

Original Article

Work-life balance in nurses working in hospital: a model with the mediating role of emotional intelligence

Saeed Amini Moghaddam ¹, Alireza Manzari Tavakoli ^{1*}, Sanjar Salajegheh ¹,
Samaneh Mehdizadeh ¹, Zahra Shokoh ¹

¹ Department of Management, Kerman Branch, Islamic Azad University, Kerman, Iran.

Corresponding author and reprints: Alireza Manzari Tavakoli, Assistant Professor, Department of Management, Kerman Branch, Islamic Azad University, Kerman, Iran.

Email: a.manzari@iauk.ac.ir

Received: 22 Dec 2021

Accepted: 26 Feb 2022

Published: 13 March 2022

Abstract

Background: The aim of this study was to investigate the balance of work and life with the role of mediation of emotional intelligence in nurses working in hospitals in Kerman University of Medical Sciences.

Methods: This study was a descriptive and correlational research. The method of data collection was a combination of library and field studies and the tools of data collection were a review of documents, interviews and researcher-made questionnaires, including work-life balance factors and emotional intelligence questionnaire. The population included all 2740 nurses, who were working in hospitals of Kerman University of Medical Sciences. 508 people were selected by using a stratified sampling method, SPSS-23 and AMOS-24 software was used to analyze the data.

Results: The research results showed a significant relationship between work-life balance factors and emotional intelligence. It showed that by improving the implementation of work-life balance factors, the conditions for increasing emotional intelligence are provided. Based on the coefficient of determination (R^2), 51% of the changes in emotional intelligence were explained by factors related to work-life balance. The rate of direct effect was estimated to be 0.714 and the rate of indirect effect through emotional intelligence was estimated to be 0.333.

Conclusion: The organization should help nurses to achieve the necessary capability and conditions, facilities, and welfare so that the nurses could work in an environment in which a balance between work and family responsibilities is established.

Keywords: Emotional Intelligence; Hospitals; Job Satisfaction; Nurse; Nursing; Work-Life Balance.

Cite this article as: Amini Moghaddam S, Manzari Tavakoli A, Salajegheh S, Mehdizadeh S, Shokoh Z. Work-life balance in nurses working in hospital: a model with the mediating role of emotional intelligence. *Soc Determinants Health*. 2022;8(1):1-12. DOI: <http://dx.doi.org/10.22037/sdh.v8i1.37150>

Introduction

Human resources play a major role in the efficiency and effectiveness of organizations. (1). There is a lot of research on the existence of a positive relationship between work-life balance and many work and non-work components such as reducing stress (2), promoting physical and mental health (3), increasing job

satisfaction (4). Moving towards maintaining and promoting work-family balance is important from two dimensions. From the perspective of the organization, conflict resolution and achieving balance is considered important because having a motivated, productive and stress-free workforce would be effective in creating a positive work environment, reducing

absenteeism, retaining valuable employees and reducing costs (5).

The existence of the balance is also very important from the employees' point of view. Having a balance makes employees happier at work and at home, have better relationships with the management of the organization, achieve health, do not bring work problems to the home environment and vice versa, have enough time to focus on living outside the workplace and time and have more control over work and family life (6). Work-family conflict, has a major impact on reducing the work life satisfaction of hospital staffs. It also leads to reduced productivity, increased delays and absenteeism of hospital staffs, increased withdrawal of work, and low work and organizational commitment (7).

Emotional intelligence is the ability to perceive, evaluate, express emotions, produce emotions to facilitate cognitive activities. Failure to recognize emotions in time can be a sign of a person's inability to control his motives and make him have problems in his personal or social life (8). Emotional intelligence was discussed and years later it has been seen in the field of nursing (9). The nursing profession is known as a stressful and exhausting. Nurses are frequently exposed to stress and work pressure due to the characteristics and conditions of their work environment. Emotional intelligence is a skill that can reduce the negative effects of stress among nurses (10) and lack of paying attention to the quality of work-life of hospital staffs is considered as one of the major factors that have a harmful effect on hospital management (11).

According to the issues raised, the present study was conducted to investigate the work-life balance with the mediating role of emotional intelligence in nurses working in hospitals of Kerman University of Medical Sciences. We hope that the results of this study used by managers and planners of organizations.

Methods

The present study was descriptive-correlational research that has been done by survey method. Also, in terms of purpose, this was applied-development research that deal with data collection through field research.

The statistical population of this study in the model implementation process included all nurses working in hospitals of Kerman University of Medical Sciences to 2740 people and since in this study the structural equation modeling approach has been used and using stratified sampling method, was selected. Finally, 508 people were used as the basis for statistical analysis.

The method of data collection in this study was a combination of library and field studies and the tools of data collection were review of documents, interviews and researcher-made questionnaires of factors related to Variable of factors related to work-life balance (social, organizational, individual dimensions), Work-life balance variable (sufficient leisure time, job loyalty, workplace support, flexibility in work plan, life orientation, work and professional maintenance, reduction Voluntary working hours, work control, workload) were the variables of emotional intelligence (self-awareness, self-regulation, self-motivation, empathy, social skills, emotional flexibility).

To assess the content validity of the questionnaires of factors related to work-life balance, work-life balance and emotional intelligence, the opinions of 5 same experts who participated in the Delphi model were used. By submitting a questionnaire to them, they were asked to comment on the questionnaire questions and their relevance to the research hypotheses using the options completely inappropriate, inappropriate, relatively appropriate, appropriate, perfectly appropriate. They had a numerical value equal to 0%, 25%, 50%, 75%, 100%, respectively. The content validity of the

present questionnaires has been confirmed with a high percentage. Factor validity of work-life balance questionnaires, work-life balance and emotional intelligence questionnaires were also examined using confirmatory factor analysis. Content validity has been the mental judgment of experts about the degree to which structures were related in research tools.

The validity of the questionnaire of factors related to work-life balance based on the findings, the KMO value for factors related to work-life balance and sampling life is equal to 0.967 was confirmed by confirmatory factor analysis equal to 0.967, the validity of the work-life balance questionnaire was equal to 0.979 and the validity of the emotional intelligence questionnaire was equal to 0.979 which was confirmed. Also, the reliability of the questionnaire of factors related to work-life balance was equal to 0.974, the reliability of the work-life balance questionnaire was equal to 0.988 and the reliability of the emotional intelligence questionnaire is equal to 0.990 that the research tool has a relatively desirable reliability. To evaluate the internal reliability of the questionnaire in a pilot study on 30 statistical sample, the internal reliability of the questionnaire of factors related to work-life balance, emotional intelligence, training process and work-life balance (Table 3-14) using Cronbach's alpha Was calculated and considering that Cronbach's alpha values were higher than (0.7), the internal reliability of all dimensions was confirmed.

The composite reliability is calculated using the following formula in which the standardized factor load of the structure and the variance of the estimation error.

$$CR = \frac{(\sum_{i=1}^n \lambda_i)^2}{(\sum_{i=1}^n \lambda_i)^2 + \sum_{i=1}^n \sigma_i}$$

According to the results of confirmatory factor analysis, the combined reliability (CR) of the research variables of each of the research variables has been obtained as

follows (factors related to work-life balance with 3 components (0.974), emotional intelligence with 6 components (0.988) and Work-life balance with 9 components (0.990) was higher than 0.7.

In this study, SPSS software version 23 and AMOS version 24 software were used to analyze the data. Also, the level of significance (0.05) has been considered.

Results

Demographic variables of research

Frequency distribution of gender, education, frequency of age, in terms of marital status and in terms of work experience have been showed. (Table1)

The results of confirmatory factor analysis of factors related to work-life balance (standardized factor load) are shown in diagram 1. According to the presented indicators, it can be said that the proposed model has a good fit. According to the calculated operating loads, none of the operating loads were less than 0.5; Therefore, there was no question to exclude from the analysis process. (Diagram1)

Results of fit of Emotional Intelligence Questionnaire model are shown in Diagram 1.

Table 1. Demographic Characteristics of the participants

Variable	Number	Percentage
Gender	Male	93 18.3%
	Female	415 81.7%
Education Degree	Masters	82 16.1%
	PhD	12 2.4%
Marriage	Expert	414 81.5%
	Single	125 24.6%
Age (years)	Married	383 75.4%
	20-30	262 51.6%
	31-40	90 17.7%
	41-50	132 26%
participants had years of service (years)	Over 50	24 4.7%
	<5	188 37%
service (years)	5-10	125 24.6%
	11-15	84 16.5%
	16-20	47 9.3%
	>20	64 12.59%

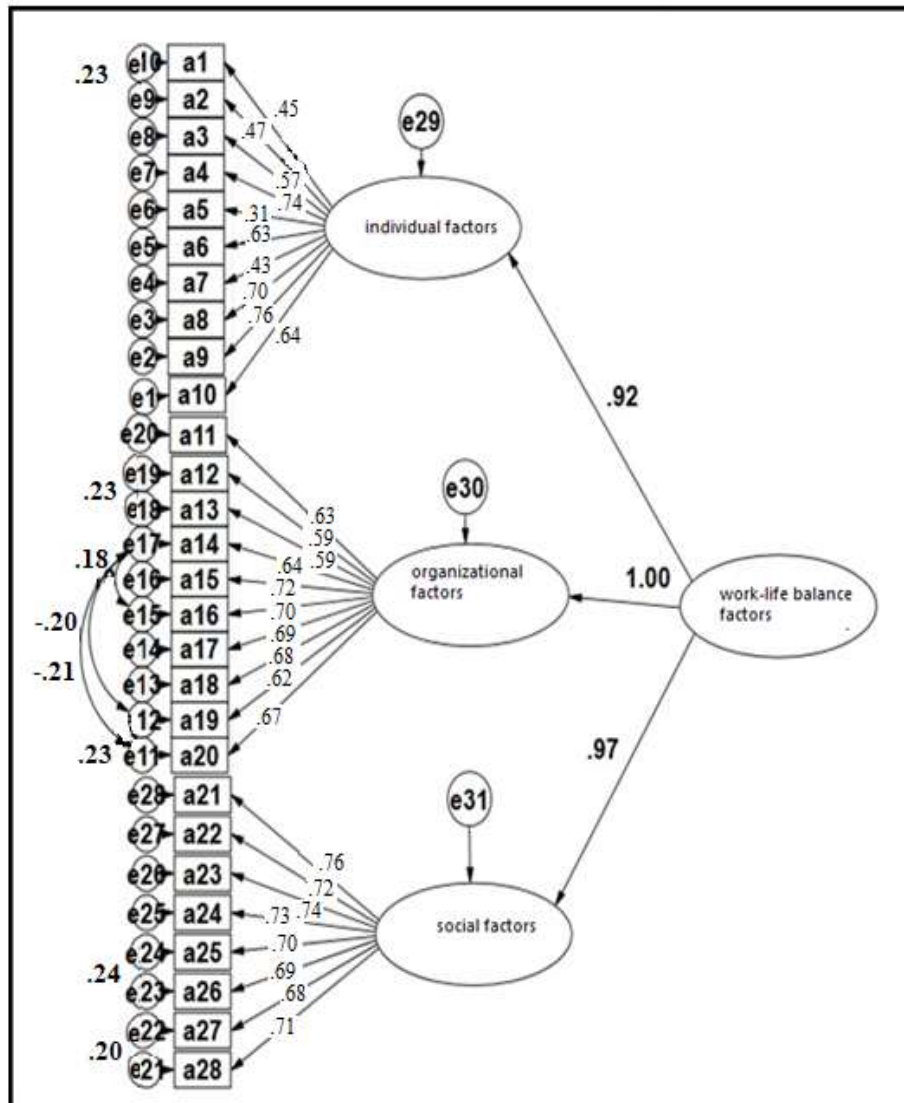


Diagram 1. Results of confirmatory factor analysis of work-life balance factors (standardized factor load)

Table 2. Fit indices of work-life balance factors

Index	Acceptable value	Reported value
MDFD/FD (Minimum Discrepancy Function by Degrees of Freedom Divided)	Less than or equal to 3	2.133
GFI (Goodness of Fit Index)	Equal to or larger than 0.9	0.905
AGFI (Adjusted Goodness of Fit Index)	Equal to or larger than 0.9	-
NFI (Normed Fit Index)	Equal to or larger than 0.9	0.987
IFI (Incremental Fit Index)	Equal to or larger than 0.9	0.943
TLI (Tucker-Lewis Index)	Equal to or larger than 0.9	0.936
CFI (comparative Fit Index)	Equal to or larger than 0.9	0.942
RMSEA (Root Mean Square Error of Approximation)	Equal to or smaller than 0.8	0.047

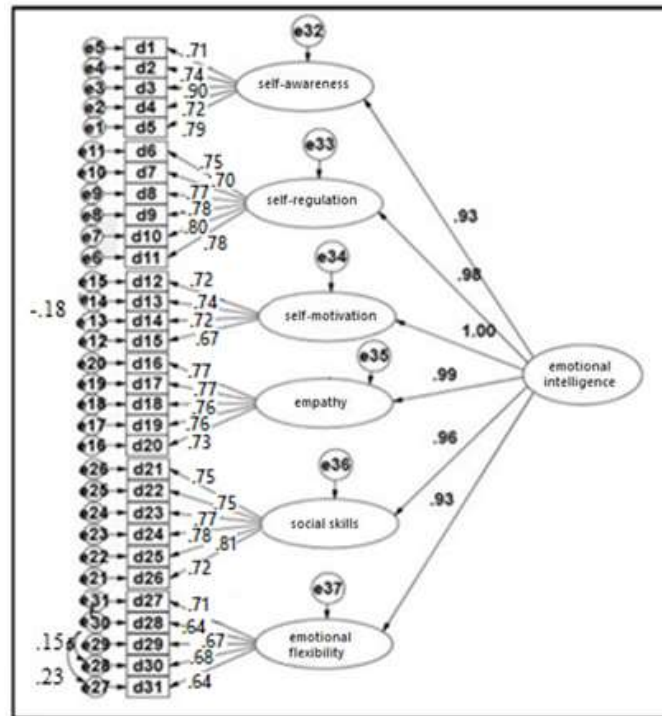


Diagram 2. Results of confirmatory factor analysis of emotional intelligence (standardized factor load)

According to the indices presented in Table 2, it can be stated that the model has a good fit for measuring work-life balance factors. According to the calculated factor loads, none of the factor loads was less than 0.5, so there was no question to be excluded from the analysis process.

The results of confirmatory factor analysis of emotional intelligence (standardized factor load) showed in diagram 2. According to the presented indicators, it can be said that the proposed model has a good fit. According to the calculated operating loads, none of the operating loads were less than 0.5; Therefore, there was no

question to exclude from the analysis process. (Diagram 2)

According to the indices presented in Table 3, it can be stated that the model has a good fit for measuring emotional intelligence. According to the calculated factor loads, none of the factor loads was less than 0.5, so there was no question to be excluded from the analysis process.

In the factor analysis model, four covariance relations were used to improve the fit indices. According to the indices presented in Table 3, it can be stated that the model has a good fit for the proposed work-life balance model with respect to the

Table 3. Fit indices of emotional intelligence model

Index	Acceptable value	Reported value
MDFD/FD (Minimum Discrepancy Function by Degrees of Freedom Divided)	Less than or equal to 3	2.117
GFI (Goodness of Fit Index)	Equal to or larger than 0.9	0.900
AGFI (Adjusted Goodness of Fit Index)	Equal to or larger than 0.9	0.883
NFI (Normed Fit Index)	Equal to or larger than 0.9	0.917
IFI (Incremental Fit Index)	Equal to or larger than 0.9	0.954
TLI (Tucker-Lewis Index)	Equal to or larger than 0.9	0.950
CFI (comparative Fit Index)	Equal to or larger than 0.9	0.954
RMSEA (Root Mean Square Error of Approximation)	Equal to or smaller than 0.8	0.047

mediating role of emotional intelligence. According to the calculated factor loads, none of the factor loads was less than 0.5, so there was no question to be excluded from the analysis process.

The software output indicates the appropriateness of the proposed research model, so that the root mean square root of the estimation error (RMSEA) was equal to (0.053), the normalized chi-square value (CMIN / DF) was equal to (2.446). And the value of the goodness of fit index (GFI) was equal to (0.809). Other indicators for fitting the proposed research model are given in Table 4-19. In the structural model, 16 covariance relations were used to improve the fit indices.

Critical ratio has been used to investigate the significance of research hypotheses. If the critical ratio was more than 1.96 or less than -1.96 (at the error level less than 5%) or more than 1.64 or less than -1.64 (at the error level less than 10%), confirmation hypothesis and a significant relationship between the two variables were obtained.

The presented results show a significant relationship between factors related to work-life balance and emotional intelligence ($p = 0.001$, $\beta = 0.714$). Due to the positive coefficient of the path, this relationship was incremental (direct). This means that by increasing and improving the implementation of factors related to work-

life balance, the field of increasing emotional intelligence is provided. Based on the coefficient of determination (R^2), 51% of the changes in emotional intelligence are explained by factors related to work-life balance.

The results also showed an increasing (direct) relationship between work-life balance and work-life balance ($p = 0.001$, $\beta = 0.517$) and emotional intelligence with work-life balance ($p = 0.001$, $\beta = 0.466$).

The results of Table 4 show that factors related to work-life balance, in addition to having a direct effect, also indirectly affect work-life balance through emotional intelligence. The rate of direct impact is equal to (0.714) and the rate of indirect impact through emotional intelligence is equal to (0.333).

Also, based on the calculations performed, a significant confidence interval was obtained from the bootstrap method to investigate the mediating role of the emotional intelligence variable equal to (0.949, 0.771). If the confidence interval does not include zero, it is assumed that the indirect effect is meaningful. Accordingly, the mediating effect of emotional intelligence on the relationship between factors related to work-life balance and work-life balance was confirmed.

Table 4. Fit indices of the proposed work-life balance model with respect to the mediating role of emotional intelligence

Index	Acceptable value	Reported value
MDFD/FD (Minimum Discrepancy Function by Degrees of Freedom Divided)	Less than or equal to 3	2.446
GFI (Goodness of Fit Index)	Equal to or larger than 0.9	0.900
AGFI (Adjusted Goodness of Fit Index)	Equal to or larger than 0.9	0.879
NFI (Normed Fit Index)	Equal to or larger than 0.9	0.888
IFI (Incremental Fit Index)	Equal to or larger than 0.9	0.931
TLI (Tucker-Lewis Index)	Equal to or larger than 0.9	0.926
CFI (comparative Fit Index)	Equal to or larger than 0.9	0.931
RMSEA (Root Mean Square Error of Approximation)	Equal to or smaller than 0.8	0.053

Table 4. Investigating the relationship between work-life balance factors with respect to the mediating role of emotional intelligence

Hypothesis	Path coefficient	Statistic t	p-value
work-life balance factors \longrightarrow emotional intelligence	0.714	15.110	0.001
work-life balance factors \Longrightarrow work-life balance	0.517	12.441	0.001
Emotional intelligence \Longrightarrow work-life balance	0.466	12.124	0.001

In the factor analysis model, four covariance relations were used to improve the fit indices. According to the indices presented in Table 4, it can be stated that the model has a good fit for the Investigating the relationship between work-life balance factors with respect to the mediating role of emotional intelligence.

In the factor analysis model, four covariance relations were used to improve the fit indices. According to the indices presented in Table 5, it can be stated that the model has a good fit for the Investigating the type of work-life balance effects with respect to mediating role of emotional intelligence.

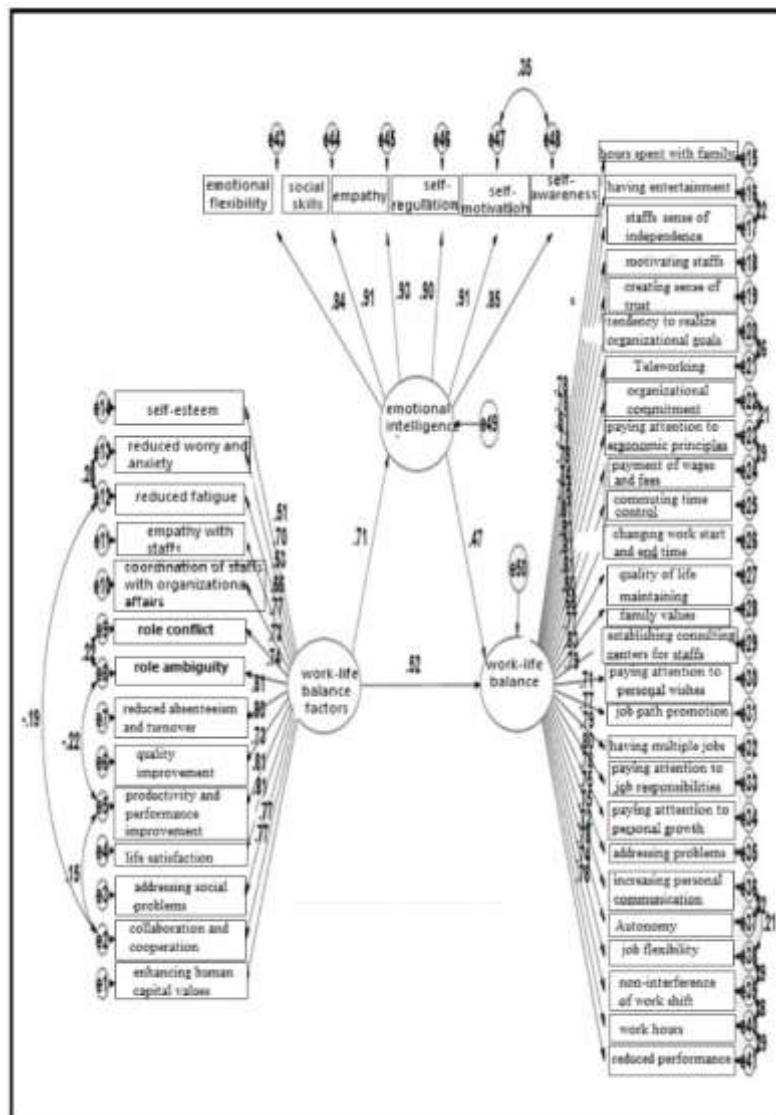


Diagram 3. Results of structural equations to investigate work-life balance factors with respect to mediating role of emotional intelligence [P-value=0.001]

Table 5. Investigating the type of work-life balance effects with respect to mediating role of emotional intelligence

Hypothesis	Direct effect	Indirect effect	Total effect
work-life balance factors \implies emotional intelligence	0.71	-	0.714
work-life balance factors \implies work-life balance	0.47	0.333	0.803

The results of Results of structural equations to investigate work-life balance factors with respect to mediating role of emotional intelligence)

Findings of the study confirm the proposed research model and show a significant relationship between factors related to work-life balance and emotional intelligence. Due to the positive coefficient of the path, this relationship was incremental (direct). This means that by increasing and improving the implementation of factors related to work-life balance, the field of increasing emotional intelligence is provided. Based on the coefficient of determination (R^2), 51% of the changes in emotional intelligence are explained by factors related to work-life balance. The results also show an increasing (direct) relationship between factors related to work-life balance with work-life balance and emotional intelligence with work-life balance. The results also show that factors related to work-life balance, in addition to having a direct effect, also indirectly affect work-life balance through emotional intelligence. The rate of direct impact was equal to (0.714) and the rate of indirect impact through emotional intelligence was equal to (0.333).

Discussion

The results of the test of research questions showed that by increasing and improving the implementation of factors related to work-life balance, the field of increasing emotional intelligence is provided ,also showed an increasing (direct) relationship between factors related to work-life balance with work-life balance and emotional intelligence with work-life balance. The results also show that factors related to work-life balance, in addition to having a

direct effect, also indirectly affect work-life balance through emotional intelligence.

In nurses working in this study, there is a positive and significant relationship between factors related to work-life balance and emotional intelligence. Home, coordinating one's work shift with one's spouse's shift, choosing a job from among the proposed jobs in the organization that is most in line with one's personality traits, cooperating and empathizing with one's spouse in doing household chores (such as shopping), coordinating one's shift with school shifts Children are well respected among the organization's nurses, which shows the balance between their work and life. In fact, nurses who have high emotional intelligence in assessing and regulating their specific emotions than other people who have less emotional intelligence, have the ability to be more adaptable to the environment, especially their work environment. For this reason, and since a large part of human life today is spent in their work environments, benefiting from the power of better adaptation can help nurses in managing problems and job stress. In the following, the researches that have been done in the field of this research will be discussed.

Organizations should implement work integration programs to create attractiveness and retain talent, maintain high organizational ethics and morale, increase productivity and cost savings, reduce health care costs, increase commitment, and reduce burnout (12). Emotional intelligence determines one's capacity to recognize his or her feelings and those of others to be motivated to control his or her emotions, and to build his or her social relationships with others, nowadays, every organization wants more output

versus less input, and this goal will only be achieved when hospital staffs feel comfortable at work. Thus, it is crucial for organizations to establish high-quality relationships between hospital staffs and their work environment. Due to job stress and conflicting interests, and high socialization, there is no balance between work life and family life (13) Which is in line with the research done.

Thus, one of the questions that may come to mind many is to what extent the work that is entrusted to people is appropriate to their status. Quality of work life in different societies due to the differences of human societies, their level of income and welfare and many other factors are very different from each other. Also, investigating quality of work-life due to differences in work environments (differences between public and private organizations, cooperatives, large and small industries, etc.) is difficult even in Iran. Moreover, it seems unlikely that a usable and generalizable result can be achieved in this regard (14). Therefore, there is a need for a dynamic approach to consider various dimensions of this issue and analyze the impact of various factors and their changes (increase and decrease). No phenomenon is fixed in the world except the word "change" itself. In today's world of change, hospital staffs must adapt to environmental changes to ensure their survival, and this goal is achieved by improving the quality of work life, since focus on improving the quality of work life leads to increased vitality and satisfaction of hospital staffs and thus organizations and customers (15) Which is consistent with the importance of the variables of the present study.

Emotions consist of a major part of life. The direct and indirect presence of emotions can be seen in reasoning and rationality. Lack of paying attention to emotions and lack of management of them in expressing them can impose much cost for human beings. Recent studies suggest that lack of emotional intelligence can have harmful

effects on individual and social areas, and conversely, acquiring and reinforcing them can pave the way for great success. Emotional intelligence training can provide appropriate conditions for individual and social development in various areas of culture (16). In line with the results of this question, the results of a study conducted by Aij et al., [17] showed that work-life balance strategies have a significant relationship with the vitality and ability of hospital staffs to achieve work-life balance. Work-life balance strategies have a significant relationship with the vitality and ability of hospital staffs to achieve work-life balance, and the ability of hospital staffs to achieve work-life balance has a positive and significant relationship with the life of hospital staffs (17).

Andersen & Røvik, reported various dimensions and indicators factors empowering work-life balance, including individual, organizational and environmental dimensions (18). The results of a research conducted by Khosravi et al., showed that there was a direct relationship between emotional intelligence and job performance of hospital staffs in Ilam Gas Refining Company and hospital management strategies moderated the relationship between emotional intelligence and job performance of hospital staffs (19). In a study conducted by Graben, the results of descriptive and inferential statistical studies showed that out of the four subscales included in the model of research (work balance, life balance, worship balance, devotion to relatives' balance), only the worship subscale was confirmed (20).

The results of a study conducted by Radnor et al., showed that from managers and hospital staffs' point of view, all components of personality traits (self-esteem, trust, responsibility and sociability) of managers had a significant and direct relationship with work-life balance of hospital staffs. It means that with improving the personality traits of

managers, the work-life balance of hospital staffs will be positive (21) Which indicates the importance of the cases under investigation. Results of a study conducted by Rezaei et al., revealed that satisfaction with work-family balance programs reduces turnover tendency of hospital staffs (22). Research conducted by Schonberger Richard, showed that the work-life balance has a positive and significant relationship on organizational commitment and job satisfaction of hospital staffs (23). Organizations should implement work-life integration programs to create attractiveness and retain talents, maintain high organizational ethics and morale, increase productivity and cost savings, reduce health care costs, increase commitment, and reduce burnout. People with high stress are more likely to lose their jobs due to illness, and illness and lack of balance in the lives of hospital staffs have major consequences such as increased financial problems, increased turnover, and reduced hospital staff practice (24). Because nursing is an important profession and at the same time it is based on the processes of interpersonal relationships, the role of emotional intelligence in this profession seems more colorful. Teamwork, creativity and service quality are among the behaviors that are influenced by emotional intelligence. It seems that this mechanism can be one of the reasons for balancing work and life with nurses who have higher emotional intelligence. Also, benefiting from high emotional intelligence by creating a pleasant and pleasant work environment affects employee satisfaction and the development of the organization and ultimately the lives of nurses, because high emotional intelligence causes increased performance, strategic understanding and job satisfaction and his problems. To decrease. It should also be acknowledged that positive patient feedback to nurses who have higher emotional intelligence and display it in the relationship between themselves and the

patient is likely to ultimately improve their organizational and personal life.

Recommendations

Research suggestions are as follows: the effect of job satisfaction and life satisfaction factors on work-life balance, investigating the concept of nurses' professional behavior and its effect on work-life balance in them, identify and prioritize the factors affecting work-life balance using Demetel method.

Conclusion

Results of presented structural equations modeling shows the positive and significant effect of work-life balance factors on emotional intelligence. Based on the coefficient of determination (R^2), 51% of the changes in emotional intelligence are explained by work-life balance factors. The results of this test revealed that the effect of individual and social factors on the work-life balance at the level of 5% is significant and the positive path coefficients show that these structures have a direct effect on emotional intelligence. It can be stated that the effect of dimension of organizational factors on work-life balance has been more than other dimensions investigated. In explaining this question, it can be stated that organizational life and personal life are necessary and non-separable from each other. Hospital staffs are the most important assets of the organization that play a key role in transformation of the organization. The work-life balance is one of the variables that have recently been considered by many managers to improve the quality of their human resources. Also, the organization should help nurses to achieve the necessary capability and it should provide the necessary conditions, facilities and welfare so that the nurses can work in an environment in which a balance between work and family responsibilities is established. The role of government and society should not be ignored in this regard. The government should take the necessary

steps so that the nurses can manage the life and work conflicts, leading to more satisfied nurses and society.

Author's contribution

Saeed Amini Moghaddam and Alireza Manzari Tavakoli developed the study concept and design. Sanjar Salajegheh acquired the data. Samaneh Mehdizadeh and Zahra Shokoh analyzed and interpreted the data, and wrote the first draft of the manuscript. All authors contributed to the intellectual content, manuscript editing and read and approved the final manuscript.

Informed consent

Questionnaires were filled with the participants' satisfaction and written consent was obtained from the participants in this study.

Funding/financial support

There is no funding.

Conflict of interest

The authors declare that they have no conflict of interests.

References

1. Kossek EE, Pichler S, Bodner T, Hammer LB. Work place Social Support and work –family Conflict: A meta-analyzing clarifying the influence of general and work-family –specific supervisor and organizational support. *Pers Psychol.* 2011;64(2):289-313. doi: 10.1111/j.1744-6570.2011.01211.x.
2. Lu JF, Siu OL, Spector PE, Shi K. Antecedents and outcomes of a fourfold taxonomy of work-family balance in Chinese employed parents. *Journal of Occupational Health Psychology.* 2009;14(2):182-192. <https://doi.org/10.1037/a0014115>
3. Burke RJ. Working to Live or Living to Work: Should Individuals and Organizations Care? *Journal of Business Ethics.* 2009;84(1):167-172. <https://doi.org/10.1007/s10551-008-9703-6>.
4. Perlow LA, Porter JL. Making time off predictable and required. *Harvard Business Review.* 2009;87(10):102-109. <https://pubmed.ncbi.nlm.nih.gov/19839447/>
5. Shakib B, Honarvar Khuzestani N. Organizational Factors Affecting Work-Life Balance Case Study: Employees of Yazd Refractory Company, 3rd International Conference on New Achievements in Management and Economics, Qarchak;2017.
6. Ghahremani M, Vafaezadeh F, Abolghasemi M, Hassanmoradi N, Khanabadi M. Development of tools for measuring the level of work-family balance and reviewing the status of this concept based on some individual and organizational characteristics: a case study of school deputies in Varamin city. *Journal of Job and Organizational Counseling Fall.* 2016;28(1):55-75.
7. Fathi R. The relationship between emotion seeking, ADHD, and resilience in addicted and non-addicted people in Isfahan, *International Journal of Production Economics.* 2019;16(5):56-67.
8. Por J, Barriball L, Fitzpatrick J, Roberts J. Emotional Intelligence: Its Relationship to Stress, Coping, Well-Being and Professional Performance in Nursing Students. *Nurse Education Today.* 2011;31(1):855-860. <https://doi.org/10.1016/j.nedt.2010.12.023>.
9. Bulmer Smith K, Profetto-McGrath J, Cummings GG. Emotional intelligence and nursing: an integrative literature review. *International Journal of Nursing Studies.* 2009;46(12):1624-1636. doi: 10.1016/j.ijnurstu.2009.05.024.
10. Ghofrani Kelishami F, Ashghali Farahani M, Jamshidi Orak R, Arab Ameri Z, Bani Hashemi S, Seyedfatemi N. Emotional intelligence in Nursing, models and methods of measurement. *Advances in Nursing & Midwifery.* 2017;26(93):21-29. <https://journals.sbmu.ac.ir/en-jnm/article/view/15794>
11. Alaei M. The impact of organizational and non-organizational measures on organizational attraction considering the perceived mediating role, M.Sc. Thesis, Azad University, North Tehran Branch;2017.
12. Jordon K, Dossou P, Júnior JC. Using lean manufacturing and machine learning for improving medicines procurement and dispatching in a hospital. *Procedia Manufacturing.* 2019;38(1):1034-1041. <https://doi.org/10.1016/j.promfg.2020.01.189>
13. McCarthy A, Darcy C, Grady G. Work-life balance policy and practice: understanding line manager attitudes and behaviors. *Human Resource Management Review.* 2010;20(2):158-167. doi: 10.1016/j.hrmr.2009.12.001.
14. Basińska MA, Andruszkiewicz A, Grabowska M. Nurses' sense of coherence and their work related patterns of behaviour. *Int J Occup Med Environ Health.* 2011;24(3):256-66. doi: 10.2478/S13382-011-0031-1.
15. Balmforth K, Gardner D. Conflict and Facilitation between Work and Family: Realizing the Outcomes for Organizations. *New Zealand Journal of Psychology.* 2006;35(2):69-76. <https://psycnet.apa.org/record/2006-12284-002>

16. Yousri TA, Khan Z, Chakrabarti D, Fernandes R, Wahab K. Lean thinking: can it improve the outcome of fracture neck of femur patients in a district general hospital? *Injury*. 2011;42(11):1234-7. doi: 10.1016/j.injury.2010.11.024.
17. Aij KH, Simons FE, Widdershoven GA, Visse M. Experiences of leaders in the implementation of Lean in a teaching hospital--barriers and facilitators in clinical practices: a qualitative study. *BMJ Open*. 2013;3(10):e003605. doi: 10.1136/bmjopen-2013-003605.
18. Andersen H, Røvik KA. Lost in translation: a case-study of the travel of lean thinking in a hospital. *BMC Health Serv Res*. 2015;401(1):29-40. <https://doi.org/10.1186/s12913-015-1081-z>.
19. Khosravi B, Soltani S, Javan-Noughabi J, Faramarzi A. Health care expenditure in the Islamic Republic of Iran versus other high spending countries. *Med J Islam Repub Iran*. 2017;61(6):71-82. doi: 10.14196/mjiri.31.71.
20. Graben M. *Lean Hospitals, Improving Quality, Patient Safety, and Employee Engagement*, Third Edition, New York: NY: Productivity Press;2016.
21. Radnor ZJ, Holweg M, Waring J. Lean in healthcare: the unfilled promise? *Soc Sci Med*. 2012;74(3):364-371. doi: 10.1016/j.socscimed.2011.02.011.
22. Rezaei S, Fallah R, Kazemi Karyani A, Daroudi R, Zandiyani H, Hajizadeh M. Determinants of healthcare expenditures in Iran: evidence from a time series analysis. *Med J Islam Repub Iran*. 2016;30(1):6-14. URL: <http://mjiri.iums.ac.ir/article-1-3429-en.html>.
23. Schonberger Richard J. Reconstituting lean in healthcare: From waste elimination toward 'queue-less' patient-focused care. *Business Horizons*, Elsevier. 2018;61(1):13-22. DOI: 10.1016/j.bushor.2017.09.001
24. Kollberg B, Dahlgaard JJ, Brehmer P. Measuring lean initiatives in health care services: issues and findings. *International Journal of Productivity and Performance Management*. 2007;56(1):7-24. <https://doi.org/10.1108/17410400710717064>