# Executive Summary of the ENCounter Leadership ICON Program

Alexis Spence

College of Nursing, East Carolina University

Doctor of Nursing Practice

## Executive Summary of the ENCounter Leadership ICON Program

### Key Project Findings

- A structured, 12-week leadership development program was successfully implemented for undergraduate nursing students using participant-driven, cohort-based, and experiential learning strategies.
- All five participants completed the program and all evaluation activities, demonstrating 100% retention and strong participant engagement.
- Participants reported stronger leadership identity, with average Authentic Leader Identity scores increasing from **4.24 to 4.51** (Brown, 2022).
- Participants demonstrated greater confidence in creating purpose within their professional careers, reflected by a decrease in average Myths About Purpose scores from **1.94 to 1.63** (Brown, 2022; Brown & Varghese, 2019).
- Qualitative feedback demonstrated increased confidence, self-awareness, systems thinking, advocacy readiness, and professional identity development.
- Participants identified the advocacy immersion experience as the most influential aspect of the program because it strengthened their understanding of healthcare policy and the nurse's role in advocacy.
- The project established a sustainable leadership development framework that can continue preparing future nursing students after completion of the Doctor of Nursing Practice (DNP) project.

### Background and Purpose

Healthcare systems increasingly depend on nurses who can lead teams, advocate for patients and communities, collaborate across disciplines, and improve healthcare delivery. Recognizing these expectations, the American Association of Colleges of Nursing (AACN) identifies leadership, advocacy, systems-based practice, interprofessional collaboration, and professional identity formation as essential competencies for every nursing graduate (AACN, 2021). Despite these expectations, leadership development within many undergraduate nursing programs remains fragmented and often relies on isolated classroom instruction.

Current evidence supports participant-driven learning, mentorship, cohort-based education, and experiential learning as effective strategies for developing leadership confidence, professional identity, and readiness for practice among undergraduate nursing students (Akdeniz & Duygulu, 2023; Flott et al., 2022; Hall et al., 2024). However, few undergraduate nursing programs have intentionally integrated these evidence-based approaches into a comprehensive leadership development program.

The purpose of this quality improvement project was to design, implement, and evaluate the ENCounter Leadership ICON (Leading Individuals, Communities, and Others through Nursing) Program, a structured leadership development initiative that combined participant-driven engagement, experiential learning, innovation, and advocacy experiences to strengthen leadership capacity and professional identity among undergraduate nursing students (AACN, 2021).

**Methodology**

This quality improvement project was implemented as a 12-week pilot leadership development initiative involving five undergraduate nursing students who volunteered for the pilot cohort. The Institute for Healthcare Improvement's Model for Improvement and iterative Plan-Do-Study-Act (PDSA) cycles were utilized to guide continuous evaluation and refinement (Institute for Healthcare Improvement, n.d.). The program was organized around three evidence-based components: foundational leadership development, interprofessional collaboration and innovation, and advocacy engagement. Participants completed a leadership retreat, an innovation lab, and an advocacy immersion while engaging in guided reflection throughout the program.

Program outcomes were evaluated using two validated leadership assessment tools administered before and after participation. The *Authentic Leader Identity Scale* measured participants' confidence in seeing themselves as leaders, while the *Myths About Purpose Scale* evaluated beliefs regarding the ability to intentionally create purpose and direction in professional life (Brown, 2022; Brown & Varghese, 2019). Descriptive statistics were used to compare pre- and post-program scores, and participant reflections were reviewed to identify common themes describing the leadership development experience. Findings from this project will guide future iterations of the ENCounter Leadership ICON Program and provide a model for other nursing programs seeking to strengthen undergraduate leadership education.

**Results**

The ENCounter Leadership ICON Program successfully met its implementation objectives. All five undergraduate nursing students completed the 12-week program and

participated in every leadership activity and evaluation, resulting in a 100% retention and survey completion rate. Participants completed the leadership retreat, innovation laboratory, advocacy immersion experience, and reflective activities, demonstrating strong engagement throughout the project. All participants indicated they would recommend the program to future nursing students, underscoring its feasibility and perceived value.

Program outcomes demonstrated meaningful improvements in leadership development (Table 1).

**Table 1**

*Leadership Development Outcomes*

| **Outcome Measure** | **Pre-Program** | **Post-Program** |
|---|---|---|
| Authentic Leader Identity (ALI) | 4.24 | 4.51 |
| Myths About Purpose (MAP) | 1.94 | 1.63 |

Participants reported greater confidence in viewing themselves as leaders, with the average *Authentic Leader Identity* (ALI) score increasing from 4.24 before the program to 4.51 after program completion (Brown, 2022). Participants also demonstrated greater confidence in their ability to create purpose within their personal and professional lives. Average *Myths About Purpose* (MAP) scores decreased from 1.94 to 1.63, with lower scores indicating fewer misconceptions about the development of purpose (Brown, 2022; Brown & Varghese, 2019).

Participant reflections further supported these quantitative findings. Students consistently described increased confidence in expressing ideas, making decisions, and

assuming leadership responsibilities. They also reported enhanced emotional intelligence, greater self-awareness, stronger professional identity, and improved understanding of systems thinking and interdisciplinary collaboration. The advocacy immersion experience was identified as the most impactful component because it deepened participants' understanding of healthcare policy, legislative advocacy, and nurses' responsibility to influence healthcare beyond direct patient care.

**Strengths and Limitations**

Several factors contributed to the success of the ENCounter Leadership ICON Program. The project was grounded in current evidence supporting participant-driven, cohort-based, and experiential learning strategies for leadership development (Akdeniz & Duygulu, 2023; Flott et al., 2022; Hall et al., 2024). Strong stakeholder support, external funding, iterative Plan-Do-Study-Act cycles, and validated outcome measures supported successful implementation. In addition, the project achieved 100% participant retention and established a sustainable leadership development framework to support future undergraduate nursing cohorts.

Limitations should also be considered when interpreting the findings. The pilot project included only five participants, limiting the generalizability of the results. Participants voluntarily enrolled and had demonstrated a strong interest in leadership development prior to the program, which may have influenced baseline scores. Evaluation relied on self-reported survey data, and individual pre- and post-program responses could not be matched because unique participant identifiers were not used. Finally, scheduling challenges and limited participation from other health professions reduced opportunities

for broader interprofessional collaboration. Although these limitations affect interpretation, they do not diminish the project's success as a feasible pilot leadership initiative.

**Implications and Conclusions**

Although this project involved a small pilot cohort, the findings have broader implications for patients, nursing education, healthcare organizations, and rural communities. Leadership-prepared nurses are better equipped to communicate effectively, coordinate interdisciplinary care, advocate for patients, and participate in quality improvement initiatives. Developing leadership skills before graduation prepares nurses to contribute to safer, higher-quality patient care while supporting the *Healthy People 2030* goal of strengthening the healthcare workforce to improve population health and reduce health disparities (Office of Disease Prevention and Health Promotion [ODPHP], 2020).

For the project partner, this project established a sustainable leadership development framework that extends beyond its completion. Program materials, evaluation tools, implementation guides, and stakeholder partnerships provide a sustainable process that can support future student cohorts without redevelopment. This framework transforms leadership development from isolated educational experiences into a repeatable, evidence-informed process that supports continuous improvement and aligns with the College's mission to prepare practice-ready nurse leaders.

This project demonstrates that leadership development can be intentionally integrated into undergraduate nursing education through participant-driven, experiential,

and cohort-based learning. Rather than relying solely on classroom instruction, nursing programs can provide authentic leadership experiences that strengthen professional identity, systems thinking, advocacy, and collaboration while supporting the competencies outlined in the AACN Essentials (AACN, 2021).

Healthcare organizations increasingly need new graduate nurses who can lead change, collaborate across disciplines, and navigate increasingly complex healthcare systems. Graduates who have participated in structured leadership development programs may enter practice with greater confidence, stronger communication skills, and increased readiness to contribute to innovation, quality improvement, and organizational change. These competencies support the *Quadruple Aim* by preparing nurses to improve the patient experience, advance population health, strengthen the healthcare workforce, and contribute to more effective healthcare systems (Backman et al., 2021; Gin & Courneya, 2020).

Beyond the positive outcomes demonstrated among the initial participants, the project's greatest contribution is the establishment of a sustainable leadership development framework that will continue to prepare future undergraduate nursing students long after the completion of this DNP project. By embedding structured leadership development into the educational environment, the ENCounter Leadership ICON Program offers an evidence-informed, replicable model that other schools of nursing can adapt to strengthen leadership preparation and the future nursing workforce.

**References**

Akdeniz, C., & Duygulu, S. (2023). Systematic review on characteristics and effects of leadership development interventions for nursing students. *Nurse Educator, 49*(3), E147–E152. https://doi.org/10.1097/NNE.0000000000001540

American Association of Colleges of Nursing. (2021). *The Essentials: Core competencies for professional nursing education*. https://www.aacnnursing.org

Backman, C., Dolack, S., Marck, P., & Koshman, S. (2021). Advancing patient- and family-centered care through health system transformation: Insights from implementing the Triple Aim. *Healthcare Quarterly, 24*(2), 17–25. https://doi.org/10.12927/hcq.2021.26442

Brown, R. P. (2022). *Measuring the Mist: A practical guide for discovering what really works in leader development*. Doerr Institute for New Leaders.

Brown, R. P., & Varghese, L. (2019). Holding higher education to account: Measuring what matters in the development of students as leaders. *Journal of Character and Leadership Development, 6*(2), 34–49.

Flott, E., Ball, S., Hanks, J., Minnich, M., Kirkpatrick, A., Rusch, L., Koziol, D., Laughlin, A., & Williams, J. (2022). Fostering collaborative learning and leadership through near-peer mentorship among undergraduate nursing students. *Nursing Forum, 57*(5), 750–755. https://doi.org/10.1111/nuf.12755

Gin, N., & Courneya, P. (2020). Working to achieve the Quadruple Aim. *The Permanente Journal, 24*, 20.046. https://doi.org/10.7812/TPP/20.046

Hall, K., Bardier, C., Greer, D., Clayton, A., & Poblete, R. (2024). Unleashing leadership potential in unprecedented times: Lessons learned from an evaluation of a virtual cohort-based adaptive leadership program for public health executives. *Public Health in Practice, 8*, 100532. https://doi.org/10.1016/j.puhip.2024.100532

Institute for Healthcare Improvement. (n.d.). *Model for Improvement*. . Institute for Healthcare Improvement.

Office of Disease Prevention and Health Promotion. (2020). *Healthy People 2030: Objectives and data*. U.S. Department of Health and Human Services.