Pallas L, Duffield C, et al. Nurse turnover: a literature review – an update. *Int J Nurs Stud.* 2012;49(7):887–905. doi:10.1016/j.ijnurstu.2011.10.001
 - [21] Carmeli A. The relationship between emotional intelligence and work attitudes, behavior, and outcomes: an examination among senior managers. *J. Man Psych.* 2003 Dec 1;18(8):788–813. doi:10.1108/02683940310511881
 - [22] Codier E, Kamikawa C, Kooker BM, et al. Emotional intelligence, performance, and retention in clinical staff nurses. *Nurs Adm Q.* 2009 Oct–Dec;33(4):310–316. doi:10.1097/NAQ.0b013e3181b9dd5d
 - [23] Al-Hamdan ZM, Muhsen A, Alhamdan M, et al. Emotional intelligence and intent to stay among nurses employed in Jordanian hospitals. *J Nurs Manag.* 2020 Mar;28(2):351–358. doi:10.1111/jonm.12932
 - [24] Trivellas P, Gerogiannis VC, Svarna S. Exploring workplace implications of emotional intelligence (WLEIS) in hospitals: job satisfaction and turnover intentions. *Procedia – Soc Behav Sci.* 2013;73:701–709. doi:10.1016/J.SBSPRO.2013.02.108
 - [25] Galanis P, Katsiroumpa A, Moisoglou I, et al. Emotional intelligence protects nurses against quiet quitting, turnover intention, and job burnout. *AIMS Public Health.* 2024 Apr 25;11(2):601–613. doi:10.3934/publichealth.2024030
 - [26] Akhtar MW, Shabir A, Safdar MS, et al. Impact of emotional intelligence on turnover intentions: the role of organizational commitment and perceive organizational support. *J Account Mark.* 2017 Dec 12;6(4):1–7. doi:10.4172/2168-9601.1000259
 - [27] Al-Hamdan Z, Oweidat IA, Al-Faouri I, et al. Correlating emotional intelligence and job performance among Jordanian hospitals' registered nurses. *Nurs Forum.* 2017 Jan;52(1):12–20. doi:10.1111/nuf.12160. Epub 2016 May 19.
 - [28] Hamza K. The impact of emotional intelligence on job performance at private hospitals: the moderating role of organizational culture. *Probl Perspect Manag.* 2023 Mar 28;21(1):459–470. doi:10.21511/ppm.21(1).2023.39
 - [29] Alonazi WB. The impact of emotional intelligence on job performance during COVID-19 crisis: a cross-sectional analysis. *Psychol Res Behav Manag.* 2020 Sep 22;13:749–757. doi:10.2147/PRBM.S263656
 - [30] Alsufyani A, Aboshaiqah A, Alshehri F, et al. Impact of emotional intelligence on work performance: the mediating role of occupational stress among nurses. *J Nur Sch.* 2022;54:738–749. doi:10.1111/jnu.12790
 - [31] Chauhan R, Kaul V, Maheshwari N. Impact of emotional intelligence on job performance of nurses with the mediating effect of job satisfaction. *Asia Pac J Health Manag.* 2022 Oct 16;17(2):1275–1282. doi:10.24083/apjhm.v17i2.1257.
 - [32] Vahidi M, Namdar Areshtanab H, Arshadi Bostanabad M. The relationship between emotional intelligence and perception of job performance among nurses in north west of Iran. *Scientifica (Cairo).* 2016;2016:9547038. doi:10.1155/2016/9547038. Epub 2016 Jun 28.
 - [33] Population Median Age (Census ACS) [Internet]. Florida Department of Health; 2023 [cited 2024 July 2] Available from: <https://www.flhealthcharts.gov/ChartsDashboards/rdPage.aspx?rdReport=NonVitalIndRateOnly.TenYrsRpt&cid=300>
 - [34] Wong C-S, Law KS. The effects of leader and follower emotional intelligence in performance and attitude: an exploratory study. *Leadersh Q.* 2002;13(3):243–274. doi:10.1016/S1048-9843(02)00099-1
 - [35] Gold A, Hale C. Incorporating emotional intelligence into the classroom to improve student learning outcomes). Paper presented at: 7th International Conference on Teaching, Education & Learning (ICTEL); 2018 June 13–14; Singapore.
 - [36] Bradberry T, Greaves J. Emotional intelligence 2.0. San Diego (CA): TalentSmart; 2009.
 - [37] Schat A, Frone MR. Exposure to psychological aggression at work and job performance: the mediating role of job attitudes and personal health. *Work Stress.* 2011;25(1):23–40. doi:10.1080/02678373.2011.563133
 - [38] Florida Department of Health; Public Data Portal; 2018 [cited 2018]. Available from: <http://www.flhealthsource.gov/data-portal>.
 - [39] AACN: American Association of Colleges of Nursing; Nursing workforce fact sheet; 2024 April [cited 2024 July 2]. Available from: <https://www.aacnnursing.org/news-data/fact-sheets/nursing-workforce-fact-sheet>
 - [40] Trivellas P, Gerogiannis V, Svarna S. Exploring workplace implications of emotional intelligence (WLEIS) in hospitals: job satisfaction and turnover intentions. *Procedia Soc Behav Sci.* 2013;73:701–709. doi:10.1016/j.sbspro.2013.02.108
 - [41] Greenidge D, Devonish D, Alleyne P. The relationship between ability-based emotional intelligence and contextual performance and counterproductive work behaviors: a test of the mediating effects of job satisfaction. *Hum Perform.* 2014;27(3):225–242. doi:10.1080/08959285.2014.913591
 - [42] Aiken LH, Sermeus W, Van den Heede K, et al. Patient safety, satisfaction, and quality of hospital care: cross sectional surveys of nurses and patients in 12 countries in Europe and the United States. *Br Med J.* 2012 Mar 20;344:e1717. doi:10.1136/bmj.e1717
 - [43] Topaz M, Lisby M, Morrison CR, et al. Nurses' perspectives on patient satisfaction and expectations: an international cross-sectional multicenter study with implications for evidence-based practice. *Worldviews Evid Based Nurs.* 2016 Jun;13(3):185–196. doi:10.1111/wvn.12143