



Nursing preceptorship and emotional intelligence in residency programs: an action research study^a

Preceptoria de enfermagem e inteligência emocional em programas de residência: pesquisa-ação

Preceptoría de enfermería e inteligencia emocional en programas de residencia: una investigación-acción

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ABSTRACT

Objective: to describe the implementation of an intervention with nurse preceptors of residency programs aimed at recognizing concepts and applying emotional intelligence in managing conflicts among residents, preceptors, and healthcare teams. **Method:** a qualitative action-research study conducted with nurse preceptors of residency programs in a hospital in southern Brazil. The workshops took place in March 2023. Data were analyzed using thematic analysis. **Results:** participants, to better align with preceptorship practice, reinterpreted the five components of emotional intelligence. According to preceptors' perspectives, emotional intelligence was found to be applicable in conflict management through key strategies such as empathy, effective communication, and self-control. The assessment of the workshops indicated high relevance and suggested the creation of new opportunities to further explore the topic. **Final considerations and implications for practice:** addressing emotional intelligence within preceptorship has the potential to incorporate diverse perspectives and experiences into preceptors' work processes, foster the development of socio-emotional skills in addition to clinical competencies, and enhance the quality of the teaching-learning process.

Keywords: Education, Nursing, Graduate; Emotional Intelligence; Interpersonal Relations; Nursing; Preceptorship.

RESUMO

Objetivo: descrever a implementação de intervenção direcionada aos preceptores de enfermagem em programas de residência, com foco no reconhecimento de conceitos e na aplicação da inteligência emocional, como estratégia para o gerenciamento de conflitos nas interações entre residentes, preceptores e equipes de saúde. **Método:** estudo qualitativo, do tipo pesquisa-ação, realizado com preceptores de programas de residência em hospital localizado no sul do Brasil. As oficinas foram realizadas no mês de março de 2023. Os dados foram analisados por meio da análise temática. **Resultados:** os cinco conceitos de inteligência emocional foram ressignificados pelos participantes para melhor alinhamento ao exercício da preceptoria. A aplicabilidade da inteligência emocional na gestão de conflitos, sob a perspectiva de preceptores, destacou a empatia, a comunicação efetiva e o autocontrole como estratégias fundamentais. A avaliação das oficinas apontou alta relevância, indicando sugestões para a criação de novos espaços que possibilitem o aprofundamento da temática. **Considerações finais e implicações para a prática:** abordar a inteligência emocional no contexto da preceptoria tem o potencial de incorporar múltiplas perspectivas e experiências aos processos de trabalho do preceptor, promovendo o desenvolvimento de competências e habilidades socioemocionais, além das competências assistenciais, com vistas à qualificação do processo de ensino-aprendizagem.

Palavras-chave: Educação de Pós-Graduação em Enfermagem; Enfermagem; Inteligência Emocional; Preceptoría; Relações Interpessoais.

RESUMEN

Objetivo: describir la realización de una intervención con enfermeros preceptores de residencias, orientada al reconocimiento de conceptos y de la aplicabilidad de la inteligencia emocional, en el manejo de conflictos entre residente, preceptor y equipo de salud. **Método:** estudio cualitativo, del tipo investigación-acción, realizado con enfermeros preceptores de programas de residencia en un hospital del sur de Brasil. Los talleres se llevaron a cabo en marzo de 2023. Los datos fueron analizados mediante análisis temático. **Resultados:** los cinco conceptos de inteligencia emocional fueron ressignificados por los participantes para una mejor alineación con el ejercicio de la preceptoría. La aplicabilidad de la inteligencia emocional en la gestión de conflictos, desde la perspectiva de los preceptores, señaló a la empatía, la comunicación efectiva y el autocontrol como estrategias fundamentales. La evaluación de los talleres evidenció una alta relevancia y nuevas sugerencias de espacios similares para profundizar en la temática. **Consideraciones finales e implicaciones para la práctica:** abordar el tema de la inteligencia emocional en el ejercicio de la preceptoría tiene el potencial de incorporar diversas perspectivas y experiencias en los procesos de trabajo del preceptor, desarrollar competencias y habilidades socioemocionales, además de las competencias asistenciales, con el fin de cualificar el proceso de enseñanza-aprendizaje.

Palabras clave: Educación de Posgrado en Enfermería; Enfermería; Inteligencia Emocional; Preceptoría; Relaciones Interpersonales.

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INTRODUCTION

Health residency programs are *lato sensu* graduate programs. The first ones in Brazil were in the medical field, in 1945, and *Escola de Saúde Pública do Rio Grande do Sul*, in 1978, promoted the first multidisciplinary residency program. Throughout their existence, residency programs have undergone several modifications and qualifications, keeping pace with the historical context of Brazilian public health, and strengthening, especially, with the creation of the Brazilian Health System (In Portuguese, *Sistema Único de Saúde* - SUS). Residency programs are considered to be fully grounded in the principles of interdisciplinarity, continuing education, and practical on-the-job training.¹

To further enhance educational processes within graduate nursing programs, the Ministry of Health created the Brazilian National Plan for Strengthening Health Residencies. The plan aims to value residents, teaching, and healthcare team, and residency program managers through improvement measures, continuing education opportunities, specializations, incentives, and support for participating institutions, especially in priority regions of SUS.²

In terms of work settings, nurses stand out in the role of preceptors in the healthcare services of proposing institutions during their activities. These professionals facilitate the learning process for residents, other professionals who advance in the development of knowledge and skills directly in the workplace. In addition to providing care, preceptors supervise teams, and their decision-making requires leadership skills, empathy, communication, observation, and critical thinking. Effectively addressing all aspects of conflicts that may arise during preceptorship demonstrates the ability to manage them.³

Preceptors work to promote the integration of theory and practice through mobilizing and sensitive actions; for this, spaces for continuing education become essential for improving training and the work process.^{4,5} In multidisciplinary residency programs, this approach presupposes effectively collaborative interprofessional skills and sensitivity to understanding the different scopes of the professions.

Residency programs have a pedagogical plan or project (PP) to be fulfilled throughout the training period. These documents outline the skills and competencies to be developed during the residency program, as well as the expected profile of graduates. They are monitored, assessed, and updated, when necessary, by the Structuring Teaching and Assistance Nucleus (In Portuguese, *Núcleo Docente Assistencial Estruturante* - NDAE), composed of the program coordinator, tutors, preceptors, and residents. Predominantly, it is observed that a PP tends to focus on the development of clinical and caregiving skills, when compared to managerial skills and/or soft skills.⁶

Emotional intelligence (EI) emerged as a concept in the 1990s, proposed by Salovey and Mayer (1990) and Goleman (1995). These concepts are supported by pillars that include self-awareness and emotional understanding to proactively regulate actions, serving as a reference for developing a competency

model,⁷ as proposed by Goleman, which encompasses five elements, namely self-awareness, self-regulation, motivation, empathy, and social skills,⁸ translating into the ability to manage one's own emotions and understand the emotions of others.

EI is directly related to the development of soft skills, understood as a set of abilities that involve socio-affective, behavioral, emotional, and moral dimensions. These competencies influence different contexts of society and development, and stimulating these skills favors the regulation of behavior in daily situations, whether affective, family, professional, or school-related.^{9,10}

In the context of health, EI plays an essential role in promoting greater adaptability, efficiency in problem-solving, improved professional performance, and reduced levels of stress, physical and mental exhaustion.¹¹ In the field of nursing, competencies related to decision-making, conflict management, emotional self-control in stressful situations, and empathy in professional interactions are evident. Considering that EI develops gradually over time, its expansion can be enhanced through systematized personal and professional development programs aimed at nurses.¹²

Another concept linked to this perspective is Education 5.0, associated with the concept of Society 5.0, which emphasizes the use of digital technologies, extending to the development of soft skills. Learning should be student-centered, recognizing students as whole individuals with unique characteristics inseparable from the educational process. This process unequivocally depends on facilitating professionals' preparedness, from educators at the basic education level to preceptors in residential programs, which are professionals working in education at any level of training.¹³

With the development of EI, professionals can deal with the challenges of their work processes in a more positive and balanced way, improve clinical decision-making, job satisfaction and high professional performance, and conflict management.¹⁴ Soft skills are necessary in professional training, thus being target objects for further research in nursing.

In nursing work, EI influences engagement and quality of care; therefore, it can be understood as a protective skill for workers' health and for patients' satisfaction.¹⁵ The development of EI especially implies the protection and promotion of workers' mental health, strengthening the profession at a macro level. The challenges of workforce size must be overcome with better working conditions for professionals. In this process, training spaces strategically represent the best opportunities to learn about, explore, and develop EI.¹⁵⁻¹⁸

In this context, it is fundamental to build a teaching-learning environment where it is possible to apply and integrate different methodologies and approaches that go beyond theoretical-scientific training. Therefore, this study aimed to describe the implementation of an intervention aimed at recognizing concepts and applying EI in managing conflicts among residents, preceptors, and healthcare teams.

METHOD

This is an action research study, whose objective focuses specifically on the action and assessment phases.¹⁹ This study was developed in a public hospital located in southern Brazil, where four medical residency programs, one multidisciplinary residency program, and one uniprofessional program are offered. The potential sample consisted of 15 preceptor nurses registered in a preceptor registration database. Of these 15, three professionals were excluded because they were on leave from their activities during the data collection period: between January and March 2023. The remaining preceptors were invited, personally and by email, by the principal researcher, who also distributed promotional posters throughout the hospital. Finally, nine preceptor nurses participated in the first phase of the action research, the exploratory phase, and among other issues, suggested exploring the theme “conflict management based on the concepts of EI” in workshops.

In the action and assessment phase, two workshops were held in March 2023. Both had the same development proposal, but they took place on different dates and times to accommodate different availability. All participants from the exploratory phase were invited, but there was a scheduling conflict. The workshops were conducted by the principal researcher with the collaboration of one of the authors, who also has experience in the subject matter. The workshops lasted, on average, one hour. They took place in a classroom with a physical structure that allowed for interactive group activities. The materials used were chairs, beanbag chairs, flipcharts, colored sticky notes, and pens. To make the most of the experience and encourage greater interaction among participants, the workshop was divided into three parts: a brief presentation of the five concepts of EI according to Daniel Goleman⁷ (theoretical framework); collective construction of the concepts of EI applied to preceptorship, in which each participant expressed their contribution, based on their perspectives and experiences; presentation and discussion of examples of conflicts witnessed and managed between residents and the healthcare team, or between residents and preceptors, with articulation between these and the concepts, seeking to understand the role of EI in managing these situations.

The workshops were audio-recorded and transcribed in full. Data were analyzed using thematic analysis.²⁰ From the collective constructions of the concepts of EI, the manifestations of their applications in preceptorship, and examples of conflicts, two categories emerged.

The activity was assessed the day after workshops were held. Each participant received an online questionnaire to answer about: the relevance of the activity to IE; the methodologies used; the workshop's organization and duration; the workshop's positive and negative aspects; and suggestions for new activities for preceptorship. Data were subjected to descriptive analysis and presented through relative frequency distribution (%).

This research followed Resolution 466/2012 recommendations. To preserve participant confidentiality, alphanumeric codes were

used, composed of the letter “P”, representing “Preceptor”, followed by a random sequential number corresponding to the total number of participants (P1 to P8). It received approval from two Research Ethics Committees: the proposing institution, under Opinion 5,671,265; and the co-participating institution, under Opinion 5,803,197.

RESULTS

Based on the analysis of the collected material, two thematic categories emerged: 1) Reflections and adaptation of the five concepts of emotional intelligence for preceptorship practice; and 2) Applicability of emotional intelligence in conflict management from preceptors' perspective. Finally, assessment data from the workshops are also presented.

Eight preceptors participated in the workshops, 87% of whom were women aged between 26 and 43 years. All participants in the sample had graduate-level training, as this is a mandatory requirement for the role of preceptor. On average, they work as preceptors for three years, and 55.5% of participants reported having undergone some specific training in preceptorship.

The first category was created through collective construction, in workshops, of the concepts of EI, according to Daniel Goleman (self-awareness, self-control, motivation, empathy, and social skills), applied to preceptorship, and Figure 1 was developed for a better understanding of the analysis:

Each preceptor expressed their individual perceptions on the five concepts presented, along with comments and an exchange of experiences and insights in graduate nursing education regarding each concept. Self-awareness relates to the application of learned and acquired EI in experiences based on errors and failures. Self-awareness is important in identifying strengths and weaknesses, and emotional boundaries in relationships.

[...] I think that self-knowledge involves all these situations. That we have experience with X thing and it often derives from error, because I think you define yourself by learning [...] (P1)

[...] you know yourself so you can deal with other situations. In my view, it's about knowing what I'm good at, what I'm bad at, and what I'm not, learning. Recognizing that, knowing the limits that your “self” can withstand [...] (P5)

Regarding self-control during preceptorship, greater participation was observed, especially in managing emotions during emergencies, controlling tone of voice, supervising procedures, and managing stress.

The voice externalizes your feelings, how you are at the moment. To maintain the intonation and volume of your voice, I think that demonstrates, regardless of the position

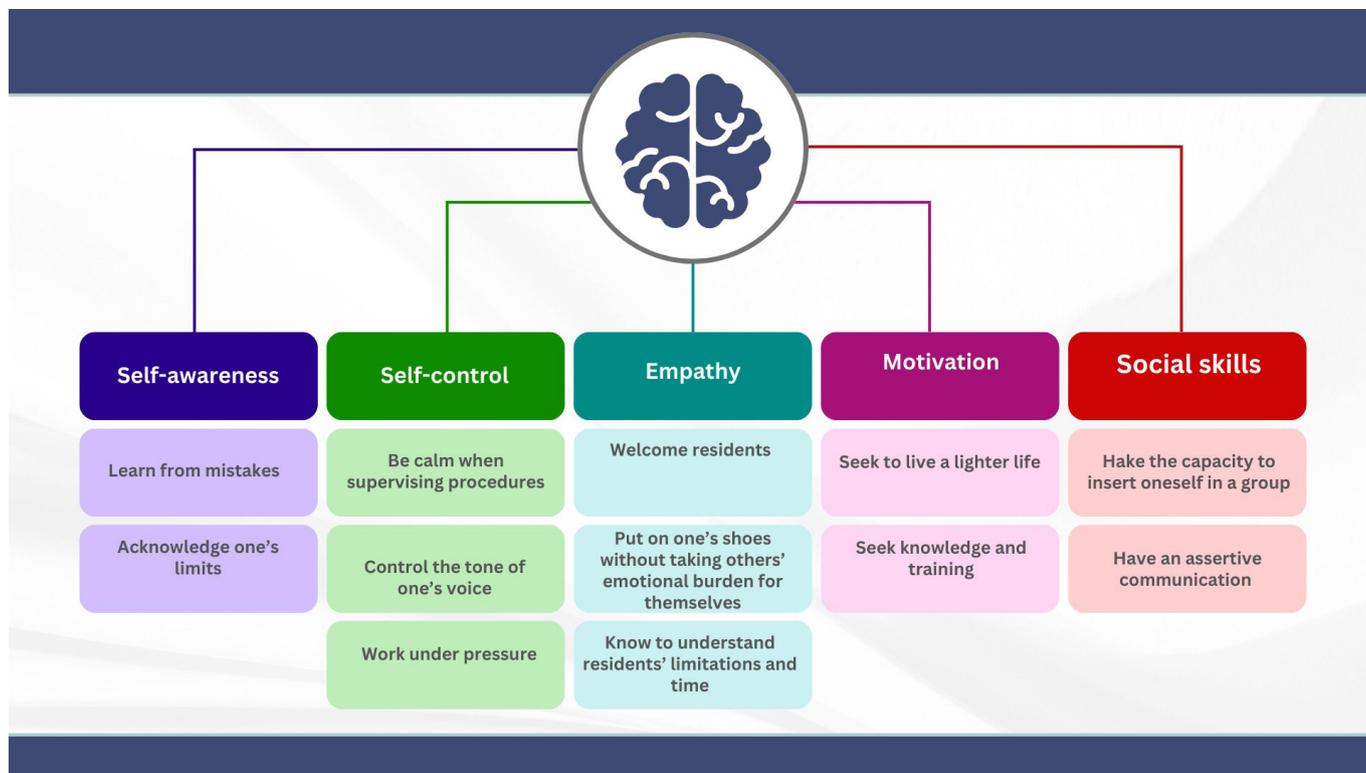


Figure 1. Representative figure from the category “Reflections and adaptation of the five concepts of emotional intelligence for preceptorship practice” obtained in the analysis.

you are in, favorable or unfavorable, it demonstrates control of the situation. (P3)

It's in a situation, for example, of emergency, you don't despair, you remain calm, right, how am I going to deal with students (resident). (P2)

Empathy was mentioned, especially in welcoming residents during the first months of residency, in order to understand the individual needs of each resident, particularly those entering immediately after graduation, and also in acting with empathy in conflict management.

[...] so, we need to use a lot of social skills, especially communication and empathy, to manage conflicts. (P6)

[...] when I have to mediate the conflict, it is essential that we have empathy and put ourselves in the place of both the resident and the person who is having the conflict with them, or, in this case, you. (P8)

Motivation was related to preceptors' own performance, aiming for a more balanced and higher quality of life, improved

stress management, and motivation to seek better professional positions, seeking new training and professional qualifications.

Being able to communicate, make oneself clearly understood, achieve goals in groups, and navigate diverse environments in a pleasant manner. (P4)

Finally, social skills were conceptualized based on reflection on interpersonal relationships, interaction between residents and other team members, cooperativeness, and effective communication.

So, I think that, for residents, what they develop most are social skills, because they rotate through different fields. (P7)

The second category corresponds to the application of the five concepts aligned with the conflict experiences brought by preceptors. For better understanding, Figure 2 outlines the applications of EI in the conflicts presented.

Each group chose a conflict to apply the concepts of EI. The first conflict was an interpersonal relationship between a resident and a nursing technician regarding care division. Preceptors listed the following conflict management strategies: social skills associated with assertive communication; empathy

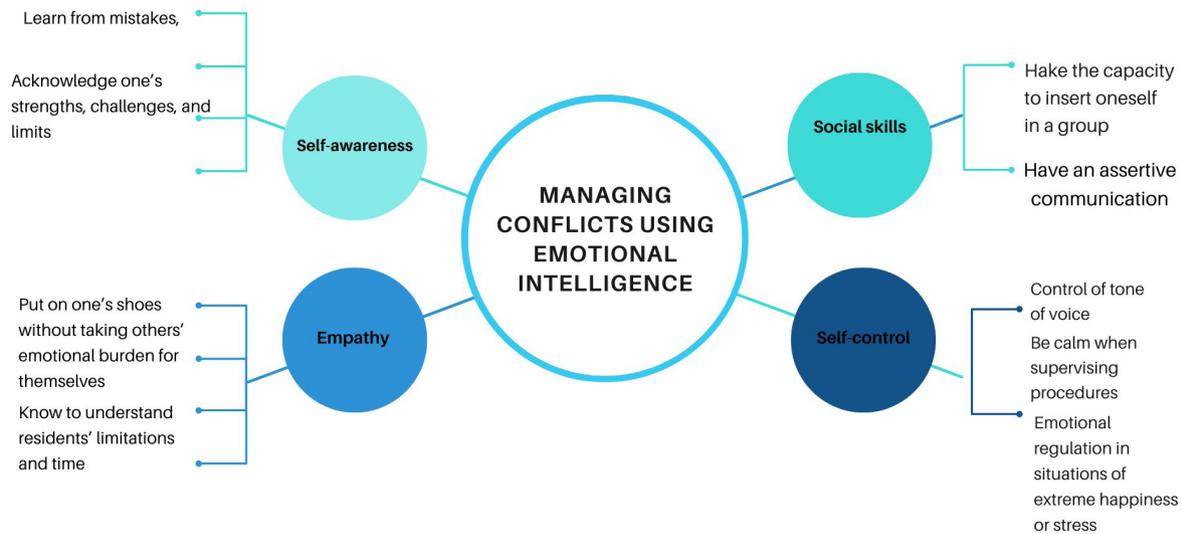


Figure 2. Diagram representing the application of emotional intelligence in conflicts brought by preceptors.

as a reflective exercise of putting oneself in others' shoes, understanding their limitations and their time in relationships with the team; self-control and self-awareness to avoid changing one's tone of voice, remaining calm, perceiving, welcoming, and controlling emotions.

The second conflict was between preceptors and residents, and this situation occurred in the first month of residency, during the understanding and definition of the roles of each of those involved, as well as the expected competencies of each party. For this conflict, the application of the concepts of empathy was suggested, again to exercise understanding of the different roles and commitments taken over, in addition to the concepts of self-knowledge and self-control for recognizing the potential and challenges that each actor in this process possesses.

Finally, after participating in the workshops, the proposal was assessed. Everyone responded to the assessment, and could answer the questions using "excellent", "good", "fair", and "unsatisfactory". Regarding relevance, responses could be given using "very relevant", "relevant", "somewhat relevant", and "not relevant at all". Concerning the action's relevance, 75% rated addressing the topic of EI as "very relevant". Regarding the workshop's organization and the methodology used, 87.5% responded that they were "excellent". As positive aspects, preceptors listed the interaction with other preceptors, the exchange of experiences, and the importance of knowing the possibilities of applying EI in daily life. No negative aspects were recorded for the activity. Participants suggested new activities of this nature to address the topic. Suggestions for more group workshops and discussion circles among preceptors, as well as courses on active learning methodologies to improve the teaching-learning process, were highlighted.

DISCUSSION

EI is a topic whose visibility has increased considerably in recent years, especially in relation to its impact on mental health, and has interested studies in the health field, although still incipient, and in work and training processes. In nursing, some studies have compared the EI of students from different countries, such as Australia and Slovenia, with students from other courses, and have shown that its level is higher in nursing students, and can be improved throughout the training process.^{21,22} In Brazil, a study analyzed nursing students' EI during the COVID-19 pandemic, finding that the scores were lower in the final semesters of their undergraduate studies. This can be seen as a warning sign, since graduates in subsequent years of training during a pandemic are expected to have better-developed soft skills. Therefore, the importance of this approach in the training process is reinforced, leading to improved professional performance through critical reflection and better well-being among healthcare workers and patients.²³

In the context of graduate nursing education, a study in Argentina investigated EI in 156 medical residents in general surgery, establishing a positive relationship between the indices and the well-being, communication skills, and interpersonal abilities dimensions.²⁴ Studies investigating the application of concepts of EI in the context of preceptorship in nursing residency programs are still scarce. However, regarding the concept of empathy, evidenced in the results of this study, research conducted with 101 preceptors from a medical course reinforced that preceptors' empathy positively influences the development of students' empathy, and this competence should be stimulated and developed in training processes.²⁵

Ineffective conflict management can negatively impact teamwork and, consequently, the quality of patient care. Conflicts

are inevitable. Two relatively common examples were mentioned by preceptors: both are relational, involving residents, preceptors, and the healthcare team, and are related to the roles and responsibilities of each. In any environment where there is interaction between people, whether in work, care, or teaching-learning settings, in healthcare or other areas, relationships generate conflicts when there is a misalignment between experiences and expectations.²⁶

When conflicts are not managed and properly resolved, they can disrupt routines, compromise user care and safety, weaken teamwork, decrease worker motivation, and significantly affect the emotional health of everyone involved and the teaching process.^{27,28} Conflicts can be managed through four strategies: domination, where the stronger side dictates a solution to its liking; bargaining, where both parties concede something to reach a solution; accommodation, where problems are covered up without resolution; and integrative solution, which seeks to meet the demands of both parties by exploring alternative solutions jointly.²⁹ In this context, it becomes essential in nursing to develop new management approaches that encompass conflict resolution with appropriate tools, in order to foster more dialogical and interactive practices, in which conflicts are not ignored, but addressed constructively.³⁰

The conflicts exemplified in the workshops and the strategies used in their management were proposed by preceptors and well-received by residents. By reflecting on them within the EI framework, they perceived the application of the concepts to their own attitudes, recognizing the importance of developing these skills. Given the constant changes and transformations in academic training and healthcare work environments, professional training processes at the undergraduate or graduate level in nursing are expected to promote the development of managerial skills aligned with soft skills. These skills are fundamental for professionals to act effectively beyond their caregiving role, contributing to better execution of their activities in service, care, and conflict resolution management.³⁰ A study conducted in Bahia, Brazil, with 36 nursing professors regarding leadership education at the undergraduate level, highlighted the potential of having a specific curricular component in management, as well as the guideline of working on leadership in a cross-curricular manner throughout the entire training.³¹

Thus, several aspects related to EI are listed as leadership skills, such as self-control, effective communication, social skills, and intrinsic motivation. Goleman explores the importance of emotional skills for personal and professional success, including leadership. Leaders with high EI are more effective at inspiring and motivating their teams, as well as building strong relationships, handling conflicts, and making decisions based on a balance between emotional and rational considerations.³² Improving these skills allows for a more proactive and collaborative approach to conflict resolution, ensuring the effectiveness and efficiency of nursing practices. It contributes to a more focused preceptorship role and, consequently, also reflects in improved patient care and attention. Another study also pointed to the improvement of the team's EI as a relevant strategy for conflict management.³³

Effective communication is part of the social skills that make up EI. It is a powerful strategy for avoiding and/or resolving conflicts. Promoting dialogue coupled with empathy can be considered a valuable strategy in relational processes.³³ Effective communication avoids conflicts because it promotes mutual understanding, reduces misunderstandings, encourages respect and empathy, builds trust, and favors the search for collaborative solutions.³⁴

In relation to the assessment of the proposed study, which characterized the third phase of the analysis, the preceptors recognized the possibility of applying strategies linked to the concepts of EI to the conflicts presented, according to their perceptions and experiences within the subject matter. It is believed that this was a relevant study, according to participants' assessment, due to its high potential for application, and they indicated that new actions and training should be developed, such as courses on active learning methodologies. This finding aligns with another study, in which professors highlighted the importance of breaking away from the professor-centered, lecture-based teaching model and promoting active and participatory teaching models that encourage critical and reflective thinking and student leading role in the teaching-learning process.³¹

Active learning methodologies can enhance these managerial skills and provide autonomy for residents, potentially involving different strategies such as realistic simulations, workshops, case studies, and interactive activities. Another study conducted with preceptors investigated some practices considered successful, highlighting the use of active learning methodologies as a potential enhancer for building interprofessional teaching.³⁵

To systematically integrate EI into residency programs, curricula must include concepts embedded in robust cross-curricular themes. In lesson plans and educational practices, learning objectives and assessments embody the curriculum. Also, with the aim of moving forward, resources and program management presuppose investments in preceptor training. In conducting this research, participants suggested new meetings and discussion groups among peers in order to share and exchange experiences. Preceptorship promotion, based on continuing education initiatives, strengthens collaborative learning, encouraging the tackling of daily challenges in each program's context.¹

The findings of this study reflected, in practice, the possibility of applying the concepts of EI to conflict management in graduate nursing education. For the development of essential competencies in conflict management, it is crucial to offer continuing education spaces that integrate content related to EI. These are potential strategies to be explored, with teams of preceptors, residents, and other staff, in a co-participatory and continuous manner.

FINAL CONSIDERATIONS AND IMPLICATIONS FOR PRACTICE

The study achieved its objective by implementing an intervention aimed at nursing preceptors in residency programs, promoting the recognition and application of EI as a strategy for managing conflicts in the relationships between residents, preceptors, and

healthcare teams. The action fostered the collective construction of concepts of EI and its contextualization in the daily routine of preceptorship, enabling participants to recognize and utilize its principles, especially empathy, self-control, effective communication, and social skills.

There was interest and engagement from participants, which reinforces the relevance of training initiatives aimed at developing non-technical skills and strengthening the relational dimension of care and preceptorship. This theme can be integrated into the pedagogical processes of residency programs as a tool for improving teaching and learning practices and enhancing preceptors' work.

The study is limited by the fact that only two workshops with the same approach were conducted in the action-research process, the participation of approximately half of the preceptors, and the setting being confined to a single hospital. Further studies and interventions within the thematic universe of socio-emotional competencies, based on health residency programs' NDAE, are suggested as areas for further exploration and in-depth research on this topic.

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DATA AVAILABILITY RESEARCH

The underlying content of the research text is contained in the article.

CONFLICT OF INTEREST

No conflict of interest.

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