# Relationship Management Competence and Organizational Performance

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## INTRODUCTION

The competence of organizational management is required to cope with the complexity of technology and the diversity of social demands for maintaining good interpersonal relationships through the support of advanced technology. The competencies, such as self-management and interpersonal relationship management, play a crucial role in improving individual and organizational performance. Experiences of interpersonal relationships at work are multifaceted with value consciousness, mood states at work, and members' work attitudes, as well as technical knowledge and skills that are constituted of explicit cognitive information. Organizational climate or culture is focused on recent studies to improve human performance by avoiding erroneous actions, accidental occurrences, or withdrawal attitudes such as absenteeism and turnover intention. The participants to organization are expected to act as actors and some of them as leaders to help develop themselves and coworkers, building bonds to collaborate with team members, for improving organizational performance, and for providing a high quality of service. This article is focused on the effect of mood states at work on workers' perceived health and perceived performance, and on the effect of the competence of interpersonal relationship management on organizational performances.

## BACKGROUND

Emotional competences represented by recognition of self and others' competences, emotional regulation of self and relationship management competence, and also mood states at work are important modulators in improving quality of care (QoC). We have tried to categorize care into four types by using two axes: one is the axis of care, lower or higher; the other is the axis of group level, individual or social, such as egoistic type (lower level of care, individual), bureaucratic type (lower level of care, social), specialist type (higher level of care, individual), and dynamic collaboration type (higher level of care, social). Our studies in healthcare sectors suggest that dynamic and collaboration types of care categorized by two axes play an important role in improving quality of team care and also organizational performances.

In order to identify the important role of dynamic and collaboration type of care, some evaluation indicators such as mood states at work, perceived health state, and emotional intelligence competence were applied in our studies. Our studies suggested that job consciousness, emotional states at work, and occupational health states gave critical effects on individual and organizational performance. The profile of mood states (POMS) developed by McNair, Lorr, and Droppleman (1971) was applied in investigations as to the measurement of mood states. The POMS consisted of six T-values: tension and anxiety (T-A), depression- dejection (D-D), anger-hostility (A-H), vigor (V), fatigue (F), and confusion (C). Perceived health status was measured by applying the Todai Health Index (THI) developed by Suzuki, Aoki, and Yanai, (1976) and Suzuki and Roberts (1991). Perceived health status was depicted as a radar chart constituted of 12 scale values, vague complaints (SUSY), respiratory (RESP), eye and skin (EYSK), mouth and anal (MOUT), digestive (DIGE), irritabilities (IMPU), lie scale (LISC), mental instability (MENT), depressiveness (DEPR), aggressiveness (AGGR), nervousness (NERV), and life irregularity (LIFE). In addition, with the pattern of health structure, health level was also diagnosed by using DF values (discriminant function values) for psychosomatics, neurotics, and schizophrenics, as shown in Figure 2. The larger the DF value, the greater the probability of disease. The competence of interpersonal relationship management was measured by applying Emotional Intelligence Competence (EIC), which was a learned ability and was classified into self-awareness, social awareness, self-management, and relationship management (Boyatzis, Goleman & Rhee, 2000; Cherniss

& Goleman, 2001; Goleman, Boyatzis & McKee, 2002).

Performance reliability was measured by nine items of work environmental conditions called common performance conditions (CPCs), asking, How do you cognize the adequacy of (1) organization, (2) working conditions, (3) adequacy of Man-Machine Interface and operational support, (4) availability of procedures/plans, (5) number of simultaneous goals, (6) available time, (7) time of day/circadian rhythm, (8) adequacy of training and preparation, (9) and crew collaboration quality, which are developed by Hollanagel (1993, 1998). Subjects are requested to select one of four answers: very efficient, efficient, inefficient, and deficient. Erroneous human behaviors are predicted by measuring performance reliability both in improved reliability and reduced reliability.
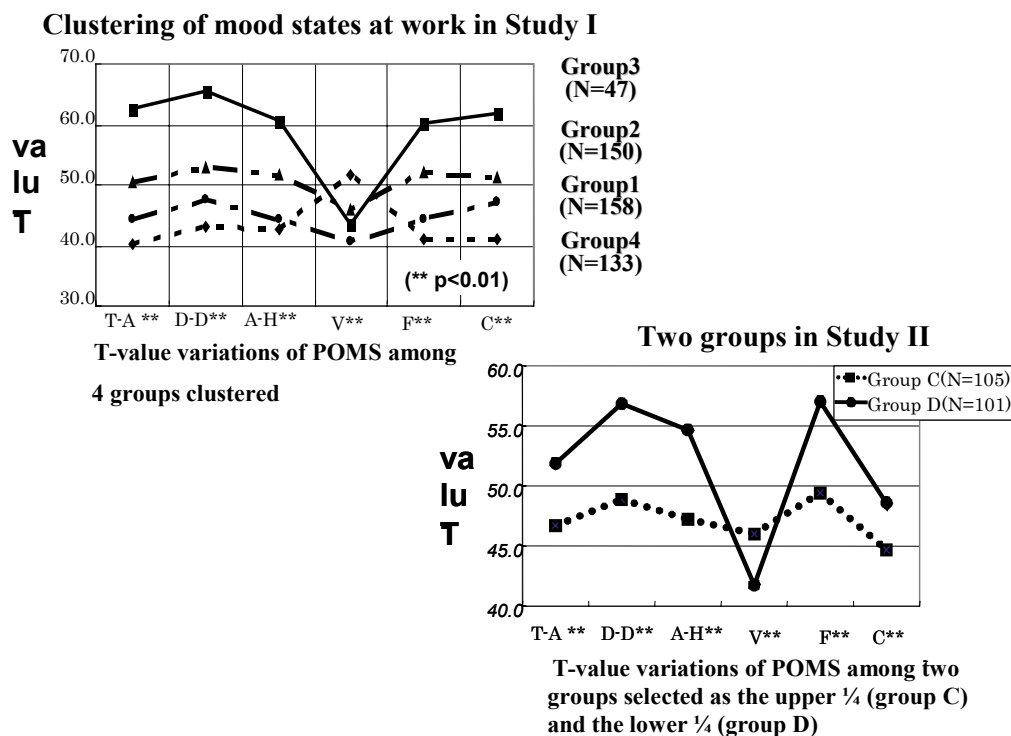
## MAIN FOCUS OF THE ARTICLE

The focus of this article is placed on the relation of mood states at work with workers' health conditions and with perceived performance, and also placed on the relationship of interpersonal relationship management competence with organizational performances of communication accuracy, team coherence, and performance reliability. As shown in Figure 1, subjects were classified into four groups in Study I, as shown in the upper left figure, and two groups in Study II, as shown in the lower right figure. An asymmetrical pattern of mood states at work measured by the POMS was observed between Group 3 and Group 4 in Study I.

Scores of interpersonal relationship managements were obtained by the questionnaire inventory of the EIC. The framework of the EIC consisted of four conceptual domains: self-awareness, social awareness, self-management, and relational management. Poor interpersonal relationship management in individual and collective levels (i.e., inappropriate recognition and regulation management) often causes the decrement of both task performance and contextual performance. The results shown in Figures 4 and 5 are on the comparison of organizational performances among the degrees of the EIC, communication accuracy in Figure 4, team member resources in Figure 5, and also the results in the section of performance reliability. Interpersonal relational management, mood-states at work measured

*Figure 1. Clustering of mood states at work*



**Clustering of mood states at work in Study I**

**T-value variations of POMS among 4 groups clustered**

**Two groups in Study II**

**T-value variations of POMS among two groups selected as the upper ¼ (group C) and the lower ¼ (group D)**

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