



EI+ INSIDER REPORT

MHS

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I hear a lot of questions about the role of emotional intelligence for healthcare providers. Often the topic of EI and physicians gets raised. Everyone seems to have stories about the best and worst physicians they have encountered. The difference usually has very little to do with how smart physicians are in terms of IQ and much more to do with their EQ—that is, their ability to listen, empathize, and explain.

In March 1999, I was interviewed about our work in EI by *The Medical Post*. The article, called, “Do physicians have an emotional handicap?” created quite a stir. I reported that while our sample of physicians had high scores in Stress Management and Reality Testing compared to the average person, they were weaker in intra- and interpersonal skills.

Among a number of follow-up interviews, I did a radio interview on CBC (Canada's national broadcasting system). It was set up as a debate between the Chairperson of Family Practice in a prominent medical school and me. Expecting to be attacked, I was quite surprised when the professor went on about how they accept the brightest candidates and squeeze out their compassion and caring by the time they graduate.

I've talked to several physicians who wanted to follow up on this topic with more controlled research studies. I came across one such study called “The Relationship Between Physician Emotional Intelligence and Patient Satisfaction.” This creative study was carried out by Peggy Wagner, Ginger Moseley, Michael Grant, Jonathan Gore, and Christopher Owens at the Medical College of Georgia. It was published in *Family Medicine*, November–December, 2002.

Thirty physicians (including faculty and residents) were tested with the EQ-i. Patient satisfaction was measured by eight items of an 11-item questionnaire that assessed patients' satisfaction with their individual physicians and overall satisfaction with healthcare. They created a “total satisfaction” score and a “relationship satisfaction” score.

An average of 7.7 patients rated each physician. Overall, the patient satisfaction scores were quite high for the group ranging from 3.69 to 3.94 (using a 4-point Likert-type scale). There were no differences in satisfaction scores for gender, although there was a positive trend for satisfaction with faculty over residents. There were 232 patient subjects included in the study.

There were no differences in EQ-i scores between faculty and residents. However, female physicians scored higher than males in all scores, but only significantly higher in Stress Tolerance. This is quite interesting, because in the general population women tend to score lower than men on this scale.

There were no significant correlations between the satisfaction scores and EQ-i scores. This is not unusual, due to the limited range of the scores. Comparisons were then made between physicians of patients who were 100% satisfied and those who were less than 100% satisfied (138 out of 232 rated their physicians as excellent—4 points—on all 8 satisfaction items).

The only significant finding on the subscales was that physicians with higher ratings scored significantly higher on the Happiness subscale. Scores were almost significant on Social Responsibility and Optimism. Interestingly, Social Responsibility was found to be significant in the Center for Creative Leadership study of successful leaders and in our studies of successful CEOs.

The authors suggest helping medical students learn the importance of personal happiness and life satisfaction as a starting point for EI coaching and intervention during training.

Health Providers Network

As mentioned before, I know there are many healthcare professionals who are interested in EI applications in selection, training, and development. If this is an interest of yours, contact Diana Durek (diana.durek@mhs.com) at MHS to be part of our EI Healthcare Providers Network. There may be some opportunities for larger scale research in this area.

New Product Releases

Using postsecondary school norms, the **EQ-i: Short Post Secondary** provides a tool for predicting student success at a postsecondary level. In particular, the EQ-i:S Post Secondary compares a student's performance to that of other postsecondary students on the EQ-i's five composite scales (Intrapersonal, Interpersonal, Stress Management, Adaptability, and General Mood).

The **MSCEIT Resource Report** is a comprehensive feedback tool that provides results in an easy-to-understand format that is ideally suited for sharing with respondents.

EQ-i Group and Comparison Reports are now available online through Scoring Organizer and through our mail-in/fax-in scoring service. Now you can generate these reports any time from anywhere in the world.

Coming Soon

Harnessing your organization's emotional intelligence can make your organization significantly more productive. The **Benchmark for Organizational Emotional Intelligence (BOEI)**—a measure of organizational emotional intelligence—is nearing release. Stay tuned for more information about this exciting new breakthrough product.

Visit emotionalintelligencemhs.com for more EI news and resources. And keep those emails coming in and I'll try to cover topics of interest to you.

All the best,

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