RESEARCH PAPER

A Descriptive Correlational Study To Assess The Relationship Between Emotional Intelligence And Clinical Decision-Making Skills Among B.Sc. Nursing 3rd Year And Post Basic B.Sc. Nursing 1st Year Students At SGT University, Gurugram

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ABSTRACT

Emotional intelligence is an important professional trait in the nursing profession as it allows for self-awareness, emotion control, empathy, communication, and sound judgment in clinical situations. The present study was conducted to investigate the association between emotional intelligence and clinical decision making skills among B.Sc. Nursing 3rd Year and Post Basic B.Sc. Nursing 1st Year students of SGT University, Gurugram, Haryana. A quantitative descriptive correlational design was used and a total of 108 students were selected by using convenience sampling. Data was collected by a self-structured questionnaire via Google Forms which included a socio-demographic data, Emotional Intelligence Likert Scale and Clinical Decision-Making Likert Scale. Results showed that 63 (58.3%) participants had moderate emotional intelligence, 44 (40.7%) had strong emotional intelligence and 1 (0.9%) had poor emotional intelligence. 54 (50.0%) students had good skills, 52 (48.1%) had moderate skills and 2 (1.9%) had low skills for clinical decision making. The average score of emotional intelligence was 29.74 ± 3.44 and the average score of clinical decision making was 38.38 ± 5.85. The statistical analysis showed a substantial moderate positive association between emotional intelligence and clinical decision making skills ($r = 0.513$, $p < 0.001$). No significant difference between the two groups was identified for each measure. These data indicate that emotional intelligence is favorably related to clinical decision making among nursing students.

Keywords: Emotional intelligence, Clinical decision-making, Nursing students, Descriptive correlational study, SGT University.

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Conflict of interest: None.

Introduction:

Nursing is not just about knowing how to do things and following protocols; In clinical practice, nurses are expected to be keen observers, critical thinkers, effective communicators, good prioritizers, and compassionate responders to patients and families. These pressures are there from the time nursing students start their clinical training, where they are exposed to emotionally difficult situations. Emotional intelligence is vital at this level because it provides students with the ability to perceive and control emotion, cope with stress, and develop sensible responses to clinical situations. The importance of developing clinical decision making is also seen in the identification of cues, interpretation of information, selection of appropriate actions and evaluation of outcomes. Recent nursing literature has demonstrated that emotional intelligence is a personal characteristic, as well as a professional ability associated with clinical performance and decision making. The present study was conducted among B.Sc. Nursing 3rd Year and Post Basic B.Sc. Nursing 1st Year students of SGT University, Gurugram to study the correlation between these two variables in a student population who is already gaining clinical exposure but is still in the initial phase of professional development.

Objectives of the Study:

1. To assess the level of emotional intelligence among B.Sc. Nursing 3rd Year and Post Basic B.Sc. Nursing 1st Year students.
2. To assess the level of clinical decision-making skills among the same group.
3. To determine the correlation between emotional intelligence scores and clinical decision-making skill scores.
4. To compare the levels of emotional intelligence and clinical decision-making skills between the two groups.

5. To find the association between these levels and selected socio-demographic variables.

Methodology:

A quantitative descriptive correlational research design was adopted for the study. The study was conducted in Faculty of Nursing, SGT University, Gurugram, Haryana. The accessible population consists of B.Sc. Nursing 3rd Year and Post Basic B.Sc. Nursing 1st Year students who are available at the time of data collection. Convenience sampling was used to pick a total of 108 pupils. Google Forms was used for data collection with a self-structured questionnaire (3 sections) for data collection, which included: socio-demographic data, Emotional Intelligence Likert Scale, and Clinical Decision-Making Likert Scale. The tool was content validated by 7 internal faculty experts and was pilot tested among 10 students on April 13, 2026 to check feasibility and clarity. Last data gathering date is 30 April 2026 For analysis, descriptive statistics, Pearson correlation coefficient, chi-square test and independent t-test were applied.

Results:

Socio-demographic characteristics

The study involved 108 students. Most of the participants were female (60.2%) and the majority were B.Sc. Nursing 3rd Year students (63.0%). The majority of the pupils were from metropolitan regions (76.9%), nuclear households (55.6%) and had English as the medium of instruction (75.9%). 51.9% had first division in previous academic performance and 72.2% had less than 1 year of clinical experience. Most respondents have participated in a session on emotional intelligence/leadership (83.3%) and training on clinical decision-making/critical thinking (75.9%).

Table 1: Frequency and Percentage Distribution of Socio-demographic Variables (N = 108)

S. No.	Variable	Category	Frequency (f)	Percentage (%)
1	Gender	Female	65	60.2
		Male	43	39.8
2	Course	B.Sc Nursing 3rd Year	68	63.0
		Post Basic B.Sc Nursing 1st Year	40	37.0
3	Area of Residence	Urban	83	76.9
		Rural	25	23.1
4	Type of Family	Nuclear	60	55.6
		Joint	48	44.4
5	Medium of Instruction	English	82	75.9
		Hindi/Regional	26	24.1
6	Previous Academic Performance	First Division (60–75%)	56	51.9
		Distinction (>75%)	32	29.6
		Second Division (50–59%)	20	18.5
7	Previous Clinical Experience	Less than 1 year	78	72.2
		1–3 years	28	25.9
		More than 3 years	2	1.9
8	Workshop on Emotional Intelligence/ Leadership Attended	Yes	90	83.3
		No	18	16.7
9	Training on Clinical Decision-Making/Critical Thinking	Yes	82	75.9
		No	26	24.1

Level of emotional intelligence and clinical decision-making

Most students had moderate emotional intelligence (58.3%), followed by good emotional intelligence (40.7%). Only 0.9% had poor emotional intelligence. For clinical decision-making, half of the students had good skills (50.0%), 48.1% had moderate skills, and 1.9% had poor skills.

Table 2: Distribution of Emotional Intelligence and Clinical Decision-Making Scores (N = 108)

Level	Score Range	Frequency (f)	Percentage (%)
Emotional Intelligence			
Poor	8–20	1	0.9
Moderate	21–30	63	58.3
Good	31–40	44	40.7
Total		108	100.0
Clinical Decision-Making			
Poor	10–25	2	1.9
Moderate	26–37	52	48.1
Good	38–50	54	50.0

Total		108	100.0

Descriptive statistics

The mean emotional intelligence score was 29.74 ± 3.44, with a median of 29.0 and range of 19–40. The mean clinical decision-making score was 38.38 ± 5.85, with a median of 37.5 and range of 15–50. This indicates that the students scored relatively higher in clinical decision-making than in emotional intelligence.

Table 3: Descriptive Statistics of Total Scores (N = 108)

Variable	Mean	Median	Standard Deviation	Minimum	Maximum
Emotional Intelligence Score (out of 40)	29.74	29.0	3.44	19	40
Clinical Decision-Making Score (out of 50)	38.38	37.5	5.85	15	50

Relationship between emotional intelligence and clinical decision-making

A statistically significant moderate positive correlation was found between emotional intelligence and clinical decision-making skills ($r = 0.513$, $p < 0.001$). This indicates that as emotional intelligence increased, clinical decision-making skills also tended to increase.

Table 4: Correlation Between Emotional Intelligence and Clinical Decision-Making Scores (N = 108)

Variables	Pearson's r	p-value	Interpretation
Emotional Intelligence and Clinical Decision-Making	0.513	<0.001	Significant moderate positive correlation

Comparison between the two groups

There was no statistically significant difference between B.Sc. Nursing 3rd Year and Post Basic B.Sc. Nursing 1st Year students in emotional intelligence or clinical decision-making skills. The mean emotional intelligence scores were 29.68 ± 2.46 and 29.85 ± 4.70, respectively. The mean clinical decision-making scores were 38.78 ± 4.41 and 37.70 ± 7.73, respectively. The independent t-test showed no significant difference for emotional intelligence ($t = -0.22$, $p = 0.829$) or clinical decision-making ($t = 0.81$, $p = 0.422$).

Association with selected socio-demographic variables

Emotional intelligence was substantially linked with attendance to seminars on emotional intelligence/leadership ($\chi 2 = 6.15$, $p = 0.046$) and training on clinical decision-making/critical thinking ($\chi 2 = 9.78$, $p = 0.008$). Gender, course, location of residence, type of family, medium of instruction, past academic performance and previous clinical experience did not show significant association.

There was a substantial association between clinical decision making and location of residency ($\chi^2 = 22.97$, $p < 0.001$) and medium of instruction ($\chi^2 = 13.07$, $p = 0.001$). There was no significant association with gender, course, kind of family, past academic performance, previous clinical experience, participation to workshops or training on emotional intelligence/critical thinking.

Discussion:

The results of this study demonstrated that the nursing students had moderate to good emotional intelligence and clinical decision making skills. The positive and significant association between emotional intelligence and clinical decision making showed that students with greater abilities to perceive, control and use emotions also are more competent in making sound clinical decisions. This lends credence to the conceptual idea put forward in the study that emotional intelligence has implications for clinical judgment, communication, and decision-making. The literature analyzed in the study also confirmed this pattern because past studies revealed beneficial connections between emotional intelligence and clinical competence, critical thinking and professional decision-making among nursing students and nurses.

The absence of significant difference between the two groups of students indicates that B.Sc. Nursing 3rd Year and Post Basic B.Sc. Nursing 1st Year students were equivalent in emotional intelligence and clinical decision-making. The strong correlations between workshop attendance and training suggest that formal educational exposure might promote emotional development. Also, the connections shown between clinical decision-making and place of residency and medium of instruction suggest that background and educational setting may also affect decision-making skills.

Conclusion:

The study concluded that B.Sc. Nursing 3rd Year and Post Basic B.Sc. Nursing 1st Year students at SGT University, Gurugram had moderate to good levels of emotional intelligence and clinical decision-making skills. A significant positive relationship was found between emotional intelligence and clinical decision-making, indicating that emotional intelligence is an important factor in strengthening clinical judgment among nursing students.

Recommendations:

1. Similar studies can be conducted with a larger sample size in multiple institutions for better generalization.
2. Comparative studies can be carried out among students from different years of study and different universities.
3. Observational studies can be conducted to assess actual clinical decision-making behaviour in practice settings.
4. Interventional studies can be done to evaluate structured training programmes on emotional intelligence and clinical decision-making skills.
5. Future studies may explore the factors influencing emotional intelligence and decision-making among nursing students.

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