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2020 General Assembly Business Agenda

TUESDAY, SEPTEMBER 8

8:00-8:30 am CT	General Assembly Call to Order Credentials Report Adoption of General Assembly Standing Rules of Procedure Adoption of Business Agenda
8:30-8:45 am CT	President Address & State of the Association
8:45-9:45 am CT	Open Reference Hearings GA20-01: Proposal to Amend the ENA Bylaws GA20-02: Hemorrhage Control Education in Schools GA20-03: Request for Emergency Nurses Association Organization to Facilitate Collaboration with the Occupational Therapist Organization(s) GA20-04: Patient Screening in the Emergency Department
9:45-10:15 am CT	Break
10:15-11:15 am CT	Open Reference Hearings GA20-05: Recognition of Emergency Clinical Assistant/Technician GA20-06: Preparing Nurses for Care in the Prehospital Emergency (EMS) Setting GA20-07: Increasing Community Engagement through Collaboration and Recognition GA20-08: Advocating for Standardized Safety and Well Being of ER Nurses
11:15-1:00 pm CT	Wrap up/Adjournment for Lunch (<i>Committee Compiles Report</i>)
1:00-1:30 pm CT	Delegates Review Committee Report
1:30-2:00 pm CT	Resume General Assembly Call to Order Credentials Report
2:00-3:00 pm CT	Consideration of Proposed Bylaws Amendment Proposal and Resolutions (Debate and Vote) GA20-01: Proposal to Amend the ENA Bylaws GA20-02: Hemorrhage Control Education in Schools GA20-03: Request for Emergency Nurses Association Organization to Facilitate Collaboration with the Occupational Therapist Organization(s) GA20-04: Patient Screening in the Emergency Department
3:00-3:30 pm CT	BREAK

2020 General Assembly Business Agenda

- 3:30-4:30 pm CT **Consideration of Proposed Bylaws Amendment Proposal and Resolutions (Debate and Vote)**
- GA20-05:**Recognition of Emergency Clinical Assistant/Technician
GA20-06:Preparing Nurses for Care in the Prehospital Emergency (EMS) Setting
GA20-07:Increasing Community Engagement through Collaboration and Recognition
GA20-08: Advocating for Standardized Safety and Well Being of ER Nurses
- 4:30 pm CT **Wrap Up/General Assembly Adjournment**



2020 General Assembly Officials

General Assembly Chair/President	Mike Hastings, MSN, RN, CEN <i>Washington</i>
Credentials Chairperson/Immediate	Patricia Kunz Howard, PhD, RN, CEN, CPEN, TCRN, NE-BC, FAEN, FAAN
Past President	<i>Kentucky</i>
President-Elect	Ron Kraus, MSN, RN, EMT, CEN, TCRN, ACNS-BC <i>Indiana</i>
Directors	Joop Breuer, RN, CEN, CCRN, FAEN <i>Netherlands</i>
	Kristen Cline, BSN, RN, CEN, CPEN, CFRN, CTRN, TCRN <i>South Dakota</i>
	Chris Dellinger, MBA, BSN, RN, FAEN <i>West Virginia</i>
	Terry M. Foster, MSN, RN, CEN, CPEN, CCRN, TCRN, FAEN <i>Kentucky</i>
	Gordon Gillespie, PhD, DNP, RN, CEN, CNE, CPEN, PHCNS- BC, FAEN, FAAN <i>Ohio</i>
	Ryan Oglesby, PhD, MHA, RN, CEN, CFRN, NEA-BC <i>Florida</i>
	Jennifer Schmitz, MSN, EMT-P, CEN, CPEN, CNML, FNP-C, NE-BC <i>Maine</i>
Emerging Professional	Mica David, BSN, RN, CEN <i>Georgia</i>
Chief Executive Officer	Nancy MacRae, MS <i>Illinois</i>
Parliamentarian	Jim Slaughter, JD, CPP-T, PRP
Legal Counsel	Kimberly Pendo



Standing Rules of Procedure of the ENA General Assembly

Due to recommendations of health officials, Stay at Home restrictions, and the impossibility of holding a traditional in-person General Assembly, the following Standing Rules governing the virtual 2020 General Assembly are recommended for adoption by the ENA Board of Directors, upon advice of ENA's Legal Counsel and Parliamentarian:

1. The 2020 General Assembly shall be conducted using the LUMI platform.
2. The General Assembly order of business shall be limited to a president address/state of the association, discussion, and debate/vote of proposals.
3. Delegates and alternates shall attend all General Assembly meetings and complete the post General Assembly evaluation in order to receive a certificate of service.

RESOLUTIONS

4. Resolutions may be authored and submitted by the ENA Board of Directors, ENA committees, the *Journal of Emergency Nursing* Editorial Board, a state council or chapter, or by a voting ENA member, as outlined in the ENA General Assembly Standing Rules of Procedure.
5. The submission deadline for resolutions shall be May 11, 2020.
6. The General Assembly may consider resolutions received after the published deadline by a two-thirds vote, provided all other criteria have been met.

COMPOSITION

7. State council delegates shall be apportioned based on the ratio of members in the state or territory to the total ENA membership as of May 15 in accordance with the ENA bylaws. International delegates shall be allocated in accordance with the ENA bylaws. ENA headquarters will send necessary information for designating delegates, alternate delegates and state captains to state councils.
8. Each state council must formally register delegates and alternate delegates in the state council's online management area with the ENA headquarters no later than June 25, 2020.
9. The state captain shall be selected as soon as possible but no later than 75 days prior to the General Assembly.
10. The ENA Immediate Past President shall oversee the credentials process.
11. A member registered as an alternate delegate may be transferred to delegate status, provided that no state delegation exceeds the maximum number of delegates allotted. All delegate changes shall be submitted to ENA headquarters by September 1, 2020.



RESOLUTIONS & BYLAWS PROPOSALS

12. The author or designee shall be given the right to speak on a proposal first at the Reference Hearing for up to two (2) minutes; such time shall not be counted in the total time for debate.
13. Amendments to resolutions or bylaws proposals from the delegation will not be permitted.
14. Following the Reference Hearing, the Resolutions Committee may propose amendments to resolutions and bylaws proposals and shall determine resolutions or proposed bylaws amendments to be placed on a consent agenda.
15. The Resolutions Committee shall determine the order of consideration of action items that have been submitted for the debate and vote portion of General Assembly.
16. Amendments to proposals shall be made available to the delegates as soon as possible after the amendments have been compiled by the Resolutions Committee following the reference hearings.

DEBATE

17. After being recognized, delegates and ENA past presidents shall give their name and affiliation before beginning to speak.
18. A delegate may request that an individual without speaking rights be allowed to speak. A majority vote shall be required to grant the request.
19. No delegate shall speak more than once on the same item, nor longer than one (1) minute.
20. Debate shall alternate "pro" and "con," as much as possible, and each delegate shall be allowed only one turn to speak in each queue. If an amendment or other debatable motion is made that takes priority over the pending question, the existing queue will be saved and a new queue will be opened. Once that priority motion is completed, the previous queue will be reopened and debate will resume on the pending question.
21. The total debate time allotted for each bylaws amendment or resolution shall be ten (10) minutes. If there are speakers in the queue when the debate time expires, the chair shall take a vote on whether to extend debate for an additional five minutes.
22. No motions shall be permitted from the floor.



23. The Resolutions Committee shall be authorized to correct article and section designations, punctuation and references in the Bylaws, Election Rules, and General Assembly Standing Rules of Procedure as may be necessary to reflect the intent of the General Assembly.
24. The draft General Assembly minutes shall be sent electronically to all state captains and the ENA Board of Directors for a 10-day review and comment period. The minutes shall be subsequently approved by the Resolutions Committee.
25. The status of resolutions adopted by the General Assembly will be made available to the ENA membership through ENA publications.

Proposal to Amend Bylaws

Proposal Number: GA20-01

Title: Proposal to Amend the ENA Bylaws

Article and Section: See Attached Revisions

Current bylaws language:

See attached current ENA Bylaws.

Proposed changes:

See attached proposed revised ENA Bylaws.

Bylaws language if adopted:

N/A

Rationale:

As identified in the strategic plan, ENA strives to employ best practices in leadership and governance. Accordingly, to ensure we have the best processes in place to identify and develop future leaders to help lead ENA into the future, the Board created a Leadership Development and Selection Task Force.

The Board worked to appoint a broad-based task force in early 2019. The members of the task force are a mix of current and past leaders who worked closely with key stakeholders to help build a plan for the future. The members of the task force are as follows:

- AnnMarie Papa, Past President, Chairperson of the Task Force
- Jeff Solheim, 2019 Board Member
- Todd Haines, State President
- David Samuelson, Nominations and Election Member
- Tresa Zielinski, Member-at-Large
- Ron Kraus, 2020 Board Member

The task force was charged with the following:

- Conduct an environmental scan to gather input on best practices in elections processes
- Identify opportunities to improve leadership development and succession planning
- Evaluate alternatives to ENA's current elections process, including the optimal structure for the nominations and elections committee (as it is the committee tasked with this key component of ENA's governance structure).

The Leadership Development and Selection Task Force conducted an environmental scan to gather input on best practices in elections processes and ways to identify opportunities to improve candidate development and succession planning. The task force convened numerous sessions to gather member input on the process and draft recommendations were sent to all ENA members in February 2020 to provide the membership with the opportunity to review and comment on the task force's recommendations before finalizing.

As a result of this process, the task force identified recommendations in four main areas: (i) call for candidates process, (ii) the role of the Nominations and Elections Committee, (iii) candidate selection process; and (iv)

Proposal to Amend Bylaws

additional opportunities. Set forth below is a summary of the task force's findings and recommendations.

- Nominations and Elections Committee
 - Members of the Nominations and Elections Committee to be appointed rather than elected
 - Appointment would reduce the conflict of interest inherent in the committee managing their own election.
- Officer Elections
 - Holding noncompetitive elections for officers is considered a leading practice. Providing the Board with the ability to elect the officers creates the opportunity for addressing and fulfilling competency, composition and diversity objectives. Having the Board elect the officers reduces the likelihood that unselected members in competitive elections become disengaged, and results in a competency-based system. Modifying the approach to officer elections provides the opportunity for decisions to be made based on Board member performance, such as participation, preparation and contribution in Board meetings and decisions. The choice for the future leadership remains with members through the general election process but allows for those closest to the situation to determine the best candidates for leadership.
- Term Limits
 - Term limits encourage increased opportunity for diversity and inclusion in leadership. Bringing in new Board members on a regular basis helps prevent stagnation and provides ENA the opportunity for increased member engagement..
- Unfilled Terms/Vacancies
 - The organization invests heavily in the onboarding of new Board members to ensure strength of leadership. It typically takes a year for a new Board member to develop full competency in their role and the value of that investment is often lost at the end of a one-year term.

The final version of the Leadership Development and Selection Task Force's recommendations were approved by the ENA Board of Directors at its March 2020 meeting. As the recommendations include items that require the amendment of the bylaws in order to adopt, the following bylaws amendments are presented to the Assembly for approval.

Author(s):

2020 ENA Board of Directors

Supporter(s)

AnnMarie Papa, ENA #65692

Jeff Solheim, ENA #100942

Todd Haines, ENA #774122

David Samuelson, ENA #453790

Tresa Zielinski, ENA #1405151

Leadership Development and Selection Task Force Recommendation

As identified in the strategic plan, ENA strives to employ best practices in leadership and governance. Accordingly, to ensure we have the best processes in place to identify and develop future leaders to help lead ENA into the future, the Board approved the creation of a Leadership Development and Selection Task Force in February 2019. The task force has conducted an environmental scan to gather input on best practices in elections processes and ways to identify opportunities to improve candidate development and succession planning.

Based on best practices and key findings, the task force evaluated alternatives to ENA's current elections process, including the optimal structure for the committee tasked with this key component of ENA's governance structure. The task force identified recommendations in the areas of the call for candidates process, the role of the Nominations and Elections Committee and the selection process. Those recommendations are summarized below:

Call for Candidates Process

Conduct a Gap Analysis of the Current Board

Recommendation

- A gap analysis will be conducted on the demographics and competencies possessed by the Board.

Rationale

- Best practices indicate that a balanced board based on key competencies provides strength in leadership. Conducting the analysis will determine the experience, career segment, etc. of the current Board and identify key areas for inclusion in the call for candidates.

Call Process

Recommendation

- The process for candidate application would be a self-nominating, open call for candidates. Detailed criteria for candidates will be included based on the gap analysis to ensure diversity and inclusivity within our membership.

Rationale

- A self-nomination process allows an inclusive opportunity for all potential candidates interested in serving their professional organization. Publishing a detailed list of criteria provides clear expectations for candidates regarding the competencies needed to round out the Board.

Current Competencies

Recommendation

- The competencies will be updated with modifications. The competencies will remain a living document that is managed by the Nominations and Elections Committee with input and approval by the ENA Board.

Rationale

- Periodic review of the competencies will ensure the right competencies are in place to ensure strong organizational leadership. The current competencies have been in place for 5 years and a review is warranted.

Role of the Nominations and Elections Committee

Structure

Recommendation

- The Nominations and Election Committee would be appointed by the ENA Board of Directors to ensure a diverse group of the most qualified members are selected.

Rationale

- This appointment process would reduce the conflict of interest with the committee managing their own election as well as helping ensure the most qualified members of the Nominations and Elections Committee are appointed.

Purpose

Recommendation

- The committee's key purpose would be candidate recruitment, selection and development.

Rationale

- Best practice indicates the importance of a dedicated group to ensure the development and availability of future leaders for the sustained success of an organization. It is important that the role of the committee is to develop, solicit and ensure the best candidates are selected to meet the future needs of the organization.

Authority

Recommendation

- Candidate vetting will be done based on competencies, key criteria and a formal interview process. The Nominations and Elections Committee has the authority to formally vet candidates in order to present a contested slate of qualified candidates to the ENA Board of Directors for approval. It is possible that not all candidates that apply will make the final slate of candidates.

Rationale

- The committee should utilize a systematic assessment process to ensure candidates meet the identified competencies required for the Board. This extends beyond minimum requirements. It is important to have a strategic approach to recruitment, including identifying and cultivating potential talent and having a willingness to say no to candidates who do not align with Board recruitment needs.

Selection Process

Who Votes

Recommendation

- The membership will elect the ENA Board of Director candidates.
- The ENA Board of Directors will elect the officer positions.

Rationale

- One of the core privileges of ENA membership is the right to choose who sits on the association's Board of Directors. Maintaining the members right to vote is an important way to make an investment in ENA's future.
- Holding noncompetitive elections for officers is considered a leading practice. This approach to Board selection provides the opportunity for addressing competency, composition and diversity objectives. Having the Board select the officer roles reduces the likelihood that unselected members in competitive elections become disengaged, and results in a competency-based system. In noncompetitive elections, the leadership

slates officers based on alignment of competencies with desired strategic needs. (*Building Better Association Boards, 2019*)

- Modifying the approach to officer elections provides the opportunity for decisions to be made based on Board member performance, such as participation, preparation and contribution in Board meetings and decisions. The choice for the future leadership remains with members through the general election process but allows for those closest to the situation to determine the best candidates for leadership.

Additional Opportunities

Term Limits

Recommendation

- Term limits should be instituted for Board service.

Rationale

- Term limits encourage increased opportunity for diversity and inclusion in leadership. Bringing in new board members on a regular basis helps keep away stagnation and provides the board with opportunities for renewal.

Eliminate Unfilled Terms (1 Year)

Recommendation

- Eliminate unfilled terms resulting in each new Board member having a three-year term.

Rationale

- The organization invests heavily in the onboarding of new board members to ensure strength of leadership. It typically takes a year for a new Board member to develop full competency in their role and the value of that investment is often lost at the end of a one year term.

Reference:

Brown, W., & Engle, M. (2019). *Building Better Association Boards: Advancing Performance Through Nomination, Recruitment, and Selection Process*.

**BYLAWS
EMERGENCY NURSES ASSOCIATION**

**ARTICLE I
NAME**

The name of this organization shall be the Emergency Nurses Association (ENA), a not-for-profit corporation incorporated in the State of Illinois. ENA shall have and continuously maintain in the State of Illinois a registered office and a registered agent whose office is identical with such registered office, and may have such other offices within or outside of the State of Illinois as the Board of Directors may determine.

**ARTICLE II
OBJECT**

Section 1. Purpose

The purposes for which the corporation is organized are educational, within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended ("IRC"), including but not limited to the advancement of emergency nursing through education and public awareness.

Section 2. Rules

The following rules shall conclusively bind ENA and all persons acting for or on behalf of it:

- A. No part of the net earnings of ENA shall inure to the benefit of, or be distributed to, its directors, officers, committee members or other private persons, except that ENA shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth above.
- B. No substantial part of the activities of ENA shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and ENA shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf or in opposition to any candidate for public office. Notwithstanding any provision of these Bylaws, ENA shall not carry on any activity not permitted to be carried on by:
 - i. a corporation exempt from federal income tax under Section 501(c)(3) of the IRC (or the corresponding provision of any future United States Internal Revenue Law); or
 - ii. a corporation, contributions to which are deductible under Section 170(c)(2) of the IRC (or the corresponding provision of any future United States Internal Revenue Law).

Section 3. Official Publication

The official publication shall be the *Journal of Emergency Nursing (JEN)*, which shall reflect the purpose, mission objectives and positions of ENA.

**ARTICLE III
MEMBERS**

Section 1. Responsibilities of Membership

Each member has the responsibility to support the purpose, mission, vision, values and objectives of ENA.

Section 2. Classifications and Criteria. Membership may be granted to any individual who (i) abides by these bylaws, the ENA Code of Ethics, and such other policies, rules and regulations as ENA may adopt; and (ii) meets the criteria for membership set forth in one of the following categories:

- A. Voting Members – voting members shall be classified as national, international, senior and military ("Voting Members"). Voting Members shall have the right to vote, hold elected office, serve on the Board of Directors, serve on committees, and attend ENA's meetings and social functions.
 - 1. National membership may be granted to any individual who is a professional registered

- nurse licensed in the United States or its territories.
2. International membership may be granted to any individual who is a professional registered nurse licensed (or the equivalent thereto) outside of the United States or its territories.
3. Senior membership may be granted to a professional registered nurse who is age 65 or older and licensed in the United States or its territories.
4. Military membership may be granted to a professional registered nurse licensed in the United States or its territories who is currently serving or has been honorably discharged or retired from the United States Armed Forces including Army, Navy, Marine Corps, Air Force, Coast Guard, and Reserve Components.
- B. Nonvoting Members – nonvoting members shall be classified as affiliate, student and honorary ("Nonvoting Members"). Nonvoting Members shall be entitled to serve on ENA committees and attend ENA member meetings and social functions.
 1. Affiliate membership may be granted to any individual who shares interest in and supports the purpose, mission and objectives of ENA but does not otherwise meet the criteria for voting membership in ENA.
 2. Student membership may be granted to any individual enrolled in a primary nursing education program leading to eligibility for licensure as a professional registered nurse.
 3. Honorary membership may be awarded to an individual meeting such criteria as shall be determined by the president and the Board of Directors.

Section 3. Dues and Finance

- A. The initial and annual dues for all ENA members and the time for paying such dues, and other assessments, if any, shall be determined by the Board of Directors. Under special circumstances, the Board of Directors, or its designee(s), may waive the annual dues and/or assessments for any member or category of members.
- B. The membership of any member who is in default of payment of dues or assessments for more than three (3) months, or otherwise becomes ineligible for membership, shall be terminated automatically, according to such rules or procedures as the Board of Directors or its designee(s) shall establish, unless such termination is delayed by the Board of Directors or its designee(s).
- C. Members who have resigned or been terminated for non-payment of dues may only be reinstated (i) if no more than three (3) months has elapsed since the date of termination; (ii) upon payment of delinquent dues; and (iii) in accordance with such rules as may from time to time be established by the Board of Directors. Former members not meeting the requirements for reinstatement must reapply for membership.
- D. Each state council and chapter shall receive an annual allocation for each dues paying member within the state or chapter.
- E. A surcharge may be added to the dues in some states by the state's request.

Section 4. Disciplinary Action

- A. **Grounds for Discipline.** ENA may discipline a member for any of the following reasons:
 - i. Failure to comply with these Bylaws, the ENA Code of Ethics, or any of ENA's rules or regulations;
 - ii. Conviction of a felony or a crime related to, or arising out of, the practice of nursing or involving moral turpitude;
 - iii. Suspension, revocation, or forfeiture by any state, province, or country of the member's right to practice as a nurse; or
 - iv. Immoral, dishonorable, or unprofessional conduct considered prejudicial to the best interests of, or inconsistent with, the purposes of ENA.
- B. **Procedures.** Discipline may include, but not be limited to, censure, suspension, probation, and expulsion. Disciplinary action may be taken provided that a statement of the charges shall have been sent by certified mail to the last recorded address of the member at least fifteen (15) days before final action is to be taken. This statement shall be accompanied by a

notice of the time and place of the meeting at which the charges shall be considered, and the member shall have the opportunity to appear in person and/or to be represented by counsel and to present any defense to such charges before action is taken by ENA. Such disciplinary actions shall be conducted in accordance with such additional procedures as may be established by the Board of Directors.

ARTICLE IV OFFICERS

Section 1. Officers

- A. There shall be three officers: President, President-Elect, and Secretary/Treasurer (the "Officers"). The term of office shall commence January 1 each year and terminate on December 31, or until such time as their successors are duly elected, qualified and take office. The President-Elect shall succeed to the office of president at the conclusion of the term. Officers shall exercise the duties and responsibilities required of a member of the Board of Directors and such additional duties and responsibilities set forth below. No two (2) offices may be held simultaneously by the same person.
- B. **President.** The President shall be ENA's principal elected officer and shall, in general, supervise ENA's business affairs, subject to the direction and control of the Board of Directors, by communicating with the Chief Staff Officer as necessary regarding ENA's business. The President shall be a member, without vote, of all councils and committees with the exception of the Nominations and Elections Committee and except as otherwise provided by these bylaws. The President shall (i) serve as the Chair of the Finance Committee; (ii) serve as ENA's official representative and spokesperson, except as otherwise provided by the Board of Directors; (iii) appoint representatives to ENA's affiliated organizations and other positions as necessary; (iv) fill, subject to the approval of the Board of Directors, vacancies on ENA's committees; and (v) in general, perform all duties customarily incident to the office of President and such other duties as may be prescribed by the Board of Directors. The President shall succeed to the office of immediate past president upon expiration of the President's term of office.
- C. **President-Elect.** The President-Elect shall assist the President and shall substitute for the President when required. The President-Elect shall appoint chairs and members of committees, and a Board of Directors liaison to each committee for the year following his/her term in office as President-Elect subject to Board approval and shall in general, perform all duties customarily incident to the office of President-Elect and such other duties as may be prescribed by the Board of Directors. The President-Elect shall succeed to the office of President upon expiration of the President's term of office, or in the event of the death, resignation, removal, or incapacity of the President.
- D. **Secretary/Treasurer.** The Secretary/Treasurer shall be the principal financial officer and secretary of ENA and shall perform all duties traditionally incident to the offices of Secretary and Treasurer and such other duties as may be assigned by the President or the Board of Directors. The duties of the Secretary/Treasurer may be assigned by the Board of Directors in whole or in part to the Chief Staff Officer, or his or her designee(s).

Section 2. Officer Qualifications & Election

- A. Each Officer must be a Voting Member and must have been a Voting Member during each of the previous five years immediately prior to submitting a candidate application their election. Each candidate for President-Elect and Secretary/Treasurer must be currently serving as a voting member of the Board of Directors at the time of election.
- B. The Board of Directors will elect the Officers prior to the election of the elected directors (as defined below). The names of the complete Board of Directors (i.e. the Officers and elected directors) for the following year will be announced simultaneously.
- B. Each candidate for President-Elect and Secretary/Treasurer must currently serve as a voting

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member of the Board of Directors

~~C. Each candidate must submit to, and pass as acceptable, a limited background check.~~

Section 3. Election

~~A. In the event of a tie vote for the positions of President-Elect and Secretary/Treasurer, there shall be a second balloting of ENA membership.~~

~~B. All directors who are elected as officers shall have their unexpired terms of office filled by the candidates who receive the next highest number of votes; the candidate receiving the highest number of votes shall receive the position with the longest term.~~

~~C. A candidate for an officer position who is not elected shall continue to serve the remaining unexpired years of the original term as a director.~~

Section 43. Vacancies

A. If the office of President becomes vacant, the President-Elect shall succeed to the office of President for the unexpired term and shall subsequently serve the one-year term of office of President to which elected. In such case, the immediate past president may remain as immediate past president for a second year or the office may remain vacant for that year as approved by a majority vote of the Board of Directors.

B. A vacancy in the office of President-Elect may be filled by the Board of Directors with a current member of the Board of Directors, or remain vacant as approved by a majority vote of the Board of Directors. If the vacancy is filled, the President-Elect shall not automatically assume the office of president for the subsequent term.

C. In the event that the office of President and President-Elect are vacated during the same year, the Board of Directors shall appoint an acting president to serve until the next scheduled election, at which time an election will be held for both the Board will elect both a President and President-Elect.

D. A vacancy in the office of Secretary/Treasurer may be filled by the Board of Directors with a current member of the Board of Directors or remain vacant as approved by a majority vote by the entire of the Board of Directors.

ARTICLE V MEETINGS

Section 1. General Assembly

A. The General Assembly shall be composed of delegates from states territories, federal districts, and international delegates representing the international members.

B. All Delegates, Alternates, International Delegates, and the International Alternate must be Voting Members of ENA in good standing. ENA's officers and directors may not serve as Delegates, Alternates, International Delegates or the International Alternate.

C. The General Assembly shall be composed of 700 delegates apportioned as follows:

1. Neither the state nor international membership shall be allocated fewer than two delegates, one of whom shall serve as captain.
2. In addition to the voting delegates, there shall be one nonvoting alternate delegate.
3. The remaining delegates will be allocated to the:
 - a. states based on the percentage the state's membership is to the national membership, as determined annually as outlined in procedures; and
 - b. international membership based on the percentage the international membership is to the national membership, as determined annually as outlined in procedures.

D. International delegates will be selected by a point system developed by the board of directors; the system will be administered and overseen by the ENA national office. The members receiving the highest number of points will be selected.

E. In addition to the delegate and international allocation, ENA past presidents who are Voting Members of ENA in good standing may attend, speak and vote at General Assembly (except as otherwise set forth below).

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F. Members of the Board of Directors, including Past Presidents serving on the Board, may attend and speak at all meetings of the General Assembly but may not vote.

Section 2. Authority

The General Assembly is responsible for communicating member needs, providing feedback, and input on issues relating to the practice of emergency nursing to the Board of Directors. The General Assembly shall also approve, revise, or amend these bylaws in accordance with Article XIV, and receive reports of the Board of Directors, committees and other volunteer groups, receive reports of the findings of the annual financial audit, and transact such other appropriate business as may properly come before the meeting.

Section 3. Quorum

The presence of a majority of the total voting delegates who have completed credentialing procedures shall constitute a quorum for the transaction of business at any duly called session of the General Assembly.

Section 4. Annual Meeting and Special Meetings of the Voting Members

- A. The annual meeting of ENA's Voting Members ("Annual Meeting") will be held in conjunction with the General Assembly.
- B. Special meetings of ENA's Voting Members may be called (i) at the request of the President or any five (5) members of the Board of Directors; (ii) at the written request of two-thirds (2/3) of ENA's Voting Members; or (iii) by resolution of the ENA board of directors.
- C. Notice of any annual or special meeting of the Voting Members shall state the time, date, place, and purpose of the meeting, and shall be delivered not more than sixty (60) and not less than thirty (30) days prior to the date of such meeting, unless otherwise required by applicable law.
- D. The lesser of (i) ten percent (10%) of ENA's eligible Voting Members; or (ii) one hundred (100) eligible voting members shall constitute a quorum for the transaction of business at any duly called meeting of the Voting Members, provided that if less than a quorum is present, a majority of the Voting Members present may adjourn the meeting to another time without further notice.
- E. The act of a majority or more of the Voting Members present (in person or by proxy) at a duly called meeting at which a quorum is present shall be the act of the Voting Members, unless the act of a greater number is required by law, the Articles of Incorporation, or these bylaws.
- F. Mail/Electronic Voting. Voting by mail or electronic means shall be permitted to the full extent permitted by the Illinois General Not For Profit Corporation Act of 1986, as amended (the "Act"), for any item of business properly coming before the Voting Members. A mail or electronic vote of the Voting Members may be called by the Board of Directors.

ARTICLE VI BOARD OF DIRECTORS

Section 1. Composition

The Board of Directors shall be composed of ~~twelve (12) directors as follows: three Officers, seven elected directors ("elected directors"), the immediate past president serving as an ex-officio member for one year, and the Chief Staff Officer serving as a non-voting ex officio member. No member may run for more than one nationally elected position at a time. No member may hold more than one nationally elected position at a time.~~

Section 2. Authority

The Board of Directors is ENA's official governing body and is responsible for the management of ENA's affairs and shall have supervision, control and direction of ENA. To that end, it shall:

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- Perform all duties entrusted to officers and directors of a corporation;
- Debate and determine ENA policy;
- Oversee ENA's business and financial affairs;
- Determine ENA's policies in accordance with these bylaws;
- Have discretion in the disbursement of ENA's funds;
- Adopt such rules and regulations for the conduct of its business as it shall deem advisable;
- Appoint such agents as it may consider necessary;
- Provide direction to and control over all ENA's committees, unless specifically provided otherwise in these bylaws;
- Provide strategic direction for ENA; and
- Provide leadership for all of the component divisions of ENA.

Section 3. Qualifications

- A. Directors must be a Voting Member in good standing and must have been a Voting Member in good standing during each of the previous five years immediately prior to submitting a candidate application.
- B. Candidates must have attended at least one ENA General Assembly within the previous three years.
- C. Each candidate must submit to, and pass as acceptable, a limited background check.
- D. Candidates shall have served in an elected or committee position on the local, state or national level within the previous five years.

Section 4. Term of Office / Term Limits

- A. Directors (with the exception of the immediate past president) shall serve for a three-year term of office, or until such time as their successors are duly elected, qualified and take office. In order to provide for staggered terms, at least two and no more than three directors shall be elected each year. The term of office shall commence on January 1 each year following the election and terminate on December 31.
- B. The immediate past president shall serve a one-year term in office, or until such time as their successor takes office.
- C. No person may serve on the Board of Directors for more than six (6) years, not including any time served to fill a vacancy.
- D. Notwithstanding anything set forth herein to the contrary, the immediate past president and any director elected to serve as an Officer shall remain on the Board of Directors until the conclusion of their term in such office despite the fact such person may have served for the maximum number of permitted years.

Section 5. Elections

Elections shall be held annually. All Voting Members shall have the opportunity to elect ~~officers and directors~~ the elected directors by ballot. Balloting may be by electronic means. Candidates receiving the highest number of votes for each position shall be declared elected. In the event of a tie for the director positions, lots shall be drawn.

Section 6. Meetings of the Board of Directors

- A. Regular meetings of the board shall be held at least quarterly as determined by the board. At least ten days' notice shall be given to all members of the board.
- B. Special meetings shall be held as called by the President or any three members of the board. At least three days' notice shall be given to all members of the board.
- C. Meetings may be held in person or by electronic means, provided that all participants can hear and speak to one another at the same time.
- D. A majority of the voting members of the Board of Directors shall constitute a quorum for all meetings. All decisions of the Board of Directors require an affirmative vote of a majority of

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- the Board of Directors present and voting at a meeting at which a quorum is present.
- E. Voting members of Board of Directors (including the President) have the right and responsibility to actively participate in board meetings by making motions, speaking in debate and voting (unless precluded by a conflict of interest, as determined in accordance with ENA's conflict of interest policy).
- F. Any action requiring a vote of the Board of Directors may be taken without a meeting if a written consent, setting forth the action taken, is approved by all of the members of the Board of Directors entitled to vote with respect to the subject matter thereof.

Section 7. Vacancy

A vacancy that occurs in the position of an elected director shall be filled in the following manner:

- A. ~~A vacancy with twelve months or less remaining in the unexpired term will not be filled. —~~
- B. ~~If there is more than twelve months left in the unexpired term and the vacancy occurs:~~
- ~~(i) vacancy occurs between January 1 and before the completion of the current year's election the vacancy shall be filled by the person receiving the next highest number of votes in the previous year's election; or with the term ending December 31.~~
- ~~(ii) If the vacancy occurs after the current year's election and there is more than six months left in the unexpired term, the vacancy shall be filled by the person receiving the next highest number of votes in the current year's election; or with the term ending December 31 of the following year.~~
- ~~(iii) due to the election of such director as an Officer, the vacancy will be filled in the current year's election for the unexpired balance of the term they are elected to fill.~~
- ~~C. If all such person(s) decline to serve or, if there were no additional candidates for that office during the most recently concluded election, or if the vacancy occurs with fewer than six months left in the unexpired term, the vacancy shall not be filled.~~
- C. Directors elected to fill a vacancy shall hold office for the balance of the term they are filling or until such time as their successor is duly elected, qualified and takes office.

Section 8. Resignation and Removal

Any director may resign at any time by giving written notice to the President. Any member of the Board of Directors may be removed in accordance with the provisions of law and the Illinois General Not For Profit Corporation Act of 1986, as amended, by the persons entitled to elect such director, whenever, in their judgment, the best interests of ENA would be served by such removal.

Section 9. Indemnification

ENA shall indemnify, as set forth below, and to the fullest extent to which it is empowered to do so by the Illinois General Not For Profit Corporation Act of 1986, as amended, or any other applicable laws as may from time to time be in effect, any person who, by reason of being or having been a director, officer, employee, or agent of ENA, or who is or was serving at the request of ENA as a director, officer, employee, or agent of another corporation, partnership, joint venture, trust, or other enterprise, and who was or is a party or is threatened to be made a party to any threatened, pending, or completed action, suit, or proceeding.

ARTICLE VII CHIEF STAFF OFFICER

The administrative and day-to-day operation of ENA shall be the responsibility of a salaried staff head or firm employed or appointed by, and responsible to, the Board of Directors. The salaried

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staff head or, in the case of a firm, chief staff officer retained by the firm shall have such title as shall be determined by the Board of Directors and shall be referred to in these bylaws as the "Chief Staff Officer". The Chief Staff Officer shall have the authority to execute contracts on behalf of ENA and as approved by the Board of Directors. The Chief Staff Officer may carry out such other duties as may be specified by the Board of Directors. The Chief Staff Officer (or firm, as applicable) shall employ and may terminate the employment of staff necessary to carry out the work of ENA. The Chief Staff Officer shall serve as a non-voting ex officio member of the Board of Directors.

ARTICLE VIII CONSTITUENT DIVISIONS

Section 1. State Councils

Voting Members of ENA who are licensed or reside within a particular state, commonwealth, federal district, territory or possession of the United States (the "territory") may be organized as a constituent of ENA (each of which is referred to as a "State Council"). The Board of Directors may authorize the establishment of State Councils which shall:

- i. be organized and operated in accordance with these Bylaws, and such additional rules, regulations and policies as may be adopted by the Board of Directors from time to time;
- ii. fulfill criteria for affiliation as may be established by the Board of Directors from time to time;
- iii. enter into charter agreements with ENA, as determined by ENA;
- iv. be issued a charter by ENA; and
- v. organize and conduct their activities in such a manner as to establish its fundamental alignment and functional compatibility with ENA.

A State Council's general purposes and objectives shall be complementary and consistent, on a local basis within its territory, with those of ENA and the State Council will advance the general and specific purposes of ENA within its territory. All members of a State Council must be members of ENA in good standing.

Section 2. Application for Recognition as a State Council

The Board of Directors, or its designee(s) shall adopt an application form and procedures to facilitate the consideration of applicants seeking to be organized as a State Council. All applicants must complete the application form and submit the application, along with the designated fee, if any, to ENA's administrative office. The Board of Directors or its designee(s), shall review the application of all applicants and determine, based on the criteria set forth in these bylaws and such other guidelines as the Board of Directors may prescribe, if applicants meet the qualifications necessary for recognition as a State Council.

- A. Charters for the operation of State Councils may be revoked by the Board of Directors according to due process procedures established by the Board of Directors. Upon revocation of a State Council's charter, the State Council immediately shall remit all of its funds (after satisfying any existing debts or obligations) and records to ENA national office.
- B. No State Council or other entity shall use ENA's name or trademarks in any manner whatsoever unless duly authorized to do so by ENA pursuant to the terms of a written agreement or policy.
- C. ENA shall fund chartered State Councils pursuant to a formula determined by the Board of Directors based on the State Council's membership.
- D. Each State Council shall be incorporated as a not-for-profit corporation, have a Board of Directors, officers and bylaws in such form as shall be approved by the Board of Directors or its designee(s). State Councils must maintain voting membership categories and criteria that are identical to ENA's. Any changes to a State Council's bylaws require the prior written approval of the Board of Directors, or its designees(s).
- E. Each State Council may hold such meetings as it deems appropriate.
- F. Members may belong to only one State Council.
- G. A member of a State Council may transfer to another State Council by written request to

433 ENA.

434 Section 3. Local Chapters

435 Voting members of the same State Council that are licensed or reside within the same local
436 geographical territory may be organized as a local chapter by the State Council and each such
437 local chapter will be an integral part of such State Council (i.e., it shall operate and function as a
438 committee or special interest group of the State Council) (each of which is referred to as a
439 "Local Chapter"). The name, boundaries, eligibility requirements for Local Chapters, and policies
440 and procedures governing their operations, shall be determined by the State Council, subject to
441 the prior written approval of the Board of Directors, and such rules and policies as may be
442 adopted by the Board of Directors from time to time. A State Council is responsible for
443 overseeing and managing the activities of its Local Chapters and shall have the right to disband
444 or dissolve any Local Chapter it creates, with appropriate due cause.

445
446 **ARTICLE IX**
447 **COMMITTEES**

448 Section 1. Committees

449 ENA shall have committees appointed by the Board of Directors in sufficient numbers necessary
450 to address mission objectives, and positions of ENA. The President or an appointed board
451 liaison, as well as the Chief Staff Officer, shall serve as non-voting members of all committees,
452 except the Nominations and Elections Committee or as otherwise set forth below.

453
454 Section 2. Standing Committees

455 **A. Executive Committee.**

- 456 i. The Executive Committee shall consist of the President, President-Elect, and the
457 Secretary/Treasurer. The Chief Staff Officer shall be invited to attend and participate in
458 all meetings, without vote, of the Executive Committee, except those held in executive
459 session. The President shall serve as the chair of the Executive Committee.
- 460 ii. The Executive Committee shall have the authority to perform the business and functions
461 of the Board of Directors in between meetings of the Board of Directors, except as
462 otherwise set forth in these bylaws or Illinois General Not for Profit Corporation Act of
463 1986, as amended, reporting to the Board of Directors any action taken; but the
464 delegation of authority to the Executive Committee shall not operate to relieve the Board
465 of Directors or any individual officer or member of the Board of Directors of any
466 responsibility imposed by law.
- 467 iii. The Executive Committee shall meet in person or by conference call upon the request of
468 the chair or a majority of the Executive Committee. Each member shall have one (1)
469 vote. Two (2) members of the Executive Committee shall constitute a quorum for the
470 transaction of business at any duly called meeting of the Executive Committee; provided
471 when less than a quorum is present at said meeting, a majority of the members present
472 may adjourn the meeting without further notice. The act of a majority of the members
473 present at a duly called meeting at which a quorum is present shall be the act of the
474 Executive Committee.
- 475 iv. Any action requiring a vote of the Executive Committee may be taken without a meeting
476 if consent, setting forth the action taken, is approved by all the members of the Executive
477 Committee entitled to vote with respect to the subject matter thereof.

478 **B. Other Standing Committees.**

479 The Board of Directors may establish other standing committees to support ENA's purposes.
480 Such committees shall include, at a minimum, a Finance Committee, Resolutions
481 Committee, and Nominations and Elections Committee. If a standing committee has the
482 authority of the Board of Directors, a majority of its members must be comprised of
483 Directors. Except otherwise set forth in these bylaws: the action establishing a standing
484 committee shall set forth the committee's purpose, authority and required qualifications for
485 membership on the committee;

- i. the Board of Directors, or its designee(s), shall determine the composition of ENA's standing committee;
- ii. at all meetings of any standing committee, a majority of the members thereof shall constitute a quorum for the transaction of business;
- iii. a majority vote by committee members present and voting at a meeting at which a quorum is present shall be required for any action;
- iv. vacancies in the membership of a standing committee shall be filled by appointments made in the same manner as the original appointments to that committee;
- v. the Board of Directors or its designee(s) shall develop and approve policies and procedures for the operation of all standing committees. All such policies shall be subject to the approval of the Board of Directors; and
- vi. all standing committees shall report to the Board of Directors.

Finance Committee.

1. The Finance Committee shall be composed of the President, the President-Elect, the Secretary/Treasurer and the immediate past president. The Chief Staff Officer shall serve as a nonvoting ex-officio member.
2. The Finance Committee shall:
 - a. Oversee the financial planning and management of ENA by ensuring that all fiscal aspects are in order;
 - b. Oversee the independence of ENA's audit functions and its compliance with legal and ethical standards;
 - c. Oversee investment of funds; and
 - d. Make fiscal recommendations to the Board of Directors.

Resolutions Committee.

1. The Resolutions Committee shall be composed of six members serving three-year terms, two appointed each year by the ENA President-Elect and ratified by the Board of Directors. The committee chairperson shall be appointed by the President-Elect and ratified by the Board of Directors from among the continuing members on the committee. The terms shall be staggered and shall commence at the adjournment of the General Assembly meeting following appointment.
2. The Resolutions Committee shall solicit, review, and present resolutions and proposed bylaws amendments to the General Assembly.

Nominations and Elections Committee.

1. Composition
 - a. The Nominations and Elections Committee shall consist of seven Voting Members ~~appointed by the Board of Directors elected to serve on the Nominations and Elections Committee. The Board will work to ensure a diverse group of the most qualified Voting Members are appointed to serve on the Nominations and Elections Committee. in the ENA national election: one member from each of six regions who has not previously served on the Board of Directors, and one member who has served on the Board of Directors. Nominations and Elections Committee members may only represent the region in which they hold a voting membership.~~
 - ~~b. The six regions shall be established by Nominations and Elections Committee policy. Each region shall be composed of states with geographic proximity and relatively equal membership distribution.~~
 - c. A Nominations and Elections Committee chairperson shall be elected each year by the incoming Nominations and Elections Committee.
2. Qualifications
 - a. ~~Candidates must be a~~Members of the Nominations and Elections Committee must ~~be~~ Voting Members in good standing and must have been a Voting Member during each of the previous five years immediately prior to ~~submitting their candidate~~

- 540 ~~application their appointment.~~
- 541 b. ~~Members of the Nominations and Elections Committee must~~ Candidates shall have
- 542 served in an elected or committee position on the local, state or national level within
- 543 the previous five years.
- 544 c. Candidates must also have attended at least one ENA General Assembly within the
- 545 previous three years.
- 546 d. Members of the Nominations and Elections Committee may not run for or serve in
- 547 any ENA board position during their tenure on the Nominations and Elections
- 548 Committee, and may not serve more than two consecutive ~~elected~~ terms on the
- 549 Nominations and Elections Committee.
- 550 3. ~~Elections~~Term
- 551 a. ~~Elections for the Nominations and Elections Committee shall be held annually.~~
- 552 Members shall serve for a three-year term with terms beginning January 1 and
- 553 ending on December 31, or until such time as their successors are duly elected,
- 554 qualified and take office. ~~The terms of the members of the Nominations and~~
- 555 ~~Elections Committee shall be staggered such that qualified new Voting~~
- 556 ~~Members~~members shall be ~~elected~~appointed to serve on the Nominations and
- 557 Elections Committee each year.
- 558 ~~b. All Voting Members shall have the opportunity to elect Nominations and Elections~~
- 559 ~~Committee members by ballot from all regions. Candidates receiving the highest~~
- 560 ~~number of votes shall be declared elected. In the event of a tie vote for a position on~~
- 561 ~~the committee, lots shall be drawn.~~
- 562 4. Overview
- 563 a. The Nominations and Elections Committee ~~is responsible for recruiting, selecting and~~
- 564 ~~developing qualified candidates to run for election to the Board of Directors.~~
- 565 ~~b. The Nominations and Elections Committee will issue an open call for candidates and~~
- 566 ~~all qualified members interested in running for an elected director position may apply~~
- 567 ~~in accordance with such procedures as may be adopted by the Board of Directors.~~
- 568 ~~The open call for candidates will be accompanied by the required criteria and~~
- 569 ~~competencies against which all applications will be evaluated.~~
- 570 ~~b. The Nominations and Elections Committee will vet candidates based on the~~
- 571 ~~competencies and criteria established by the Board of Directors and will conduct a~~
- 572 ~~formal interview and assessment process in accordance with such procedures as~~
- 573 ~~may be established by the Board of Directors. has general oversight of the national~~
- 574 ~~election. The Committee shall solicit and mentor potential candidates and review~~
- 575 ~~national candidate applications.~~
- 576 b. The Nominations and Elections Committee will provide periodic updates to the Board
- 577 of Directors regarding the progress of their charges.
- 578 c. The Nominations and Elections Committee shall present a qualified slate of
- 579 ~~contested~~ candidates to the Board of Directors for its review and ~~discussion approval~~
- 580 prior to presenting the slate to the membership. ~~Upon approval of the slate,~~
- 581 ~~Following such review and discussion,~~ the Nominations and Elections Committee
- 582 shall present the ~~approved~~ slate to the membership through publication in such ENA
- 583 publications as determined by the Board of Directors or its designee(s).
- 584 5. Vacancies
- 585 a. A vacancy in the chairperson position shall be filled by a majority vote of the
- 586 Nominations and Elections Committee.
- 587 b. ~~A vacancy of a committee member shall be filled by the Board of Directors; provided;~~
- 588 ~~however, if less than six (6) months remain of the unexpired term the Nominating~~
- 589 ~~Committee may advise the Board not to fill the vacancy. y the candidate who~~
- 590 ~~received the next highest number of votes from that region or as the past board~~
- 591 ~~member in the most recently completed election.~~
- 592 ~~c. In the event of a committee member vacancy from an uncontested election, a~~
- 593 ~~qualified candidate must be nominated and elected by the state council presidents of~~

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the region affected by the vacancy according to the Nominations and Elections Committee election process, meeting the same requirements set forth in the bylaws as any potential candidate.

d. The committee position may remain vacant as approved by the Nominations and Elections Committee if less than six months remain of the unexpired term.

6. Transition. Notwithstanding anything set forth above to the contrary, all members of the Nominations and Elections Committee elected prior to January 1, 2021 will complete their full term on the Nominations and Elections Committee.

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ARTICLE X DISSOLUTION

In the event of dissolution of ENA, the net assets of the corporation shall be applied and all liabilities and obligations shall be paid, satisfied, and discharged, or adequate provision shall be made thereof. After payment of all liabilities and obligations, all remaining assets shall be distributed to an organization or organizations organized and operated exclusively for charitable, educational, scholastic or scientific purposes as shall at the time qualify as tax exempt under Sections 501(c)(3) of the Internal Revenue Code of 1986, as amended (or the corresponding provision of any future United States Internal Revenue Law).

ARTICLE XI FINANCE

Section 1. Contracts

The Board of Directors may authorize any officer or officers, agent or agents of ENA, in addition to the officers so authorized by these bylaws, to enter into any contract or execute and deliver any instrument in the name of and on behalf of ENA, and such authority may be general or confined to specific instances.

Section 2. Payment of Indebtedness

All checks, drafts or other orders for the payment of money, notes or other evidences of indebtedness issued in the name of ENA shall be signed by such officer or officers, agent or agents of ENA and in such manner as shall from time to time be determined by resolution of the Board of Directors. In the absence of such determination by the Board of Directors, such instruments shall be signed by the Secretary/Treasurer and countersigned by the President.

Section 3. Deposits

All of ENA's funds shall be deposited to the credit of ENA in such banks, trust companies, or other depositories as the Board of Directors may select.

Section 4. Bonding

The Board of Directors shall provide for the bonding of such officers and employees of ENA as it may from time to time determine.

Section 5. Gifts

The Board of Directors may accept on behalf of ENA any contribution, gift, bequest or devise for ENA's general purposes or for any special purpose.

Section 6. Books and Records

ENA shall keep correct and complete books and records of account and shall also keep minutes of the proceedings of the Board of Directors. The books and accounts of ENA shall be audited annually by accountants selected by the Board of Directors.

Section 7. Fiscal Year

ENA's fiscal year shall be determined by the Board of Directors.

ARTICLE XII
WAIVER OF NOTICE AND ELECTRONIC COMMUNICATION

Section 1. Waiver of Notice

Whenever any notice is required to be given under applicable law, the Articles of Incorporation or these bylaws, waiver thereof in writing signed by the person or persons entitled to such notice, whether before or after the time stated therein, shall be deemed equivalent to the giving of such notice.

Section 2. Electronic Communication

Unless otherwise prohibited by law, (i) any action to be taken or notice delivered under these bylaws may be taken or transmitted by e-mail or other electronic means; and (ii) any action or approval required to be written or in writing may be transmitted or received by e-mail or other electronic means.

ARTICLE XIII
PARLIAMENTARY AUTHORITY

The rules contained in the current edition of *Robert's Rules of Order Newly Revised* shall govern ENA in all cases to which they are applicable and in which they are not inconsistent with these bylaws and any special rules of order ENA may adopt.

ARTICLE XIV
AMENDMENT

Section 1. Proposals

Amendments to the bylaws may be proposed by the Board of Directors, state councils or under the signature of ten Voting Members in good standing. Amendments proposed by a State Council or under the signature of ten Voting Members in good standing are subject to the prior review and approval the Board of Directors to assure that proposed amendments (i) are consistent with ENA's purposes, mission, values and objectives; (ii) have no adverse financial impact on ENA; (iii) do not create inconsistencies or conflicts with other provisions of the bylaws; and (iv) do not conflict with the requirements of ENA's Articles of Incorporation or federal or state law. Proposed amendments approved or introduced by the Board of Directors (collectively, "Approved Proposals") will be presented to the General Assembly in accordance with the provisions set forth below in this article XIV.

Section 2. Submission Deadline

Proposed amendments must be submitted to ENA national office at least 120 days prior to the General Assembly.

Section 3. Notice

Notice of all Approved Proposals will be submitted to the membership at least 60 days prior to the General Assembly. Publication of the Approved Proposals in an ENA publication or on the ENA website shall constitute adequate notice.

Section 4. Vote

In order to be adopted, Approved Proposals must be approved by a two-thirds vote of the delegates present and voting at a meeting of the General Assembly.

BYLAWS EMERGENCY NURSES ASSOCIATION

ARTICLE I NAME

The name of this organization shall be the Emergency Nurses Association (ENA), a not-for-profit corporation incorporated in the State of Illinois. ENA shall have and continuously maintain in the State of Illinois a registered office and a registered agent whose office is identical with such registered office, and may have such other offices within or outside of the State of Illinois as the Board of Directors may determine.

ARTICLE II OBJECT

Section 1. Purpose

The purposes for which the corporation is organized are educational, within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended ("IRC"), including but not limited to the advancement of emergency nursing through education and public awareness.

Section 2. Rules

The following rules shall conclusively bind ENA and all persons acting for or on behalf of it:

- A. No part of the net earnings of ENA shall inure to the benefit of, or be distributed to, its directors, officers, committee members or other private persons, except that ENA shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth above.
- B. No substantial part of the activities of ENA shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and ENA shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf or in opposition to any candidate for public office. Notwithstanding any provision of these Bylaws, ENA shall not carry on any activity not permitted to be carried on by:
 - i. a corporation exempt from federal income tax under Section 501(c)(3) of the IRC (or the corresponding provision of any future United States Internal Revenue Law); or
 - ii. a corporation, contributions to which are deductible under Section 170(c)(2) of the IRC (or the corresponding provision of any future United States Internal Revenue Law).

Section 3. Official Publication

The official publication shall be the *Journal of Emergency Nursing (JEN)*, which shall reflect the purpose, mission objectives and positions of ENA.

ARTICLE III MEMBERS

Section 1. Responsibilities of Membership

Each member has the responsibility to support the purpose, mission, vision, values and objectives of ENA.

Section 2. Classifications and Criteria. Membership may be granted to any individual who (i) abides by these bylaws, the ENA Code of Ethics, and such other policies, rules and regulations as ENA may adopt; and (ii) meets the criteria for membership set forth in one of the following categories:

- A. Voting Members – voting members shall be classified as national, international, senior and military ("Voting Members"). Voting Members shall have the right to vote, hold elected office, serve on the Board of Directors, serve on committees, and attend ENA's meetings and social functions.
 - 1. National membership may be granted to any individual who is a professional registered nurse licensed in the United States or its territories.

2. International membership may be granted to any individual who is a professional registered nurse licensed (or the equivalent thereto) outside of the United States or its territories.
 3. Senior membership may be granted to a professional registered nurse who is age 65 or older and licensed in the United States or its territories.
 4. Military membership may be granted to a professional registered nurse licensed in the United States or its territories who is currently serving or has been honorably discharged or retired from the United States Armed Forces including Army, Navy, Marine Corps, Air Force, Coast Guard, and Reserve Components.
- B. Nonvoting Members – nonvoting members shall be classified as affiliate, student and honorary (“Nonvoting Members”). Nonvoting Members shall be entitled to serve on ENA committees and attend ENA member meetings and social functions.
1. Affiliate membership may be granted to any individual who shares interest in and supports the purpose, mission and objectives of ENA but does not otherwise meet the criteria for voting membership in ENA.
 2. Student membership may be granted to any individual enrolled in a primary nursing education program leading to eligibility for licensure as a professional registered nurse.
 3. Honorary membership may be awarded to an individual meeting such criteria as shall be determined by the president and the Board of Directors.

Section 3. Dues and Finance

- A. The initial and annual dues for all ENA members and the time for paying such dues, and other assessments, if any, shall be determined by the Board of Directors. Under special circumstances, the Board of Directors, or its designee(s), may waive the annual dues and/or assessments for any member or category of members.
- B. The membership of any member who is in default of payment of dues or assessments for more than three (3) months, or otherwise becomes ineligible for membership, shall be terminated automatically, according to such rules or procedures as the Board of Directors or its designee(s) shall establish, unless such termination is delayed by the Board of Directors or its designee(s).
- C. Members who have resigned or been terminated for non-payment of dues may only be reinstated (i) if no more than three (3) months has elapsed since the date of termination; (ii) upon payment of delinquent dues; and (iii) in accordance with such rules as may from time to time be established by the Board of Directors. Former members not meeting the requirements for reinstatement must reapply for membership.
- D. Each state council and chapter shall receive an annual allocation for each dues paying member within the state or chapter.
- E. A surcharge may be added to the dues in some states by the state’s request.

Section 4. Disciplinary Action

- A. **Grounds for Discipline.** ENA may discipline a member for any of the following reasons:
 - i. Failure to comply with these Bylaws, the ENA Code of Ethics, or any of ENA’s rules or regulations;
 - ii. Conviction of a felony or a crime related to, or arising out of, the practice of nursing or involving moral turpitude;
 - iii. Suspension, revocation, or forfeiture by any state, province, or country of the member’s right to practice as a nurse; or
 - iv. Immoral, dishonorable, or unprofessional conduct considered prejudicial to the best interests of, or inconsistent with, the purposes of ENA.
- B. **Procedures.** Discipline may include, but not be limited to, censure, suspension, probation, and expulsion. Disciplinary action may be taken provided that a statement of the charges shall have been sent by certified mail to the last recorded address of the member at least fifteen (15) days before final action is to be taken. This statement shall be accompanied by a notice of the time and place of the meeting at which the charges shall be considered, and the member shall have the opportunity to appear in person and/or to be represented by

counsel and to present any defense to such charges before action is taken by ENA. Such disciplinary actions shall be conducted in accordance with such additional procedures as may be established by the Board of Directors.

ARTICLE IV OFFICERS

Section 1. Officers

- A. There shall be three officers: President, President-Elect, and Secretary/treasurer. The term of office shall commence January 1 each year and terminate on December 31, or until such time as their successors are duly elected, qualified and take office. The President-Elect shall succeed to the office of president at the conclusion of the term. Officers shall exercise the duties and responsibilities required of a member of the Board of Directors and such additional duties and responsibilities set forth below.
- B. **President.** The President shall be ENA's principal elected officer and shall, in general, supervise ENA's business affairs, subject to the direction and control of the Board of Directors, by communicating with the Chief Staff Officer as necessary regarding ENA's business. The President shall be a member, without vote, of all councils and committees with the exception of the Nominations and Elections Committee and except as otherwise provided by these bylaws. The President shall (i) serve as the Chair of the Finance Committee; (ii) serve as ENA's official representative and spokesperson, except as otherwise provided by the Board of Directors; (iii) appoint representatives to ENA's affiliated organizations and other positions as necessary; (iv) fill, subject to the approval of the Board of Directors, vacancies on ENA's committees; and (v) in general, perform all duties customarily incident to the office of President and such other duties as may be prescribed by the Board of Directors. The President shall succeed to the office of immediate past president upon expiration of the President's term of office.
- C. **President-Elect.** The President-Elect shall assist the President and shall substitute for the President when required. The President-Elect shall appoint chairs and members of committees, and a Board of Directors liaison to each committee for the year following his/her term in office as President-Elect subject to Board approval and shall in general, perform all duties customarily incident to the office of President-Elect and such other duties as may be prescribed by the Board of Directors. The President-Elect shall succeed to the office of President upon expiration of the President's term of office, or in the event of the death, resignation, removal, or incapacity of the President.
- D. **Secretary/Treasurer.** The Secretary/Treasurer shall be the principal financial officer and secretary of ENA and shall perform all duties traditionally incident to the offices of Secretary and Treasurer and such other duties as may be assigned by the President or the Board of Directors. The duties of the Secretary/Treasurer may be assigned by the Board of Directors in whole or in part to the Chief Staff Officer, or his or her designee(s).

Section 2. Officer Qualifications

- A. Each officer must be a Voting Member and must have been a Voting Member during each of the previous five years immediately prior to submitting a candidate application.
- B. Each candidate for President-Elect and Secretary/Treasurer must currently serve as a voting member of the Board of Directors.
- C. Each candidate must submit to, and pass as acceptable, a limited background check.

Section 3. Election

- A. In the event of a tie vote for the positions of President-Elect and Secretary/Treasurer, there shall be a second balloting of ENA membership.
- B. All directors who are elected as officers shall have their unexpired terms of office filled by the candidates who receive the next highest number of votes; the candidate receiving the highest number of votes shall receive the position with the longest term.
- C. A candidate for an officer position who is not elected shall continue to serve the remaining unexpired years of the original term as a director.

Section 4. Vacancies

- A. If the office of President becomes vacant, the President-Elect shall succeed to the office of President for the unexpired term and shall subsequently serve the one-year term of office of President to which elected. In such case, the immediate past president may remain as immediate past president for a second year or the office may remain vacant for that year.
- B. A vacancy in the office of President-Elect may be filled by a current member of the Board of Directors, or remain vacant as approved by a majority vote of the Board of Directors. If the vacancy is filled, the President-Elect shall not automatically assume the office of president for the subsequent term.
- C. In the event that the office of President and President-Elect are vacated during the same year, the Board of Directors shall appoint an acting president to serve until the next scheduled election, at which time an election will be held for both President and President-Elect.
- D. A vacancy in the office of Secretary/Treasurer may be filled by a current member of the Board of Directors or remain vacant as approved by a majority vote by the entire Board of Directors.

ARTICLE V MEETINGS

Section 1. General Assembly

- A. The General Assembly shall be composed of delegates from states territories, federal districts, and international delegates representing the international members.
- B. All Delegates, Alternates, International Delegates, and the International Alternate must be Voting Members of ENA in good standing. ENA's officers and directors may not serve as Delegates, Alternates, International Delegates or the International Alternate.
- C. The General Assembly shall be composed of 700 delegates apportioned as follows:
 1. Neither the state nor international membership shall be allocated fewer than two delegates, one of whom shall serve as captain.
 2. In addition to the voting delegates, there shall be one nonvoting alternate delegate.
 3. The remaining delegates will be allocated to the:
 - a. states based on the percentage the state's membership is to the national membership, as determined annually as outlined in procedures; and
 - b. international membership based on the percentage the international membership is to the national membership, as determined annually as outlined in procedures.
- D. International delegates will be selected by a point system developed by the board of directors; the system will be administered and overseen by the ENA national office. The members receiving the highest number of points will be selected.
- E. In addition to the delegate and international allocation, ENA past presidents who are Voting Members of ENA in good standing may attend, speak and vote at General Assembly (except as otherwise set forth below).
- F. Members of the Board of Directors, including Past Presidents serving on the Board, may attend and speak at all meetings of the General Assembly but may not vote.

Section 2. Authority

The General Assembly is responsible for communicating member needs, providing feedback, and input on issues relating to the practice of emergency nursing to the Board of Directors. The General Assembly shall also approve, revise, or amend these bylaws in accordance with Article XIV, and receive reports of the Board of Directors, committees and other volunteer groups, receive reports of the findings of the annual financial audit, and transact such other appropriate business as may properly come before the meeting.

Section 3. Quorum

The presence of a majority of the total voting delegates who have completed credentialing procedures shall constitute a quorum for the transaction of business at any duly called session

of the General Assembly.

Section 4. Annual Meeting and Special Meetings of the Voting Members

- A. The annual meeting of ENA's Voting Members ("Annual Meeting") will be held in conjunction with the General Assembly.
- B. Special meetings of ENA's Voting Members may be called (i) at the request of the President or any five (5) members of the Board of Directors; (ii) at the written request of two-thirds (2/3) of ENA's Voting Members; or (iii) by resolution of the ENA board of directors.
- C. Notice of any annual or special meeting of the Voting Members shall state the time, date, place, and purpose of the meeting, and shall be delivered not more than sixty (60) and not less than thirty (30) days prior to the date of such meeting, unless otherwise required by applicable law.
- D. The lesser of (i) ten percent (10%) of ENA's eligible Voting Members; or (ii) one hundred (100) eligible voting members shall constitute a quorum for the transaction of business at any duly called meeting of the Voting Members, provided that if less than a quorum is present, a majority of the Voting Members present may adjourn the meeting to another time without further notice.
- E. The act of a majority or more of the Voting Members present (in person or by proxy) at a duly called meeting at which a quorum is present shall be the act of the Voting Members, unless the act of a greater number is required by law, the Articles of Incorporation, or these bylaws.
- F. Mail/Electronic Voting. Voting by mail or electronic means shall be permitted to the full extent permitted by the Illinois General Not For Profit Corporation Act of 1986, as amended (the "Act"), for any item of business properly coming before the Voting Members. A mail or electronic vote of the Voting Members may be called by the Board of Directors.

ARTICLE VI BOARD OF DIRECTORS

Section 1. Composition

The Board of Directors shall be composed of the following: three officers, seven directors, the immediate past president serving as an ex-officio member for one year, and the Chief Staff Officer serving as a non-voting ex officio member. No member may run for more than one nationally elected position at a time. No member may hold more than one nationally elected position at a time.

Section 2. Authority

The Board of Directors is ENA's official governing body and is responsible for the management of ENA's affairs and shall have supervision, control and direction of ENA. To that end, it shall:

- Perform all duties entrusted to officers and directors of a corporation;
- Debate and determine ENA policy;
- Oversee ENA's business and financial affairs;
- Determine ENA's policies in accordance with these bylaws;
- Have discretion in the disbursement of ENA's funds;
- Adopt such rules and regulations for the conduct of its business as it shall deem advisable;
- Appoint such agents as it may consider necessary;
- Provide direction to and control over all ENA's committees, unless specifically provided otherwise in these bylaws;
- Provide strategic direction for ENA; and
- Provide leadership for all of the component divisions of ENA.

Section 3. Qualifications

- A. Directors must be a Voting Member in good standing and must have been a Voting Member in good standing during each of the previous five years immediately prior to submitting a candidate application.
- B. Candidates must have attended at least one ENA General Assembly within the previous three years.
- C. Each candidate must submit to, and pass as acceptable, a limited background check.
- D. Candidates shall have served in an elected or committee position on the local, state or national level within the previous five years.

Section 4. Term of Office

Directors (with the exception of the immediate past president) shall serve for a three-year term of office, or until such time as their successors are duly elected, qualified and take office. In order to provide for staggered terms, at least two and no more than three directors shall be elected each year. The term of office shall commence on January 1 each year following the election and terminate on December 31.

Section 5. Elections

Elections shall be held annually. All Voting Members shall have the opportunity to elect officers and directors by ballot. Balloting may be by electronic means. Candidates receiving the highest number of votes for each position shall be declared elected. In the event of a tie for the director positions, lots shall be drawn.

Section 6. Meetings of the Board of Directors

- A. Regular meetings of the board shall be held at least quarterly as determined by the board. At least ten days' notice shall be given to all members of the board.
- B. Special meetings shall be held as called by the President or any three members of the board. At least three days' notice shall be given to all members of the board.
- C. Meetings may be held in person or by electronic means, provided that all participants can hear and speak to one another at the same time.
- D. A majority of the voting members of the Board of Directors shall constitute a quorum for all meetings. All decisions of the Board of Directors require an affirmative vote of a majority of the Board of Directors present and voting at a meeting at which a quorum is present.
- E. Voting members of Board of Directors (including the President) have the right and responsibility to actively participate in board meetings by making motions, speaking in debate and voting (unless precluded by a conflict of interest, as determined in accordance with ENA's conflict of interest policy).
- F. Any action requiring a vote of the Board of Directors may be taken without a meeting if a written consent, setting forth the action taken, is approved by all of the members of the Board of Directors entitled to vote with respect to the subject matter thereof.

Section 7. Vacancy

A vacancy that occurs in the position of director shall be filled in the following manner:

- A. If the vacancy occurs between January 1 and before the completion of the current year's election the vacancy shall be filled by the person receiving the next highest number of votes in the previous year's election with the term ending December 31.
- B. If the vacancy occurs after the current year's election and there is more than six months left in the unexpired term, the vacancy shall be filled by the person receiving the next highest number of votes in the current year's election with the term ending December 31 of the following year.
- C. If all such persons decline to serve, if there were no additional candidates for that office during the most recently concluded election, or if the vacancy occurs with fewer than six months left in the unexpired term, the vacancy shall not be filled.

Section 8. Resignation and Removal

Any director may resign at any time by giving written notice to the President. Any member of the

Board of Directors may be removed in accordance with the provisions of law and the Illinois General Not For Profit Corporation Act of 1986, as amended, by the persons entitled to elect such director, whenever, in their judgment, the best interests of ENA would be served by such removal.

Section 9. Indemnification

ENA shall indemnify, as set forth below, and to the fullest extent to which it is empowered to do so by the Illinois General Not For Profit Corporation Act of 1986, as amended, or any other applicable laws as may from time to time be in effect, any person who, by reason of being or having been a director, officer, employee, or agent of ENA, or who is or was serving at the request of ENA as a director, officer, employee, or agent of another corporation, partnership, joint venture, trust, or other enterprise, and who was or is a party or is threatened to be made a party to any threatened, pending, or completed action, suit, or proceeding.

ARTICLE VII CHIEF STAFF OFFICER

The administrative and day-to-day operation of ENA shall be the responsibility of a salaried staff head or firm employed or appointed by, and responsible to, the Board of Directors. The salaried staff head or, in the case of a firm, chief staff officer retained by the firm shall have such title as shall be determined by the Board of Directors and shall be referred to in these bylaws as the "Chief Staff Officer". The Chief Staff Officer shall have the authority to execute contracts on behalf of ENA and as approved by the Board of Directors. The Chief Staff Officer may carry out such other duties as may be specified by the Board of Directors. The Chief Staff Officer (or firm, as applicable) shall employ and may terminate the employment of staff necessary to carry out the work of ENA. The Chief Staff Officer shall serve as a non-voting ex officio member of the Board of Directors.

ARTICLE VIII CONSTITUENT DIVISIONS

Section 1. State Councils

Voting Members of ENA who are licensed or reside within a particular state, commonwealth, federal district, territory or possession of the United States (the "territory") may be organized as a constituent of ENA (each of which is referred to as a "State Council"). The Board of Directors may authorize the establishment of State Councils which shall:

- i. be organized and operated in accordance with these Bylaws, and such additional rules, regulations and policies as may be adopted by the Board of Directors from time to time;
- ii. fulfill criteria for affiliation as may be established by the Board of Directors from time to time;
- iii. enter into charter agreements with ENA, as determined by ENA;
- iv. be issued a charter by ENA; and
- v. organize and conduct their activities in such a manner as to establish its fundamental alignment and functional compatibility with ENA.

A State Council's general purposes and objectives shall be complementary and consistent, on a local basis within its territory, with those of ENA and the State Council will advance the general and specific purposes of ENA within its territory. All members of a State Council must be members of ENA in good standing.

Section 2. Application for Recognition as a State Council

The Board of Directors, or its designee(s) shall adopt an application form and procedures to facilitate the consideration of applicants seeking to be organized as a State Council. All applicants must complete the application form and submit the application, along with the designated fee, if any, to ENA's administrative office. The Board of Directors or its designee(s), shall review the application of all applicants and determine, based on the criteria set forth in these bylaws and such other guidelines as the Board of Directors may prescribe, if applicants

- meet the qualifications necessary for recognition as a State Council.
- A. Charters for the operation of State Councils may be revoked by the Board of Directors according to due process procedures established by the Board of Directors. Upon revocation of a State Council's charter, the State Council immediately shall remit all of its funds (after satisfying any existing debts or obligations) and records to ENA national office.
 - B. No State Council or other entity shall use ENA's name or trademarks in any manner whatsoever unless duly authorized to do so by ENA pursuant to the terms of a written agreement or policy.
 - C. ENA shall fund chartered State Councils pursuant to a formula determined by the Board of Directors based on the State Council's membership.
 - D. Each State Council shall be incorporated as a not-for-profit corporation, have a Board of Directors, officers and bylaws in such form as shall be approved by the Board of Directors or its designee(s). State Councils must maintain voting membership categories and criteria that are identical to ENA's. Any changes to a State Council's bylaws require the prior written approval of the Board of Directors, or its designees(s).
 - E. Each State Council may hold such meetings as it deems appropriate.
 - F. Members may belong to only one State Council.
 - G. A member of a State Council may transfer to another State Council by written request to ENA.

Section 3. Local Chapters

Voting members of the same State Council that are licensed or reside within the same local geographical territory may be organized as a local chapter by the State Council and each such local chapter will be an integral part of such State Council (i.e., it shall operate and function as a committee or special interest group of the State Council) (each of which is referred to as a "Local Chapter"). The name, boundaries, eligibility requirements for Local Chapters, and policies and procedures governing their operations, shall be determined by the State Council, subject to the prior written approval of the Board of Directors, and such rules and policies as may be adopted by the Board of Directors from time to time. A State Council is responsible for overseeing and managing the activities of its Local Chapters and shall have the right to disband or dissolve any Local Chapter it creates, with appropriate due cause.

ARTICLE IX COMMITTEES

Section 1. Committees

ENA shall have committees appointed by the Board of Directors in sufficient numbers necessary to address mission objectives, and positions of ENA. The President or an appointed board liaison, as well as the Chief Staff Officer, shall serve as non-voting members of all committees, except the Nominations and Elections Committee or as otherwise set forth below.

Section 2. Standing Committees

A. Executive Committee.

- i. The Executive Committee shall consist of the President, President-Elect, and the Secretary/Treasurer. The Chief Staff Officer shall be invited to attend and participate in all meetings, without vote, of the Executive Committee, except those held in executive session. The President shall serve as the chair of the Executive Committee.
- ii. The Executive Committee shall have the authority to perform the business and functions of the Board of Directors in between meetings of the Board of Directors, except as otherwise set forth in these bylaws or Illinois General Not for Profit Corporation Act of 1986, as amended, reporting to the Board of Directors any action taken; but the delegation of authority to the Executive Committee shall not operate to relieve the Board of Directors or any individual officer or member of the Board of Directors of any responsibility imposed by law.
- iii. The Executive Committee shall meet in person or by conference call upon the request of the chair or a majority of the Executive Committee. Each member shall have one (1)

vote. Two (2) members of the Executive Committee shall constitute a quorum for the transaction of business at any duly called meeting of the Executive Committee; provided when less than a quorum is present at said meeting, a majority of the members present may adjourn the meeting without further notice. The act of a majority of the members present at a duly called meeting at which a quorum is present shall be the act of the Executive Committee.

- iv. Any action requiring a vote of the Executive Committee may be taken without a meeting if consent, setting forth the action taken, is approved by all the members of the Executive Committee entitled to vote with respect to the subject matter thereof.

B. Other Standing Committees.

The Board of Directors may establish other standing committees to support ENA's purposes. Such committees shall include, at a minimum, a Finance Committee, Resolutions Committee, and Nominations and Elections Committee. If a standing committee has the authority of the Board of Directors, a majority of its members must be comprised of Directors. Except otherwise set forth in these bylaws: the action establishing a standing committee shall set forth the committee's purpose, authority and required qualifications for membership on the committee;

- i. the Board of Directors, or its designee(s), shall determine the composition of ENA's standing committee;
- ii. at all meetings of any standing committee, a majority of the members thereof shall constitute a quorum for the transaction of business;
- iii. a majority vote by committee members present and voting at a meeting at which a quorum is present shall be required for any action;
- iv. vacancies in the membership of a standing committee shall be filled by appointments made in the same manner as the original appointments to that committee;
- v. the Board of Directors or its designee(s) shall develop and approve policies and procedures for the operation of all standing committees. All such policies shall be subject to the approval of the Board of Directors; and
- vi. all standing committees shall report to the Board of Directors.

Finance Committee.

1. The Finance Committee shall be composed of the President, the President-Elect, the Secretary/Treasurer and the immediate past president. The Chief Staff Officer shall serve as a nonvoting ex-officio member.
2. The Finance Committee shall:
 - a. Oversee the financial planning and management of ENA by ensuring that all fiscal aspects are in order;
 - b. Oversee the independence of ENA's audit functions and its compliance with legal and ethical standards;
 - c. Oversee investment of funds; and
 - d. Make fiscal recommendations to the Board of Directors.

Resolutions Committee.

1. The Resolutions Committee shall be composed of six members serving three-year terms, two appointed each year by the ENA President-Elect and ratified by the Board of Directors. The committee chairperson shall be appointed by the President-Elect and ratified by the Board of Directors from among the continuing members on the committee. The terms shall be staggered and shall commence at the adjournment of the General Assembly meeting following appointment.
2. The Resolutions Committee shall solicit, review, and present resolutions and proposed bylaws amendments to the General Assembly.

Nominations and Elections Committee.

1. Composition

- a. The Nominations and Elections Committee shall consist of seven Voting Members elected to serve on the Nominations and Elections Committee in the ENA national election: one member from each of six regions who has not previously served on the Board of Directors, and one member who has served on the Board of Directors. Nominations and Elections Committee members may only represent the region in which they hold a voting membership.
- b. The six regions shall be established by Nominations and Elections Committee policy. Each region shall be composed of states with geographic proximity and relatively equal membership distribution.
- c. A Nominations and Elections Committee chairperson shall be elected each year by the incoming Nominations and Elections Committee.
2. Qualifications
 - a. Candidates must be a Voting Member in good standing and must have been a Voting Member during each of the previous five years immediately prior to submitting their candidate application.
 - b. Candidates shall have served in an elected or committee position on the local, state or national level within the previous five years.
 - c. Candidates must also have attended at least one ENA General Assembly within the previous three years.
 - d. Members of the Nominations and Elections Committee may not run for or serve in any ENA board position during their tenure on the Nominations and Elections Committee, and may not serve more than two consecutive elected terms on the Nominations and Elections Committee.
3. Elections
 - a. Elections for the Nominations and Elections Committee shall be held annually. Members shall serve for a three-year terms with terms beginning January 1 and ending on December 31, or until such time as their successors are duly elected, qualified and take office. Voting Members shall be elected to serve on the Nominations and Elections Committee each year.
 - b. All Voting Members shall have the opportunity to elect Nominations and Elections Committee members by ballot from all regions. Candidates receiving the highest number of votes shall be declared elected. In the event of a tie vote for a position on the committee, lots shall be drawn.
4. Overview
 - a. The Nominations and Elections Committee has general oversight of the national election. The Committee shall solicit and mentor potential candidates and review national candidate applications.
 - b. The Nominations and Elections Committee will provide periodic updates to the Board of Directors regarding the progress of their charges.
 - c. The Nominations and Elections Committee shall present a qualified slate of candidates to the Board of Directors for its review and discussion prior to presenting the slate to the membership. Following such review and discussion, the Nominations and Elections Committee shall present the slate to the membership through publication in such ENA publications as determined by the Board of Directors or its designee(s).
5. Vacancies
 - a. A vacancy in the chairperson position shall be filled by a majority vote of the Nominations and Elections Committee.
 - b. A vacancy of a committee member shall be filled by the candidate who received the next highest number of votes from that region or as the past board member in the most recently completed election.
 - c. In the event of a committee member vacancy from an uncontested election, a qualified candidate must be nominated and elected by the state council presidents of the region affected by the vacancy according to the Nominations and Elections Committee election process, meeting the same requirements set forth in the bylaws

- 547 as any potential candidate.
- 548 d. The committee position may remain vacant as approved by the Nominations and
- 549 Elections Committee if less than six months remain of the unexpired term.
- 550

551 **ARTICLE X**

552 **DISSOLUTION**

553 In the event of dissolution of ENA, the net assets of the corporation shall be applied and all

554 liabilities and obligations shall be paid, satisfied, and discharged, or adequate provision shall be

555 made thereof. After payment of all liabilities and obligations, all remaining assets shall be

556 distributed to an organization or organizations organized and operated exclusively for charitable,

557 educational, scholastic or scientific purposes as shall at the time qualify as tax exempt under

558 Sections 501(c)(3) of the Internal Revenue Code of 1986, as amended (or the corresponding

559 provision of any future United States Internal Revenue Law).

560

561 **ARTICLE XI**

562 **FINANCE**

563 Section 1. Contracts

564 The Board of Directors may authorize any officer or officers, agent or agents of ENA, in addition

565 to the officers so authorized by these bylaws, to enter into any contract or execute and deliver

566 any instrument in the name of and on behalf of ENA, and such authority may be general or

567 confined to specific instances.

568

569 Section 2. Payment of Indebtedness

570 All checks, drafts or other orders for the payment of money, notes or other evidences of

571 indebtedness issued in the name of ENA shall be signed by such officer or officers, agent or

572 agents of ENA and in such manner as shall from time to time be determined by resolution of the

573 Board of Directors. In the absence of such determination by the Board of Directors, such

574 instruments shall be signed by the Secretary/Treasurer and countersigned by the President.

575

576 Section 3. Deposits

577 All of ENA's funds shall be deposited to the credit of ENA in such banks, trust companies, or

578 other depositories as the Board of Directors may select.

579

580 Section 4. Bonding

581 The Board of Directors shall provide for the bonding of such officers and employees of ENA as it

582 may from time to time determine.

583

584 Section 5. Gifts

585 The Board of Directors may accept on behalf of ENA any contribution, gift, bequest or devise for

586 ENA's general purposes or for any special purpose.

587

588 Section 6. Books and Records

589 ENA shall keep correct and complete books and records of account and shall also keep minutes

590 of the proceedings of the Board of Directors. The books and accounts of ENA shall be audited

591 annually by accountants selected by the Board of Directors.

592

593 Section 7. Fiscal Year

594 ENA's fiscal year shall be determined by the Board of Directors.

595

596

597 **ARTICLE XII**

598 **WAIVER OF NOTICE AND ELECTRONIC COMMUNICATION**

599

600 Section 1. Waiver of Notice

601 Whenever any notice is required to be given under applicable law, the Articles of Incorporation

or these bylaws, waiver thereof in writing signed by the person or persons entitled to such notice, whether before or after the time stated therein, shall be deemed equivalent to the giving of such notice.

Section 2. Electronic Communication

Unless otherwise prohibited by law, (i) any action to be taken or notice delivered under these bylaws may be taken or transmitted by e-mail or other electronic means; and (ii) any action or approval required to be written or in writing may be transmitted or received by e-mail or other electronic means.

ARTICLE XIII PARLIAMENTARY AUTHORITY

The rules contained in the current edition of *Robert's Rules of Order Newly Revised* shall govern ENA in all cases to which they are applicable and in which they are not inconsistent with these bylaws and any special rules of order ENA may adopt.

ARTICLE XIV AMENDMENT

Section 1. Proposals

Amendments to the bylaws may be proposed by the Board of Directors, state councils or under the signature of ten Voting Members in good standing. Amendments proposed by a State Council or under the signature of ten Voting Members in good standing are subject to the prior review and approval the Board of Directors to assure that proposed amendments (i) are consistent with ENA's purposes, mission, values and objectives; (ii) have no adverse financial impact on ENA; (ii) do not create inconsistencies or conflicts with other provisions of the bylaws; and (iv) do not conflict with the requirements of ENA's Articles of Incorporation or federal or state law. Proposed amendments approved or introduced by the Board of Directors (collectively, "Approved Proposals") will be presented to the General Assembly in accordance with the provisions set forth below in this article XIV.

Section 2. Submission Deadline

Proposed amendments must be submitted to ENA national office at least 120 days prior to the General Assembly.

Section 3. Notice

Notice of all Approved Proposals will be submitted to the membership at least 60 days prior to the General Assembly. Publication of the Approved Proposals in an ENA publication to on the ENA website shall constitute adequate notice.

Section 4. Vote

In order to be adopted , Approved Proposals must be approved by a two-thirds vote of the delegates present and voting at a meeting of the General Assembly.

Resolution GA20-02

TITLE: Hemorrhage Control Education in Schools

Whereas, Uncontrolled external bleeding is a major cause of preventable death in traumatic injury (Bulger et al, 2014);

Whereas, Bystander control of bleeding can significantly influence the survival chances of someone with traumatic injury (American College of Surgeons, 2015);

Whereas, The Hartford Consensus was created as a protocol for national policy to enhance survivability from active shooter and intentional mass casualty events in response to the active shooter disaster at Sandy Hook Elementary school in Newton, CT (American College of Surgeons, 2013); and

Whereas, There have been 558 incidents of gunfire on school grounds since 2013 resulting in 204 deaths and 412 injuries (Everytown for Gun Safety Support Fund, 2019).

Resolved, That the Emergency Nurses Association (ENA) issue a position statement or topic brief in support of inclusion of hemorrhage control education in high school; and

Resolved, That ENA partner with the American College of Surgeons, the Society of Trauma Nurses and other stakeholders to advocate for and support legislation to include hemorrhage control education in high school.

Resolution Background Information:

Uncontrolled bleeding is a major cause of preventable death due to trauma, and trauma remains one of the leading causes of death for people aged 1–19 years (Heron, 2019). Because school shootings are happening more frequently, education and training of the public is imperative. Often in the event of a school shooting a lockdown follows, delaying first responders from reaching the injured. When a person is bleeding, every minute counts. Most shooting events are over within 15 minutes, but someone can bleed to death within approximately five minutes (Jacobs et al., 2013) Educating and training high school students would help to save lives. “The key to improving survival in active shooter mass casualty incidents is expanding the pool of first responders” (American College of Surgeons, 2013, p.1).

Resolution GA 19-05, All Nurses Should be Permitted and Encouraged to Learn and Provide Hemorrhage Control, was approved by the General Assembly in 2019. It states, all nurses should be educated on hemorrhage control techniques as a public health and community safety need equal to CPR. The public should also have access to education on hemorrhage control and bleeding control kits in order to assist the community should the need arise.

According to *Education Week*, from 2018 to 2019 there were 49 school shootings resulting in 165 people killed or injured (43 killed) with over 19,965 students exposed to the events (Education Week, 2019a, 2019b). Everytown for Gun Safety Support Fund, a collaboration of education unions, The National Education Association, American Federation of Teachers, and the largest gun safety organization, tracks shooting incidents involving schools states, There have been at least 558 incidents of gunfire on school grounds since 2013. These incidents resulted in 204 deaths, including suicides, and 412 injuries (Everytown for Gun Safety Support Fund, 2019).

In the William S. Hart Union High School District in California two students with the help of their father, a physician, raised \$100,000 to supply the public schools with bleeding control kits. Those kits were used by

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staffers on November 14, 2019 at Saugus High School when a student shot five of his classmates, killing two students and then himself (Sandy West Kaiser Health News, 2019).

Bleeding Control Kits are not only life saving tools in the event of a mass shooting. In Georgia, a school nurse was credited with saving the life of a nine-year-old child after she fell, breaking her arm and severing an artery. She applied a tourniquet from the Stop the Bleed Kit she had received just 24 hours before (Forsyth County News, 2018).

As with CPR training and automated external defibrillators, bleeding control programs and equipment should also be available to the public (American College of Surgeons, 2013) Education and training of students will be beneficial to everyone in the community as they will take this knowledge with them and be empowered to respond in the event of uncontrolled bleeding regardless of the mechanism.

Relationship to ENA Bylaws, Mission, Vision, and Strategic Initiatives:

The ENA vision statement includes commitment to partner in efforts promoting community safety. This resolution supports research, development, and promulgation of an education program and provides resources from ENA to actively engage school systems, educators, and students. ENA's visibility is increased by a focus on an evidence-based response to community safety concerns. ENA is viewed as a primary provider of leadership, education, and research in matters of public health and safety.

Financial Consideration/Operations Impact:

The scope of work outlined in the resolved clauses has a fiscal impact of less than \$10,000. Upon final outcomes of General Assembly, initiatives will be evaluated for resource planning in alignment with ENA's strategic plan and operational goals.

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Resolution GA20-03

TITLE: Request for Emergency Nurses Association Organization to Facilitate Collaboration with the Occupational Therapist Organization(s)

Whereas, Emergency nurses work to identify those at risk of injury and educate patients, families, and communities on injury prevention strategies and resources (e.g., fall prevention and safe driving) (American College of Emergency Physicians [ACEP], American Geriatrics Society [AGS], Emergency Nurses Association [ENA], & Society for Academic Emergency Medicine [SAEM], 2013; ENA, n.d.-a, n.d.-b, n.d.-c, n.d.-d, 2014, 2017b, 2018, 2019; Blansfield, 2020);

Whereas, The credo in the Emergency Nurses Association's (ENA's) Strategic Plan speaks of "Inclusion and the contributions of nursing, in collaboration with healthcare partner's worldwide, help explore innovative solutions to the challenges of emergency care delivery" (ENA, n.d.-d);

Whereas, The *Geriatric Emergency Department Guidelines* white paper specifically recommends occupational therapists be included as part of the team in order to effectively implement outpatient care for those who do not meet requirements for hospital admission (ACEP, AGS, ENA, & SAEM, 2013);

Whereas, Occupational therapists (OTs) work to help people of all ages so they can participate in the "things that they want (and need) to do every day" (i.e., activities of daily living and safe driving) in both the in-patient and out-patient areas (American Occupational Therapy Association [AOTA], n.d.-b, n.d.-c);

Whereas, Falls and motor vehicle crashes are two types of preventable injury focused on by members of both organizations (ACEP, AGS, ENA, & SAEM, 2013; AOTA, n.d.-b, n.d.-c; ENA, n.d.-a, 2014, 2017b, 2018, 2019; Harley & Giordano, 2020);

Whereas, Emergency nurses and occupational therapists have similar goals of injury prevention, safety during activities of daily living, and improving patient outcomes (ACEP, AGS, ENA, & SAEM, 2013; AOTA, n.d.-b, n.d.-c; ENA, n.d.-a, n.d.-b, n.d.-c, 2014, 2017b, 2018, 2019, 2020; Harley & Giordano, 2020); and

Resolved, That the Emergency Nurses Association reach out to the occupational therapy professional organization(s) for the purpose of determining willingness to meet to increase awareness of each other's philosophies, goals, and activities related to injury prevention and improved patient outcomes;

Resolved, That ENA provides education on the role of occupational therapists and encourages collaboration between emergency nurses and occupational therapists on injury prevention, sharing of resources, and ensuring alignment especially related to fall prevention and safe driving.

Resolution Background Information:

Injury Prevention and Optimal Functioning In Patients Are Goals for Both Organizations

Many ENA and emergency nursing practice resources and references include information and education related to identification of risk for injury, injury prevention, and discharge planning approaches that lead to best patient outcomes (ACEP, AGS, ENA, & SAEM, 2013; ENA, n.d.-a, n.d.-b, n.d.-c, n.d.-d, 2014, 2017b, 2018, 2019; Blansfield, 2020). Two commonly addressed areas related to injury prevention involve falls and motor vehicle crashes. ENA's Trauma Nursing Core Course (TNCC) is a well-known example of this type of education (Blansfield, 2020). Descriptions of how to do a fall risk screen, assess for cognitive impairment, and observe/document when a patient does not appear to be doing well with activities of daily living are found in various documents located on the ENA Practice Resources page on the ENA web site, which proclaims: "Your

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one-stop shop for evidence-based emergency nursing resources to help you deliver safe practice and care” (ENA, n.d.-b, n.d.-c). Ambulating and documenting how well the patient tolerated their “test run” or “spin around the department” is something many emergency nurses have done, or delegated, to determine whether it is safe for the patient to be discharged. Sharing this information with the care provider, as well as making suggestions when a patient might benefit from admission or need further assistance at home when admission criteria are not met, is supported and recognized as “good teamwork” (ENA, 2014, 2019). ENA’s *Emergency Nursing Scope and Standards of Care* describes “best patient outcomes” as the goal in several areas throughout the document (ENA, 2017a), and ENA’s Strategic Plan notes that, when fulfilling community goals, it is necessary to include “advocacy strategies for injury prevention and public health issues” (ENA, 2020).

A search for occupational therapy organization websites revealed the American Occupational Therapy Association (AOTA) (<https://www.aota.org>) and the Association for Driving Rehabilitation Specialists (ADED) (<https://www.aded.net/>). Both organizations have goals related to injury prevention and improved patient outcomes (AOTA, n.d.-b, n.d.-c).

According to the AOTA website, the term “occupational therapy” is derived from its focus on helping patients with everyday activities – or “occupations” (AOTA, n.d.-c). The purpose of occupational therapy is to help people learn or relearn to do everyday activities from getting dressed to cooking, moving about, and even driving. While planning care for the patient, the occupational therapist (OT) considers the patient’s physical abilities (which parts of the body can and can’t move easily), as well as mental abilities (what information the brain can and can’t process) (AOTA, n.d.-a, n.d.-b, n.d.-c).

Occupational therapists not only work in the hospital providing services for inpatients, but they also interact with patients on an outpatient basis, including in the patient’s own home or vehicle (AOTA, n.d.-a, n.d.-b, n.d.-c; ADED, n.d.). They do this so the patient can practice where they will actually be carrying out their activities of daily living (ADLs): school, home, work, nursing home, or in the vehicle they use to get to these places. The occupational therapist asks the patient “What activities are important to you? Driving the car? Folding laundry? Cooking? Biking? Other activities?” The OT, then focus therapies to meet the patient’s goals, suggesting changes in approach to activities so the patient can continue to be active while remaining safe in their home and community. Occupational therapists can assess the home situation for safety, including fall risks. Grab bars in the shower, non-skid surfaces on stairs, and changes in lighting are examples of things an OT may suggest (AOTA, n.d.-b, n.d.-b).

Some occupational therapist can also assess how well the patient is able to manage their vehicle. They may take additional training to assess for physical and cognitive causes of unsafe driving. OT’s that focus on driving skills can become certified as Driver Rehabilitation Specialists (DRS) and often join the ADED Association as well as AOTA. Those with DRS training may identify and recommend adaptive devices (steering wheel extensions, special mirrors on the car, seat wedges, etc.) which enable the patient to continue driving safely. During driving evaluations, they may determine whether it is safer to recommend driving restrictions or loss of driving privileges. These recommendations are valued by driver licensing bureaus in many states (ADED, n.d.). Recognition of unsafe driving behaviors is sufficient to request a referral to a DRS by anyone, including family and healthcare providers (AOTA, n.d.-a, ADED, n.d.).

Referrals for OT involvement typically occur after a patient experiences sensory or mobility changes associated with medical conditions – such as a stroke – or onset of neuropathies due to diabetes, vision changes, episodes of loss of consciousness, or even aging. Trauma-related loss of function (mobility or sensation) is another reason for referral to occupational therapy. Referrals may also be recommended if a patient appears to be having difficulties with activities of daily living, including driving, or is at risk for falls. Many patients present to the

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emergency department (ED) with complaints or symptoms that will require them to learn, or relearn, to do everyday activities as a result of their emergent condition. Occupational therapy assessments related to injury prevention and activities of daily living are often covered by insurance if prescribed or ordered by a physician or other care provider (AOTA, n.d.-a, n.d.-b, n.d.-c; ADED, n.d.).

ED Nurses and Occupational Therapists Working Together?

Emergency nurses and occupational therapists appear to have similar goals to keep patients safe and moving about safely. Fall prevention and safe driving are discussed on both organizations' web sites (ENA, n.d.-b; AOTA, n.d.-b). "Referral to other appropriate professionals or ancillary services" is identified as part of discharge planning from the emergency department in several of ENA's references and resources, including the *Emergency Nursing Scope and Standards of Emergency Care* (ENA, n.d.-a, n.d.-b, n.d.-d, 2014, 2017a, 2017b, 2018, 2019; ACEP, AGS, ENA, & SAEM, 2013). Yet, only one brief reference to occupational therapy (OT) can be found and that is in ENA's *Geriatric Emergency Department Guidelines* (ACEP, AGS, ENA, & SAEM, 2013). Wolf et al.'s article "Emergency Nurses' Perception of Geriatric Readiness in the ED Setting: A Mixed-methods Study" (Wolf, 2019) reported some ED nurses did involve or have access to physical therapy or occupational services in their facility; yet a quarter of the nurses involved in the study did not have, or were not sure if they had, access to physical or occupational therapy services. On checking with the study's lead author, it was learned that the study question did not delineate whether that availability was of physical therapy or of occupational therapy when the respondents were asked who was included as part of the team. The reported number reflected a combination of physical and occupation therapists. (L. Wolf, personal communication, 2019)

Inquiries were made of ENA members via ENA Connect to determine whether anyone obtained referrals for occupational therapy to take place in their departments or for after discharge (November 17, 2019). Similar inquiries were directed to members of ENA's Institute for Quality, Safety, and Injury Prevention (IQSIP) and Geriatric Committees, (October 1, 2019, January 6, 2020) as well as to state, local, and national emergency nurse peers. Feedback was minimal. Some emergency nurses were familiar with occupational therapy as part of CarFit (an AOTA program developed to teach older adults how to adjust parts of their vehicles – for example, mirrors, seats, seatbelts) (CarFit, n.d.) as they had taken CarFit technician training. (October 1, 2019) Some nurses noted they collaborated with or obtained referrals for *physical therapy* – especially when crutches or walkers were ordered – but most did not seek referrals for *occupational therapy*, either in the ED or for home visits. (personal communication with small groups on September 11, 2019, September 19, 2019, October 1, 2019, October 29, 2019, November 5, 2019)

During an interview with a nurse colleague who provides inpatient care, it was discovered in patient nurses frequently request an order for a referral for an occupational therapy assessment for the hospitalized patient or as follow up in the home after discharge. The requests are based upon observations made during care that indicated potential problems with activities of daily living, especially when the patient went home. These inpatient care nurses typically were concerned about patient challenges with moving, seeing, or cognition that could increase risk of falls and affect driving (H. Jaehne, personal communication, October 21, 2019).

A review of literature looking for collaborative efforts between emergency nurses and occupational therapists found that Australia, Canada, and the United Kingdom have reported some successes in integrating the OT into the ED (James et al., 2016; Sunnybrook Health Sciences Center, 2020). However, studies from other countries, including the United States, highlighted an awareness gap and lack of knowledge of each other's abilities and what each profession could contribute during the process of providing patient care (Alotaibi et al., 2018; James, et al., 2016; Johnson, 2017; Loy et al., 2015). This is believed to have led to emergency staff typically not seeking an occupational therapy referral for patients – either in the ED or as part of the plan to discharge to home (Alotaibi et al., 2018; James, et al., 2016; Johnson, 2017; Loy et al., 2015). People in some disciplines are

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working to change this by increasing awareness of what an OT does for patients (James et al., 2016; Loy et al., 2015).

A group of Minnesota occupational therapy students recently verbally reported results of their as yet, unpublished study related to road safety and dementia. They also noted a gap in knowledge of Minnesota healthcare workers (physicians and nurse0s) as to what services the OT could offer (S. Johnson, personal communication, November 1 and November 11, 2019; J. Lensing, personal communication, November 1, 2019; K. Stommes, personal communication, November 1 and November 11, 2019). Conversely, conversations with several occupational therapists, occupational therapy instructors, and occupational therapy students revealed they were unaware of the emergency nurse's abilities and nursing tools used to assess for fall risk, mobility, and cognitive impairment (S. Johnson, personal communication, November 1 and November 11, 2019; J. Lensing, personal communication, November 1, 2019; K. Stommes, personal communication, November 1 and November 11, 2019; C. Sullivan, June 26, 2016, July 28, 2016, October 18, 2016, November 16, 2016, September 24, 2018, November 1, 2019, March 2, 2020). Perhaps most revealing was a comment made by an occupational therapy professor from a local college when she expressed her opinion that assessing for cognitive impairment was not within the scope of practice for a nurse but only of a physician or an OT. Work to increase her awareness of what ED nurses know and can do has changed her opinion to the point she has asked this nurse to collaborate on projects related to her work (C. Sullivan, June 26, 2016, July 28, 2016, October 18, 2016, November 16, 2016, September 24, 2018, November 1, 2019, March 2, 2020).

An AOTA continuing education article in the *OT Practice Journal* discussed lack of interprofessional collaboration and current reimbursement models in the U.S., identifying these as potential reasons why more occupational therapy referrals are not seen in some emergency departments (Johnson, 2017). The article noted that increased awareness and collaboration between members of the health care team has been identified as one of the first steps needed to improve this situation.

Previous Professional Collaboration between ENA and Occupational Therapy Organization

Inquiries to ENA staff working with the Geriatric and the Institute for Quality, Safety, and Injury Prevention (IQSIP) committees, other ENA staff members, and other ENA members to identify official and unofficial collaborative efforts between ENA and any occupational therapy organization found little, evidence of previous collaboration, other than what individual nurses engaging with CarFit did. (K., Ceci, personal communication, January 6, 2020; personal communication, C. Olson, January 13, 2020) Review of ENA resources found one mention of occupational therapists in the *Geriatric Emergency Department Guidelines* (ACEP, AGS, ENA, & SAEM, 2013). Review of the ENA *Emergency Nursing Core Curriculum* book, the Geriatric Emergency Nurse Education (GENE) course, TNCC, and a search for "occupational therap" (the "y" was left off the word to increase results) on the ENA web site found no mention of occupational therapy, other than the query described earlier (Harley & Giordano, 2020; Sweet, 2018). Yet, many of the pertinent documents in the ENA Practice Library and the *Emergency Nursing Scope and Standards of Practice* discuss referral to specialists and ancillary services (ENA, n.d.-c, 2017a). Collaborating with healthcare partners that advocate for injury prevention is noted in the strategic plan (ENA, n.d.-d).

Summary

Emergency nurses and occupational therapists have very similar goals for patients – improved quality of life and injury prevention (especially related to preventions of falls and safety on the road). Awareness of each other's professional skills that are brought to the table could lead to a collaborative effort and improved patient outcomes. Many patients start their "new" health care journey in the ED, where the nurses can screen for and identify ED patients at risk of falling or having difficulty managing activities of daily living while they are in the ED. The ED nurse can also identify someone who is showing signs that they might be physically or cognitively

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at risk of unsafe driving. The nurse can then pass the baton on to the occupational therapist who can assess the patient's mobility, sensory, and cognitive function related to home life and driving issues, making accommodations for difficulty in managing at home or in their car. Often patients are admitted to the hospital and may be referred during their admission. Approximately 30–50% of older adults are discharged from the ED, but return within days – due to a fall or car crash (Lowthian et al., 2015; Ukkonen, et al., 2019). Only by reaching out, so nurses and OTs can learn about each other, can we determine whether or how we can collaborate on and expand that continuum of care for patients.

Relationship to ENA Bylaws, Mission, Vision, and Strategic Initiatives:

Reaching out to collaborate with our healthcare partners and organizations is explicitly listed in several places in the ENA 2020–2025 ENA Strategic Plan (ENA, n.d.-d). The Strategic Plan encourages taking action and utilizing advocacy strategies that lead to injury prevention and states that emergency nurses will use resources for promoting the highest quality safe practice and safe care. Investigating, in a fully aware manner, a potentially collaborative partnership with fellow healthcare providers with similar goals seems to fit with our mission, vision, and strategic initiatives.

Financial Consideration/Operations Impact:

The scope of work outlined in the resolved clauses has a fiscal impact of less than \$10,000. Upon final outcomes of General Assembly, initiatives will be evaluated for resource planning in alignment with ENA's strategic plan and operational goals.

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Resolution GA20-04

TITLE: Patient Screening in the Emergency Department

Whereas, the emergency department (ED) is the portal of entry to the hospital and healthcare system for many patients;

Whereas, numerous entities seek to insert screening activities into ED care, either as a part of triage or during the ED visit;

Whereas, screenings take time and resources, which may delay triage and care for all patients;

Whereas, most screenings do not influence the assignment of a triage acuity level or immediate disposition of the patient;

Whereas, many screening activities do not align with the ED's primary mission of identification and stabilization of serious illnesses and injuries and may delay treatment of an emergency medical condition;

Whereas, some institutions invoke mandatory screening requirements that exceed the requirements of regulatory agencies (TJC, 2019, p. 2);

Whereas, many screening tools have not been evaluated for validity and reliability in the emergency department setting (ENA, 2014, 2018b, 2018d; LaMantia et al, 2014; Shota et al., 2018); and

Whereas, there may not be a process in place to address concerns identified by screening, which could lead to patient dissatisfaction or liability if no action is taken for a "positive" screen.

Resolved, That ENA promote a thoughtful, evidence-based process for decisions about which screening activities are appropriate during triage or during emergency department care;

Resolved, That ENA opine that screening for information which does not impact the assignment of a triage acuity level should not be mandated as a part of the triage process;

Resolved, That ENA opine that screening for information which does not impact care for the presenting complaint be considered optional, not mandatory;

Resolved, That ENA encourage the use of screening tools with demonstrated reliability and validity in the emergency department setting;

Resolved, That ENA endeavor to collaborate with stakeholder organizations (e.g., The Joint Commission [TJC], Centers for Medicare & Medicaid Services [CMS]) regarding evidence-based screening in triage and in the emergency department; and

Resolved, That ENA create a resource for emergency nurses and emergency department and hospital leaders to use to support evidence-based decisions about which screening tools and processes are required in triage or in the emergency department.

Resolution Background Information:

Intimate partner violence, smoking, substance abuse, fall risk, cognitive impairment, communicable disease markers, immunization status, and suicidal or homicidal ideation are among the conditions for which emergency

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nurses are routinely required to screen patients. Policies often require these screenings for all patients, i.e., universal screening. As such, both a patient with a finger laceration and a patient with an ST-elevation myocardial infarction going to the cardiac catheterization lab must have these areas assessed to comply with the policy.

A case can be made for almost any screening activity in the ED because many patients do not have primary healthcare providers and the ED may be their only contact with the healthcare system. Positive outcomes may be associated with ED screening and intervention (Hawk & D’Onofrio, 2018). It is common for other specialties in the healthcare system to request that the ED add “just this one question” to the ED intake or care process. These items may be quick and easy in isolation but can quickly become overwhelming in the aggregate. Professional associations, including ENA, frequently go on record stating that screening for X should be “routine” (American College of Emergency Physicians [ACEP], The American Geriatrics Society [AGS], ENA, & the Society for Academic Emergency Medicine [SAEM], 2013; ENA & International Nurses Society on Addictions [INSA], 2012; ENA, 2014, 2016, 2017, 2018a, 2018c, ENA & International Association of Forensic Nurses [IAFN], 2018a, 2018b). Some screening activities are mandated by regulatory agencies (e.g., TJC, 2020; CMS, 2019) but may be implemented in a fashion exceeding what is actually required. For example, many hospitals mandate universal screening for suicidal ideation. However, The Joint Commission explicitly states that this is required only for patients “...who are being evaluated or treated for behavioral health conditions as their primary reason for care...” (TJC, 2019, p. 2).

Some screening processes result in information that influences triage level or ED interventions, for example, screening for infectious diseases, tetanus immunization in the presence of compromised skin integrity, or suicidal or homicidal thoughts in patients with behavioral health concerns. However, many do not lead to information that is necessary for the assignment of a triage level or that influences immediate patient management. In fact, requiring that these screenings be completed during triage leads to a delay in the triage process for all patients and may result in less effective screening as nurses hurry through a series of seemingly random questions or enter answers to questions that have not actually been asked.

Many screening tools have not been validated for use in the ED setting (ENA, 2014, 2018b, 2018d; LaMantia et al., 2014; Shota et al., 2018). Furthermore, screening for sensitive conditions such as intimate partner violence or substance use in the presence of the patient’s visitors or asking questions in a rushed or thoughtless manner may not elicit accurate answers. Screening activities also require nursing time, which may be in short supply in an overcrowded emergency department (Proehl & Hoyt, 2008). Screening via electronic devices has demonstrated effectiveness (Cullen et al., 2019) and could potentially simplify ED workflow by addressing a wide range of conditions in a private manner.

Emergency department and hospital leadership should carefully consider which screening activities are mandatory and which are encouraged. The decisions about screening and specific screening tools should be evidence-based when possible. Facilities choosing to perform screening not indicated by a patient’s presenting complaint should consider deploying additional resources (e.g., staff or technology) so that the screening activities are performed in an effective manner that does not delay care or increase nursing workload at the expense of other patient care activities.

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Relationship to ENA Bylaws, Mission, Vision, and Strategic Initiatives:

ENA Bylaws, Article V, Section 2: The General Assembly is responsible for communicating member needs, providing feedback, and input on issues relating to the practice of emergency nursing to the Board of Directors. This resolution addresses a situation experienced by emergency nurses during the care of every patient they encounter.

Mission: To advance excellence in emergency nursing.

Excellence in practice requires that practice be based on evidence wherever possible and many screening activities are not evidence-based.

Core Values: Evidenced by a culture of inquiry dedicated to innovation, compassion, and global commitment to best practice.

Best practice should be based on evidence wherever possible and many screening activities are not evidence-based.

Vision: Emergency nurses practicing worldwide have the appropriate evidence-based resources needed to provide the best care possible.

Many ED screening activities are not based on evidence of efficacy and benefit.

ENA is the primary source of evidence-based emergency nursing resources and standards of care.

Excellence in practice requires that practice be based on evidence wherever possible and many ED screening activities are not based on evidence of efficacy and benefit.

Goals:

Practice Environment

Objective: Establish and disseminate standards for emergency nursing practice.

Strategy: Advocate for emergency departments to have the necessary resources and supplies for the highest quality, safe practice, and safe care.

Excellence in practice requires that practice be based on evidence wherever possible and many screening activities are not evidence-based.

Financial Consideration/Operations Impact:

The scope of work outlined in the resolved clauses has a fiscal impact of greater than \$25,000. Upon final outcomes of General Assembly, initiatives will be evaluated for resource planning in alignment with ENA's strategic plan and operational goals.

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Resolution GA20-05

TITLE: Recognition of Emergency Clinical Assistant/Technician

Whereas, emergency clinical assistants/technicians (ECATs) are valuable clinical teammates in many emergency departments (Duffield, Twigg, Roche, Williams, & Wise, 2019; Novak, 2003; Tarcan, Hikmet, Schooley, Top, & Tarcan, 2017; Wundavalli, Kumar, & Dutta, 2019);

Whereas, meaningful recognition is a foundational element of healthy work environments (AACN, 2016);

Whereas, recognition can enhance both emergency department and Emergency Nurses Association (ENA) recruitment and retention of ECATs who may also become graduate nurses and emerging professionals within ENA (AACN, 2016; Diamond, 2017; Mann & Dvorak, 2016; Sveda, 2017);

Whereas, despite differences in hospital job titles and state licensing, ECATs' role responsibilities are frequently different from those of their inpatient care assistant colleagues (Novak, 2003);

Whereas, some specific roles (e.g., emergency medical technician [EMT], medical assistant [MA], certified nurse assistant [CNA]) have formal recognition through national organizations (AAMA, 2020; NAEMT, 2020; NNCNA, 2020), emergency clinical assistants/technicians currently have no national voice; and

Whereas, there are currently no formal recommendations from a national organization for recognizing the unique, specialized role ECATs contribute to emergency care, therefore be it

Resolved, That ENA explore options, such as an ECAT “day” during Emergency Nurses Week or specific inclusion into Emergency Nurses Week, to formally recognize emergency clinical assistants/technicians and their unique contribution to emergency department care.

Resolution Background Information:

Many emergency departments deliver care using a team structure that includes specialized emergency clinical assistants/technicians. Due to state licensing and credentialing, these ECATs may be a certified nurse assistant, a registered nurse assistant (NA-R or RNA), an emergency medical technician, or a medical assistant, among others. Job description naming conventions can include the preceding roles, sometimes in a tiered structure, such as CNA1 and CNA2 or may be more general, such as patient care assistant (PCA) or clinical assistive personnel (CAP). Historically, ENA has recognized the unique role responsibilities of ECATs through a curriculum book (Novak, 2003), which is no longer in print.

Some certificate roles, such as EMT, CNA, and MA have national organizations advocating for national formalized recognition “days” or “weeks.” (AAMA, 2020; NAEMT, 2020; NNCNA, 2020). Due to the varied nature of licensing, job description naming conventions, and specialized role responsibilities, ECATs may not be included in nationally declared role-specific days or weeks. Some employers do include ECATs in celebrations named for emergency nurses, while others do not (ENA Huddle “ER Techs”, online personal communication, September October 14-18, 2016).

Meaningful recognition, as an element of a healthy work environment, has been linked to increased staff satisfaction, retention, and engagement (AACN, 2016). Similar links have been found in studies of professional, volunteer organizations (Diamond, 2017; Sveda, 2017). Additionally, Mann & Dvorak (2016) report links between recognition and productivity, engagement, company loyalty, and retention.

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Relationship to ENA Bylaws, Mission, Vision, and Strategic Initiatives:

Relationship to ENA Bylaws:

Membership of ECATs in ENA is allowed by ENA Bylaws in the Affiliate category. ECATs who are also pre-licensure nursing students are allowed and encouraged to join ENA in the Student category.

Relationship to ENA Mission:

In alignment with ENA's mission to advance excellence in emergency nursing, ECATs are part of many emergency department teams. Recruitment and retention of highly skilled ECATs to support the needs of emergency department patients also contributes to excellent overall emergency nursing.

Relationship to ENA Vision:

As the premier organization for the emergency nursing community, ENA is perfectly positioned to recognize ECATs as members of the emergency nursing team.

Relationship to ENA Strategic Initiatives:

In the practice environment, recognition has been linked to recruitment and retention, which in turn have been linked to quality care. Through formal recognition, ENA membership, as mentioned in the community goal, could see a modest increase from those ECATs who appreciate being identified as a valued member of the emergency nursing team and who see ENA as a voice for the role ECATs have in contributing to safe practice and safe care.

Financial Consideration/Operations Impact:

The scope of work outlined in the resolved clauses has a fiscal impact between \$10,000 and \$25,000. Upon final outcomes of General Assembly, initiatives will be evaluated for resource planning in alignment with ENA's strategic plan and operational goals.

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Resolution GA20-06

TITLE: Preparing Nurses for Care in the Prehospital Emergency (EMS) Setting

Whereas, the setting for emergency nursing practice includes ground and air transport services, prehospital services, and mobile-integrated healthcare (Emergency Nurses Association [ENA], 2017);

Whereas, nurses have been working in the prehospital environment for numerous years (Treadwell et al., 2018);

Whereas, nurses in some states are being required to obtain a prehospital provider license rather than a certification or certificate under their nursing license prior to providing prehospital care (Air and Surface Transport Nurses Association [ASTNA], 2018);

Whereas, nurses who practice in the out-of-hospital and transport environment must be adequately prepared to deliver care in the unique environment (ASTNA, 2018);

Whereas, there is neither a national standard credentialing process for entry of nurses into prehospital care nor a current analysis of the educational needs of nurses providing care in the prehospital setting; and

Whereas, the Institute of Medicine, in its future of nursing report, recommends completion of transition-to-practice programs when nurses are transitioning to new clinical practice areas (Altman et al., 2016).

Resolved, That the Emergency Nurses Association (ENA) identify and work with stakeholders to determine the educational needs of emergency nurses working in the prehospital setting and collaborate with stakeholders to meet that need;

Resolved, That the Emergency Nurses Association (ENA) identify and work with stakeholders to produce a toolkit for healthcare organizations to adopt when developing transition-to-practice programs for emergency nurses transitioning to the prehospital setting;

Resolved, That the Emergency Nurses Association (ENA) identify and work with stakeholders to develop and continually revise a nationally standardized educational course meant to prepare emergency nurses for prehospital care which includes psychomotor components necessary for care in the prehospital setting;

Resolved, That the Emergency Nurses Association (ENA) identify and work with stakeholders to develop and publish a joint statement regarding a credentialing process meant to attest to entry-level competence in prehospital care; and

Resolved, That the Emergency Nurses Association (ENA) identify and develop strategies to address professional and scope of practice issues of emergency nurses in the prehospital setting.

Resolution Background Information:

Prehospital Emergency Nurses have been facing distinct professional issues for many years.

In 1988 ENA's General Assembly passed resolution 88-10 recommending formation of an Ad-Hoc Committee to develop National Standard Guideline for Prehospital Nurses. ENA worked with the National Flight Nurses Association (NFNA) [now ASTNA], in collaboration with other organizations to publish their guidelines in the first *National Standard Guidelines for Prehospital Nursing Curriculum* (Robinson, 1992).

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In 1993 a study was published in the Journal of Emergency Nursing which examined the regulation of nurses working in the prehospital setting based on the National Standard Guidelines and evaluated the availability of certification for nurses operating in the prehospital setting. It concluded that “As a nation, we are far from actualizing the recommendations stated in the ENA and National Flight Nurses Association Position.” (Johnson et al., 1993)

In 2020, over 30 years from development of the initial guidelines, little progress has been made in sufficiently addressing the professional, ethical, legal, and educational needs of prehospital emergency nurses.

In order for a profession to obtain and maintain status as a profession, it must have: 1) authority to control its own work 2) a specialized body of knowledge 3) a specialized plan of formal education 4) specialized competence 5) control over work performance 6) service to society 7) self-regulation 8) a credentialing system to certify competence 9) legal reinforcement of professional standards 10) ethical practice 11) a collegial subculture 12) intrinsic rewards and 13) societal acceptance (Hood, 2018). Members must be able to control their own profession (Zerwekh & Garneau, 2018).

There are several states which allow nurses to work in the prehospital setting under their nursing license including, but not limited to, California, Illinois, Kentucky, Maryland, Minnesota, Nevada, New Jersey, Pennsylvania, and West Virginia. Due to the absence of, or misunderstandings regarding education and practice standards for nurses working in the prehospital environment, some states mandate nurses obtain a non-nursing prehospital provider certification, and several require the nurse apply for separate licensure or endorsement from a non-nursing regulatory agency (ASTNA, 2018). This is incompatible with the defining characteristics of a profession.

Pennsylvania, for example, requires Registered Nurses to take the National Registry Paramedic Cognitive exam prior to obtaining their Pre-Hospital Registered Nurse certification. Neither certification nor license is issued by a nursing organization or the Board of Nursing, yet they are required to practice. The Certified Flight Registered Nurse (CFRN) and Certified Transport Registered Nurse (CTRN) exams are not accepted as alternatives. In some cases, as in New Jersey, these regulatory agencies limit the scope of practice of Registered Nurses to a regulatory agency-defined scope of practice without consultation or approval of the state’s Board of Nursing, input from professional nursing organizations, or decisions based on evidence or best practice.

Individual states have developed their own independent requirements for nurses to fulfill, often based on the National EMS Education Standard, but not done in consultation with professional nursing organizations or based on the needs of nurses. Both ENA and ASTNA support prehospital care as within the scope of practice of a registered nurse (Treadwell et al., 2018; ASTNA, 2018). ASTNA states that the nurse receives preparation and training that “... rarely includes the skills needed to deliver patient care in the prehospital environment” (ASTNA, 2018, p. 18).

Due to accreditation requirements, The National Registry of Emergency Medical Technicians (NREMT) no longer allows providers who did not attend a Commission on Accreditation of Allied Health Education Programs (CAAHEP) accredited program to obtain National Registry Paramedic certification. NREMT continues to allow nurses to utilize the NREMT Paramedic Cognitive Exam to demonstrate knowledge *equivalent to that of an entry level paramedic*, at the request of non-nursing state regulatory agencies. Nurses may also no longer take the

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National Registry Paramedic Psychomotor Exam.

As the NREMT Paramedic Cognitive Exam is meant for individuals who have completed a CAAHEP program and for entry-level providers who have not practiced in a healthcare setting before, the Paramedic Cognitive Exam cannot be considered a valid assessment of the competence of a registered nurse practicing in the prehospital environment. Allowing registered nurses to continue taking the Paramedic Cognitive Exam could in theory affect the validity of the exam and is unfair to both paramedics and nurses.

As nurses cannot, and should not be required to, meet the standard for certification as NREMT Paramedics, it is unacceptable and in the strictest sense of the word, unprofessional, to continue to accept state regulatory agencies requirements that registered nurses take the NREMT Paramedic Cognitive Exam or any other non-nursing derived exam in order to practice. ENA must develop the appropriate educational and training resources to bridge the gap between in-hospital and out-of-hospital emergency nursing care, which are acceptable to EMS organizations and state agencies, and assist Boards of Nursing and providers in addressing professional issues.

There are 41 Accreditation Council for Graduate Medical Education (ACGME) accredited programs in EMS for physicians (American Board of Emergency Medicine [ABEM], 2017). Physicians have clearly recognized the need for an EMS-specific board certification, residency, and fellowship and developed the appropriate resources to support physicians providing care in the environment.

It is also important to recognize that internationally there are several countries which utilize nurses for prehospital emergency response. Often when discussing issues in relation to this resolution it devolves into state specific and United States-centric discussion. Nurses are utilized as prehospital providers in at least China, Lithuania, the Netherlands, Oman, Portugal, and Sweden. The standards and educational requirements for these nurses also vary. In countries without formalized prehospital emergency services it may be nurses as the only formally educated healthcare providers working in the prehospital setting and providing care.

This resolution calls for the Emergency Nurses Association to address professional nursing issues, as well as keep pace with the Future of Nursing Report and support prehospital emergency nurses by 1) developing a course meant to be utilized to provide baseline knowledge about operations and psychomotor skills in the prehospital setting 2) developing a residency toolkit to assist with the transition of nurses into the prehospital clinical practice area 3) working with stakeholders, agree on or develop an appropriate credentialing process to attest to the provider's entry level competence in the prehospital emergency setting, and 4) address professional issues which have remained unaddressed.

ENA must also assert its status as the premiere authority for emergency nursing education, research, and practice resources and support the boards of nursing as the definitive regulatory agencies for nursing practice.

This resolution should not be misunderstood to state that nurses should not seek non-nursing education or hold non-nursing licensure of their own accord or to depreciate the value of credentials or other licensure they or other providers currently hold.

Relationship to ENA Bylaws, Mission, Vision, and Strategic Initiatives:

The ENA's five-year strategic plan calls for ENA to **advance excellence in emergency nursing** and calls for



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ENA to develop and disseminate high quality educational programs and resources to provide excellent care. (ENA, n.d.).

This resolution asks that ENA meet the **Education** goal of having the highest quality educational resources to provide the highest level of care by utilizing the strategy of **creating new educational offerings that cover the breadth and depth of emergency nursing** (ENA, n.d.).

This resolution meets the Vision description of **being the premier organization for the emergency nursing community worldwide** (ENA, n.d.) by developing educational courses which will have an international impact.

This resolution supports ENA's core value of **collaboration**, which asks that ENA work with healthcare partners worldwide to explore **innovative** solutions to the challenges of emergency care delivery (ENA, n.d.). It will require collaboration by ENA with various industry leaders and agencies including, but not limited to, the National Highway Traffic Safety Administration (NHTSA), American College of Emergency Surgeons (ACEP), National Association of Emergency Medical Technicians (NAEMT), NREMT, ASTNA, and National Association of EMS Physicians (NAEMSP).

This resolution asks for ENA to meet its Vivid Description that **nurses will provide care using their full scope of practice** by advocating for the utilization of nursing licenses as the basis of providing care in the prehospital setting as well as developing strategies for Boards of Nursing, other organizations, and prehospital nurses to address regulatory issues. Nurses are unable to provide excellent, evidence-based care if their scope is being unduly limited by non-nursing entities.

This resolution asks that ENA evaluate the needs of emergency nurses working within their scope of practice as prehospital providers and develop and disseminate courses to adequately prepare and support them.

This resolution may meet the practice environment goal of **improving the retention and recruitment of emergency nurses** by providing parallel avenues for emergency nurses to take in their professional careers. It may encourage other provider to seek nursing licensure by providing a definitive path to the prehospital setting.

Financial Consideration/Operations on Impact:

The scope of work outlined in the resolved clauses has a fiscal impact of greater than \$25,000. Upon final outcomes of General Assembly, initiatives will be evaluated for resource planning in alignment with ENA's strategic plan and operational goals.

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Resolution GA20-07

TITLE: Increasing Community Engagement through Collaboration and Recognition

Whereas, the Emergency Nurse Association (ENA) is comprised of a unique and diverse group of nurses that serve the community in a variety of ways (McKee et al., 2018);

Whereas, ENA seeks different perspectives and experiences within emergency nursing and strategic partnerships for practice improvement and inclusion (ENA, 2019a);

Whereas, advancements in emergency nursing and improvement in the lives of patients throughout the world are impacted by the spirit of philanthropy (ENA, n.d.);

Whereas, injury prevention, public health, and disaster response require not only education but strategic advocacy through partnerships with stakeholders (ENA, 2019a); and

Whereas, community is one of the core goals of the ENA strategic plan, and ENA is indispensable to the global community (ENA, 2019a).

Resolved, That ENA develop resources to connect members with community outreach opportunities.

Resolved, That ENA promote recognition for community service activities and exemplars.

Resolution Background Information:

Nursing volunteers are needed in local and global communities for long-term, as well as short-term, services (Dalmida, et al., 2016). Increased globalization has made access to care increasingly difficult for the global community, making the need for nurse volunteers of great importance (Dalmida, et al., 2016). A lack of understanding of a complex, contemporary society could have detrimental effects on social behaviors (Haupt, et al., 2018). Understanding these concerns and providing two-way connections can reduce negative impacts of threats and emergencies, including public health emergencies, long-term health trends, and climate-related impacts. Emergency nurses have the ability to reduce negative community impacts through education, connection, and communication.

Community engagement and service can take place in a variety of settings and with and to a diverse group of people, including the vulnerable populations we serve. The needs of the community vary across the country and the world. Nurses can work together to meet these needs and collaborate to provide care to the community (Dalmida, et al., 2016). Creating the community connection through service face-to-face, or even online, establishes a strong base of collaboration and connection (Centers for Disease Control and Prevention [CDC], 2017). Social media can be used to directly reach community members but also cross-promote activities (CDC, 2017). Recognizing the emergency nursing community and encouraging it to establish connections and a relationship with the community it serves has been intermittently encouraged, but with the last strategic plan update the community focus shifted back to emergency nursing itself. Emergency nurses have the ability to make a cultural impact with community engagement, which promotes community health and positive engagement.

Community engagement and cultural impact are mentioned in many ENA toolkits, position statements, and documents. Ongoing community connection was highlighted in the *Disaster Emergency Essentials Toolkit* (ENA, 2019b). Understanding cultural diversity and its importance for all levels of nursing practice was a main point in the *Cultural Diversity and Gender Inclusivity in the Emergency Care Setting* position statement (ENA, 2018). Most published material focuses on specific populations but care for the populations starts before the bedside in the community. The Nursing Education Award includes the community aspect only for education. Encouraging community influence and engagement is missing from the ENA awards and financial incentives.

Relationship to ENA Bylaws, Mission, Vision, and Strategic Initiatives:



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This resolution aligns with ENA's values and beliefs of the spirit of philanthropy. Philanthropy extends beyond financial donations and involves charity in the form of actions that can impact the greater community health (Grabor & Saylor, 2018).

Community is one of the core goals for the 2020–2025 Strategic Plan. The focus of “community” must extend past the community of emergency nurses to the community that we care for. Engaging with the community we care for before they reach the stretcher side increases the positive impact that emergency nurses can have on the community.

Financial Consideration/Operations Impact:

The scope of work outlined in the resolved clauses has a fiscal impact of greater than \$25,000. Upon final outcomes of General Assembly, initiatives will be evaluated for resource planning in alignment with ENA's strategic plan and operational goals.

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Resolution GA20-08

TITLE: Advocating for Standardized Safety and Well Being of ER Nurses

Whereas, the effects of the COVID-19 Pandemic on the future of emergency nursing will be unprecedented. The level of moral distress and injury, legal repercussions, and economic fallout are all areas of deep concern whose effects on nurses require urgent attention and mitigation in order to provide a safe and just workplace (Kaufman et al., 2020); and

Whereas, the emergency nurse has a duty to apply self-awareness and self-care when promoting health and safety. Emergency care settings may create a risk to the emotional and physical health of the emergency nurse. Workplace violence, fatigue, burnout, and secondary traumatic stress all can put the emergency nurse at risk. The emergency nurse has a personal and professional duty to learn and develop strategies that promote resiliency (Gurney et al., 2017); and

Whereas, distress occurs when people recognize their moral responsibility in a situation, evaluate the various courses of action, and identify, in accordance with their beliefs, the morally correct decision – but are then prevented from following through (Rushton et al., 2016); and

Whereas, there is limited legal support for nurses during crisis, and during crises nurses may face multiple legal issues, similar to other career-specific liabilities; they will require specialized legal counsel and representation to assist in their case (Turner, 2018); and

Whereas, while malpractice insurance covers basic legal needs of the emergency nurse, it does not cover legal issues related to whistleblower activities and crisis management (Nurses Service Organization [NSO], 2020); and

Resolved, That ENA conduct, compile, and disseminate research on the effects of disasters, epidemics, and pandemics on the mental, physical, and socioeconomic health of emergency nurses, and work with other stakeholders to identify needs of this group; and

Resolved, That ENA develop, compile, and publish resources and education for emergency nurses seeking litigious guidance and assistance.

Resolution Background Information:

It must be noted that while most of the background information is related to the current COVID-19 (novel coronavirus) pandemic, this resolution is to serve as a guide for emergency nurses during any time of crisis.

The safety and protection of emergency nurses has long been a priority of ENA as evidenced by its inclusion in the mission statement and strategic plan (ENA, n.d.). The current global environment has left emergency nurses at the mercy of hospital systems and political decision-making, forcing them to feel the burden of the human cost of productivity and at a loss for resources. The American Healthcare Association has stated that “the COVID-19 pandemic has taken a mental and emotional toll on Americans across the country (American Healthcare Association [AHA] & National Center for Assisted Living [NCAL], 2020). Healthcare workers (HCWs) feel the burden of this crisis the most. Providers must take steps to ensure the health and well-being of their staff as they navigate this challenging time” (AHA & NCAL, 2020). The outcomes of this pandemic, and others like it, on the physical, mental, and economic well-being of nurses has not been studied at this time, and a Cumulative Index of Nursing and Allied Health Literature (CINAL) search demonstrated few scholarly publications on the topic.

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There is a concept known as the productivity “paradox,” otherwise known as the “human cost of productivity.” This concept “... reflects, among other things, major and widening differences among economic sectors and the people who work in them” (Graham, 2017, p. 2). Highly skilled sectors, of which nurses are considered a part, are seen as having “... an ability to anticipate and plan for the future, and to adapt and innovate in accordance with that” (Graham, 2017, p. 2). However, in times of crisis these highly skilled sector workers can also experience stress and anger when they are not provided with the appropriate tools to enable adaptation. According to Graham, “... metrics of desperation, stress, and anger match closely with the rising levels of premature mortality across cohorts and places” (2017, p. 2). These factors may lead to burnout, resignation, early retirement and other career ending or changing decisions within the profession of nursing.

Nursing professionals have participated in the political and legislative process “to shape health care legislation that supports nurses as well as benefiting patients and communities” (Turner, 2018, p. 1). It is often stated that “nurses should not be political.” However, many authors have noted that this attitude may leave nurses alone at the table in regard to political decision-making. According to Gerard Brogan, RN, lead nursing practice representative at the California Nurses Association and National Nurses United, that is a naïve and possibly dangerous position. “Health care employers are heavily involved in politics, so as an organization and profession we have to also be involved in politics ourselves” (Turner, 2018, p. 1). The American Hospital Association issued a letter to members of Congress stating “Right now it is imperative that Congress support the front-line nurses, physicians, and other health care providers who are working tirelessly to care for others and need additional resources to continue their work. Congress should establish a separate fund to address the issues related to our health care heroes ...” (American Hospital Association & American Nurses Association, p. 1).

On March 27, 2020 ENA issued a statement regarding the protection of emergency nurses during the COVID-19 pandemic. It states

ENA believes emergency nurses and other health care workers (HCWs) providing direct care for suspected and confirmed COVID-19 patients should be provided the appropriate personal protective equipment (PPE) necessary to safely care for these patients, including PPE that meets National Institute for Occupational Safety and Health (NIOSH) standards. ENA also believes recommendations for PPE should be evidence-based and not downgraded based on supply chain. ENA supports emergency nurses and other HCWs in obtaining and using self-supplied PPE that meets NIOSH standards when, in their professional opinion, hospital-supplied PPE supplies are inadequate. ENA strongly cautions against use of homemade or cloth masks by HCWs in this pandemic. Makeshift or homemade PPE such as bandanas, scarves, and cloth masks are not appropriate PPE as there is no evidence, they will adequately protect HCWs. Using homemade PPE also puts HCWs at higher risk for exposure due to poor fit and need for frequent adjustments. Only as a last resort, after all options for obtaining appropriate respiratory protection have been exhausted – including working with manufacturers, state and local health departments, other local health care providers, and community resources – should homemade masks be used, in combination with a face shield that covers the entire front (that extends to the chin or below) and sides of the face (ENA, 2020, p. 1).

Many nurses are facing the dilemma of providing their own PPE and dealing with the consequences put forth by their organizations, or not having appropriate PPE and risking exposing themselves to contagious diseases, such as COVID-19.

The Code of Ethics for Nurses (American Nurse Association, [ANA], 2015) states that nurses have the right to advocate for themselves and their patients and to do so without fear of retribution. However, each state’s nurse practice act varies. Turner noted that recently the state of “... Illinois tried to remove ‘advocacy’ from its nurse

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act” (2018, p. 1). There should be no fear of retribution when nurses advocate for their own safety in their own workplace. OSHA has set forth key standards for employers of individuals who reasonably anticipate exposure to bloodborne pathogens or other infectious agents (Occupational Safety and Health Administration [OSHA], 2012; The Joint Commission [TJC], 2019). These include performing a hazard assessment to determine the situations in which exposure could occur and identify the situations where risk of exposure could be mitigated or reduced by using PPE, determining the type of PPE and the circumstances during which it should be used, providing PPE in the sizes needed and locations where exposures could occur, training personnel on when and how to use PPE as well as the limitations of its use, and ensuring that PPE is used (OSHA, 2012; TJC, 2019).

In April 2020, both the American Medical Association (AMA) and the American College of Physicians (ACP) issued statements supporting the rights of physicians to speak out on COVID-19 care conditions (Finnegan, 2020). The AMA President Patrice Harris, MD stated that “... no employer should restrict physicians’ freedom to advocate for the best interest of their patients” (AMA, 2020, p. 1). The ACP also published a statement that provided support for physicians. In part it states

Physicians should not be at risk of having their employment terminated, or be otherwise disciplined, for speaking out in a professional manner, within their health care systems or publicly, on conditions and practices related to care of COVID-19 patients (including lack of personal protection equipment) that the physician has direct knowledge of and believes is in conflict with the health and safety of patients and clinicians. Physicians may appropriately decide that going public (including to the news media and on social media) with their concerns is their professional responsibility, to achieve needed change for the health and safety of patients and clinicians, both within the health care facility and more broadly (ACP, 2020, p. 1).

In a search of the internet, it was recommended that nurses look to professional nursing organizations, nursing unions, the American Association of Nurse Attorneys (TAANA), and the State Bar Association in the hunt for a specialized attorney to help with nursing issues. Many resources also recommend having malpractice insurance with legal coverage (Turner, 2018). Such coverage, similar to that provided by Nurses Service Organization (NSO), includes professional liability, license protection, defendant expense benefit, assault, workplace violence counseling, damage to property of others, sexual misconduct, deposition representation, information privacy, first aid, and medical payments (NSO, 2020). None of these resources specifically addresses the concern of the nurse whistleblower.

Relationship to ENA Bylaws, Mission, Vision, and Strategic Initiatives:

According to ENA’s mission to advance excellence in emergency nursing, this resolution embodies care for not only the *“lifelong learning and a culture of inquiry,”* promoting the *“highest quality standards of excellence for patients and emergency nurses,”* and *“honesty and integrity”* but it also addresses the importance of ENA members and their importance in contributing to the emergency nursing profession (ENA, n.d.). This resolution supports independent research and helps provide resources for nurses to ensure that the highest level of integrity and honesty is maintained by helping to ensure that nurses who speak up for patient and nurse’s safety are able to find legal resources when necessary.

ENA’s vision to be the premier organization for the emergency nursing community on an international level is addressed through the research and support of emergency members highlighted in this resolution (ENA, n.d.). By providing and supporting additional research and support for members surrounding ethical, legal, and safety concerns, ENA will further demonstrate their support for the emergency nursing profession.

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ENA's strategic plan goals including practice environment, education, community, and culture support the statements of this resolution (ENA, n.d.).

Financial Consideration/Operations Impact:

The scope of work outlined in the resolved clauses has a fiscal impact of greater than \$25,000. Upon final outcomes of General Assembly, initiatives will be evaluated for resource planning in alignment with ENA's strategic plan and operational goals.

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ENA General Assembly Reference Guide

DELEGATION

1. Each state council shall determine its own method for delegate selection by using a point system, election or lottery.
2. Each state council is encouraged to take the following eligibility criteria into consideration in choosing its delegates:
 - Attendance at 50 percent of all scheduled meetings of the state council or local component since the previous General Assembly.
 - Service in an elected or appointed position at the local, state or national level during the prior three years; or
 - Participation in at least one of the following activities related to emergency nursing since the previous General Assembly:
 - Lecturer (other than that which is required in a professional nursing role)
 - Projects, such as public education, legislative involvement and chapter fundraising
 - Research in emergency nursing
 - Publishing on topics related to emergency care
 - Certification through the Board of Certification for Emergency Nursing (BCEN)
3. At least 30 days prior to the General Assembly, the ENA national office will send confirmation of delegate status to each delegate and alternate delegate. All proposed bylaws amendments, resolutions, rules and procedures will be made available on the ENA website.
4. Delegates and alternate delegates shall attend all business sessions of the General Assembly.

RESOLUTIONS

5. Resolutions must be submitted by the published deadline, to be considered during General Assembly.
6. Resolutions received at ENA headquarters will be forwarded to the Resolutions Committee, legal counsel, parliamentarian and ENA Board of Directors for review for compatibility with ENA's purpose, mission, values, objectives, bylaws and standing rules, federal and state laws and financial feasibility.
7. Resolutions that do not comply shall be returned to the authors with explanation.
8. Proposed resolutions submitted will be reviewed by the ENA Board of Directors for possible implementation prior to General Assembly.
9. The Resolutions Committee shall work with authors to combine proposed resolutions that have the same or similar subject matter.
10. Resolutions brought before the General Assembly shall include the exact text of the proposal along with the financial considerations and operational implications. They may also include comments from the Resolutions Committee and the ENA Board of Directors.



BYLAWS AMENDMENT PROPOSALS

11. Bylaws amendment proposals received at ENA headquarters will be forwarded to the Resolutions Committee, legal counsel, parliamentarian and ENA Board of Directors for review for compatibility with ENA's purpose, mission, values, objectives, bylaws and standing rules, federal and state laws and financial feasibility.
12. Bylaws amendment proposals that do not comply shall be returned to the authors with explanation.
13. The Resolutions Committee shall work with authors to combine proposed bylaws amendments that have the same or similar subject matter.
14. Proposals to amend the ENA Bylaws shall include the exact text of the proposal.. They may also include comments from the Resolutions Committee and ENA Board of Directors.

MISCELLANEOUS

15. The Resolutions Committee shall be authorized to correct article and section designations, punctuation and references in the Bylaws, Election Rules, and General Assembly Standing Rules of Procedure as may be necessary to reflect the intent of the General Assembly.
16. The draft General Assembly minutes shall be sent electronically to all state captains and the ENA Board of Directors for a 10-day review and comment period. The minutes shall be subsequently approved by the Resolutions Committee.
17. The status of resolutions adopted by the General Assembly will be made available to the ENA membership.

2020–2025 Emergency Nurses Association Strategic Plan



MISSION STATEMENT:

To advance excellence in emergency nursing

CORE VALUES:



Integrity

Evidenced by openness and honesty in decisions, communications and actions



Diversity & Inclusion

Evidenced by an organization that creates a culture and climate of mutual respect, inclusivity, and equity



Collaboration

Evidenced by a professional community characterized by mutual respect, service to the benefit of others, and appreciation of our members' contributions



Excellence

Evidenced by a culture of inquiry dedicated to innovation, compassion, and global commitment to best practice

Credo

Derived from the vision of our co-founders Judith Kelleher and Anita Dorr, our priorities are guided by these values and beliefs:

- Inclusion and the contributions of nursing, in **collaboration** with healthcare partners worldwide, help explore **innovative** solutions to the challenges of emergency care delivery.
- **Compassion** is an essential element of the emergency nursing profession.
- We should embrace **inclusion, diversity and mutual respect** in all interactions and initiatives to promote the essential value of different perspectives and experiences within emergency nursing.
- A team-based delivery of resources meet the highest quality standards of **excellence** for patients and emergency nurses.
- Emergency care evolves through **lifelong learning and a culture of inquiry** for the discovery and integration of evidence-based research into emergency nursing practice.
- Our Code of Ethics establishes and encourages adherence to principles of **honesty and integrity**.
- The **spirit of philanthropy** allows the advancement of the profession of emergency nursing and improves the lives of patients throughout the world.
- We place the highest **value on our members for their contributions** to the care of patients and their families, the emergency nursing profession, and our organization.

Vivid Description of an Envisioned Future

VISION

Be the premier organization for the emergency nursing community worldwide

VIVID DESCRIPTION

Emergency Nurses

- Emergency nurses practicing worldwide have the appropriate evidence-based resources needed to provide the best care possible
- Emergency nurses globally have access to high quality education and resources to provide excellent care
- Emergency nurses are working in an ideal practice environment
- Emergency nurses provide care using their full scope of practice
- Every emergency nurse receives the highest level of specialized training and education offered

ENA as an organization

- ENA is recognized as the preeminent worldwide resource in emergency nursing
- ENA is indispensable to the global community
- All emergency nurses are members of the ENA community
- ENA is the primary source of evidence-based emergency nursing resources and standards of care

Patients

- All patients (children, adults, seniors) receive high quality, specialized emergency care in all settings
- Lower morbidity and mortality is demonstrated for emergency patients as a result of leading-edge emergency nursing education and training provided by ENA
- Patients receive expedited ED visits with streamlined admission to needed inpatient beds

The Public

- Legislators appreciate and advocate for the knowledge and depth of care provided in the ED
- Emergency nurses provide a key voice in public health epidemics
- Communities are educated on injury prevention to avoid preventable visits to the ED

Goals, Objectives & Strategies

PRACTICE ENVIRONMENT GOAL:



EMERGENCY NURSES WILL WORK IN AN IDEAL PRACTICE ENVIRONMENT TO PROVIDE THE HIGHEST QUALITY OF EMERGENCY CARE IN THE SAFEST WAY.

Objectives:

1. Improve quality and safety in emergency nursing practice
2. Prevent violence in the ED
3. Establish and disseminate standards for emergency nursing practice
4. Improve recruitment and retention of emergency nurses

Strategies:

1. Develop and compile comprehensive institutional safety assessment and quality measures for emergency nursing
2. Lead efforts to develop and disseminate data and resources to address workplace violence
3. Establish and disseminate standards for emergency nurses to provide care using their full scope of practice
4. Identify and disseminate best practices for emergency nursing staffing
5. Generate and promote new knowledge in emergency nurse wellness
6. Advocate for emergency departments to have the necessary resources and supplies for the highest quality, safe practice and safe care

EDUCATION GOAL:



EMERGENCY NURSES HAVE THE HIGHEST QUALITY EDUCATIONAL RESOURCES TO PROVIDE THE HIGHEST LEVEL OF CARE.

Objectives:

1. Expand research to increase the generation of new knowledge in emergency nursing
2. Expand the translation of best evidence into emergency nursing practice
3. Increase development and delivery of educational content for emergency nurses worldwide.

Strategies:

1. Identify research opportunities to meet the future needs of emergency nurses
2. Identify and prioritize emergency nursing education gaps
3. Expand ENA core educational offerings for all levels of emergency nurses
4. Create new educational offerings that cover the breadth and depth of emergency nursing
5. Create the framework for the gold standard for emergency nursing orientation
6. Influence academia to include emergency nursing content
7. Ensure relevance of instructional design and delivery for all learners to match how and where they learn

COMMUNITY GOAL:

ENA IS THE AUTHORITY AND PREMIER ORGANIZATION FOR EMERGENCY NURSING WORLDWIDE.

Objectives:

1. Increase membership
2. Increase collaboration and partnerships that advance emergency nursing
3. Increase ENA presence in every ED
4. Expand the impact of the ENA Foundation
5. Expand the voice of the emergency nurse in healthcare policy and public health

Strategies:

1. Evaluate membership categories
2. Strengthen member value proposition
3. Define strategic approach to partnerships and organizations that advance emergency nursing
4. Increase ENA brand and product awareness in EDs
5. Implement education and advocacy strategies for injury prevention and public health issues
6. Develop partnerships and a framework for emergency nurses to respond to disasters

CULTURE GOAL:

ENA'S CULTURE IS DYNAMIC, ENSURING RELEVANCE IN A CHANGING ENVIRONMENT TO ADVANCE THE MISSION.

Objectives:

1. Utilize best-in-class technology to support the development and delivery of leading-edge education, research and practice resources and member engagement
2. Employ best practices in governance and leadership
3. Nurture and grow an organizational culture and talent consistent with ENA's values
4. Manage expenses and resource utilization consistent with ENA's goals and objectives

Strategies:

1. Implement new and emerging technologies to enhance the user experience
2. Identify and implement best practices in governance
3. Strengthen support of State Councils and Chapters to provide best practices in strategic decision making and leadership
4. Implement a comprehensive staff development program
5. Implement actions that advance diversity and inclusivity



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ASSURANCE

**EMERGENCY NURSES ASSOCIATION AND AFFILIATE
AUDITED CONSOLIDATED FINANCIAL STATEMENTS
YEARS ENDED DECEMBER 31, 2019 AND 2018**

MUELLER

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INDEPENDENT AUDITOR'S REPORT

Finance Committee
Emergency Nurses Association
ENA Foundation Board of Trustees
Schaumburg, Illinois

Report on the Consolidated Financial Statements

We have audited the accompanying consolidated financial statements of Emergency Nurses Association and Affiliate, which comprise the consolidated statements of financial position as of December 31, 2019 and 2018 and the related consolidated statements of activities and changes in nets assets, functional expenses and cash flows for the years then ended and the related notes to the consolidated financial statements.

Management's Responsibility for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the consolidated financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

Auditor's Responsibility, Continued

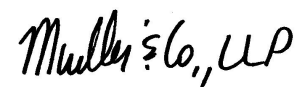
We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of Emergency Nurses Association and Affiliate as of December 31, 2019 and 2018, and the consolidated changes in their net assets and their cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Emphasis of Matter

As discussed in Note 2 of the consolidated financial statements, for the year ended December 31, 2019, Emergency Nurses Association and Affiliate adopted Accounting Standards Update No. 2014-09, *Revenue from Contracts with Customers (Topic 606)* and Accounting Standards Update No. 2018-08, *Not-for –Profit Entities (Topic 958) – Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made*. Our opinion is not modified with respect to this matter.



Elgin, Illinois
June 29, 2020

EMERGENCY NURSES ASSOCIATION AND AFFILIATE
CONSOLIDATED STATEMENTS OF FINANCIAL POSITION
DECEMBER 31, 2019 AND 2018

ASSETS

	<u>2019</u>	<u>2018</u>
Current assets:		
Cash and cash equivalents	\$ 1,741,436	1,036,093
Accounts receivable, net of allowance for doubtful accounts of \$197,000 and \$163,534 for 2019 and 2018, respectively	1,707,684	1,928,635
Grants receivable	16,723	-
Other receivables	47,188	47,080
Inventory	50,552	114,827
Prepaid expenses and other current assets	943,648	663,465
Total current assets	4,507,231	3,790,100
Property and equipment, net	12,266,872	12,361,890
Property held for sale	2,450,000	2,450,000
Investments	19,826,403	18,824,849
Total assets	\$ <u>39,050,506</u>	<u>37,426,839</u>

LIABILITIES AND NET ASSETS

Current liabilities:		
Accounts payable	\$ 773,746	789,412
Wages and benefits payable	944,905	824,467
Accrued expenses	612,605	702,803
Credits on customer accounts	230,910	630,284
Assessments payable	1,330,139	1,616,540
Line of credit	1,099,209	1,107,591
Current portion of deferred revenue	2,579,300	2,842,670
Current portion of bond payable	337,313	337,040
Total current liabilities	7,908,127	8,850,807
Long-term liabilities:		
Interest rate swap agreement	712,437	284,591
Deferred revenue, net of current portion	1,182,892	896,522
Bond payable, net of current portion	9,210,518	9,547,831
Total long-term liabilities	11,105,847	10,728,944
Total liabilities	19,013,974	19,579,751
Net assets:		
Without donor restrictions:		
Undesignated	16,292,887	14,654,437
Board designated	2,427,354	2,160,804
Total without donor restrictions	18,720,241	16,815,241
With donor restrictions	1,316,291	1,031,847
Total net assets	20,036,532	17,847,088
Total liabilities and net assets	\$ <u>39,050,506</u>	<u>37,426,839</u>

The accompanying notes are an integral part of the consolidated financial statements.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE
CONSOLIDATED STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS
YEARS ENDED DECEMBER 31, 2019 AND 2018

	2019			2018		
	WITHOUT DONOR RESTRICTIONS	WITH DONOR RESTRICTIONS	TOTAL	WITHOUT DONOR RESTRICTIONS	WITH DONOR RESTRICTIONS	TOTAL
Revenue, Gains and Other Support:						
Courses	\$ 14,897,385	-	14,897,385	11,959,342	-	11,959,342
Membership dues	4,258,905	-	4,258,905	4,264,519	-	4,264,519
Conferences	3,333,411	-	3,333,411	2,758,476	-	2,758,476
Publications	760,483	-	760,483	832,703	-	832,703
Marketplace	586,580	-	586,580	536,654	-	536,654
Sponsorships	499,010	-	499,010	398,000	-	398,000
Royalties	515,554	-	515,554	473,436	-	473,436
Other	480,881	-	480,881	202,965	-	202,965
Grants	80,988	-	80,988	26,953	-	26,953
Mailing lists	19,781	-	19,781	19,978	-	19,978
Contributions	128,764	421,128	549,892	110,084	393,426	503,510
Donated services	95,000	-	95,000	95,000	-	95,000
Special event revenue, net of direct expenses	52,389	-	52,389	49,217	-	49,217
Net assets released from restrictions	340,158	(340,158)	-	307,137	(307,137)	-
Total revenue, gains and other support	26,049,289	80,970	26,130,259	22,034,464	86,289	22,120,753
Expenses:						
Programs, grants and scholarships	17,091,336	-	17,091,336	15,390,050	-	15,390,050
Management and general	7,882,684	-	7,882,684	7,072,558	-	7,072,558
Fundraising and development	1,463,201	-	1,463,201	1,376,682	-	1,376,682
Total expenses	26,437,221	-	26,437,221	23,839,290	-	23,839,290
Increase (decrease) in net assets - before other income	(387,932)	80,970	(306,962)	(1,804,826)	86,289	(1,718,537)
Other income (expense):						
Interest expense	(403,661)	-	(403,661)	(318,178)	-	(318,178)
Rental income	-	-	-	142,522	-	142,522
Investment income (loss), net	3,124,439	203,474	3,327,913	(925,995)	(52,476)	(978,471)
Loss on interest rate swap agreement	(427,846)	-	(427,846)	(284,591)	-	(284,591)
Loss on property held for sale	-	-	-	(49,297)	-	(49,297)
	2,292,932	203,474	2,496,406	(1,435,539)	(52,476)	(1,488,015)
Change in net assets	1,905,000	284,444	2,189,444	(3,240,365)	33,813	(3,206,552)
Net assets, beginning of year	16,815,241	1,031,847	17,847,088	20,055,606	998,034	21,053,640
Net assets, end of year	\$ 18,720,241	1,316,291	20,036,532	16,815,241	1,031,847	17,847,088

The accompanying notes are an integral part of the consolidated financial statements.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE
CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES
YEAR ENDED DECEMBER 31, 2019

	PROGRAMS, GRANTS AND SCHOLARSHIPS	MANAGEMENT AND GENERAL	FUNDRAISING AND DEVELOPMENT	TOTAL
Payroll expenses:				
Salaries and wages	\$ 4,592,171	3,598,337	833,175	9,023,683
Employee benefits	959,231	722,663	170,821	1,852,715
Payroll taxes	345,611	245,559	59,084	650,254
	<u>5,897,013</u>	<u>4,566,559</u>	<u>1,063,080</u>	<u>11,526,652</u>
Operating expenses:				
Bank charges and credit card processing fees	-	276	-	276
Advertising and promotion	156,716	-	-	156,716
Discount on sales	174,041	-	-	174,041
Bad debt expense	39,553	-	-	39,553
Bank and credit card fees	-	427,023	-	427,023
Computer	176,130	655,699	158	831,987
Conferences	2,340,523	106,032	39,800	2,486,355
Cost of goods sold	1,830,712	-	-	1,830,712
Depreciation and amortization	299,642	127,180	27,085	453,907
Fulfillment and warehousing services	271,831	-	-	271,831
Grants and scholarships	871,360	-	-	871,360
Insurance	55,441	51,066	-	106,507
Miscellaneous	113,619	82,833	302	196,754
Postage, freight and shipping	256,042	3,890	20,612	280,544
Printing	309,024	11,623	7,139	327,786
Professional services	471,390	553,790	184,965	1,210,145
Provision for UBIT	51,852	-	-	51,852
Public relations	26,455	450	-	26,905
Recruitment fees	1,125	68,819	-	69,944
Stipends	143,690	142,000	-	285,690
Supplies and equipment	69,255	93,392	6,011	168,658
Temporary workers	211,305	39,632	-	250,937
Training	36,068	222,051	1,958	260,077
Travel	545,043	313,639	24,492	883,174
	<u>8,450,817</u>	<u>2,899,395</u>	<u>312,522</u>	<u>11,662,734</u>
Occupancy expenses:				
Building maintenance	126,100	94,576	21,825	242,501
Depreciation	115,932	86,949	20,065	222,946
Insurance	9,293	6,969	1,608	17,870
Real estate taxes	190,184	142,639	32,916	365,739
Rent	38,646	37,130	-	75,776
Telephone	7,892	5,919	1,366	15,177
Utilities	56,731	42,548	9,819	109,098
	<u>544,778</u>	<u>416,730</u>	<u>87,599</u>	<u>1,049,107</u>
Assessment expenses:				
State/chapter membership dues	527,315	-	-	527,315
ENPC/TNCC	1,671,413	-	-	1,671,413
	<u>2,198,728</u>	<u>-</u>	<u>-</u>	<u>2,198,728</u>
	<u>\$ 17,091,336</u>	<u>7,882,684</u>	<u>1,463,201</u>	<u>26,437,221</u>

The accompanying notes are an integral part of the consolidated financial statements.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE
CONSOLIDATED STATEMENT OF FUNCTIONAL EXPENSES
YEAR ENDED DECEMBER 31, 2018

	PROGRAMS, GRANTS AND SCHOLARSHIPS	MANAGEMENT AND GENERAL	FUNDRAISING AND DEVELOPMENT	TOTAL
Payroll expenses:				
Salaries and wages	\$ 4,158,336	3,040,238	775,448	7,974,022
Employee benefits	934,075	675,292	177,311	1,786,678
Payroll taxes	309,453	204,551	53,920	567,924
	<u>5,401,864</u>	<u>3,920,081</u>	<u>1,006,679</u>	<u>10,328,624</u>
Operating expenses:				
Advertising and promotion	58,490	-	235	58,725
Discount on sales	147,762	-	-	147,762
Bad debt expense	36,070	-	-	36,070
Bank and credit card fees	-	332,175	-	332,175
Computer	211,365	589,966	138	801,469
Conferences	2,458,713	65,586	29,010	2,553,309
Cost of goods sold	499,837	-	-	499,837
Depreciation and amortization	264,604	136,140	22,656	423,400
Fulfillment and warehousing services	266,662	-	-	266,662
Grants and scholarships	685,292	1,400	-	686,692
Insurance	56,360	46,167	-	102,527
Miscellaneous	51,491	94,074	4,678	150,243
Postage, freight and shipping	271,082	4,468	31,432	306,982
Printing	351,185	21,122	1,318	373,625
Professional services	645,529	434,235	179,161	1,258,925
Provision for UBIT	48,833	-	-	48,833
Public relations	6,371	-	-	6,371
Recruitment fees	2,800	142,120	-	144,920
Stipends	175,267	142,000	-	317,267
Supplies and equipment	73,369	78,145	3,250	154,764
Temporary workers	325,543	162,743	11,758	500,044
Training	41,803	163,922	509	206,234
Travel	443,936	312,804	15,520	772,260
	<u>7,122,364</u>	<u>2,727,067</u>	<u>299,665</u>	<u>10,149,096</u>
Occupancy expenses:				
Building maintenance	89,816	64,864	11,640	166,320
Depreciation	112,522	81,265	14,586	208,373
Insurance	10,174	7,348	1,319	18,841
Real estate taxes	271,587	196,147	35,206	502,940
Rent	34,887	33,519	-	68,406
Telephone	5,923	4,278	768	10,969
Utilities	52,600	37,989	6,819	97,408
	<u>577,509</u>	<u>425,410</u>	<u>70,338</u>	<u>1,073,257</u>
Assessment expenses:				
State/chapter membership dues	584,405	-	-	584,405
ENPC/TNCC	1,703,908	-	-	1,703,908
	<u>2,288,313</u>	<u>-</u>	<u>-</u>	<u>2,288,313</u>
	<u>\$ 15,390,050</u>	<u>7,072,558</u>	<u>1,376,682</u>	<u>23,839,290</u>

The accompanying notes are an integral part of the consolidated financial statements.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE

CONSOLIDATED STATEMENTS OF CASH FLOWS

YEARS ENDED DECEMBER 31, 2019 AND 2018

	2019	2018
Cash provided by (applied to) operating activities:		
Change in net assets	\$ 2,189,444	(3,206,552)
Adjustments to reconcile change in net assets to net cash applied to operating activities:		
Depreciation and amortization of property and equipment	669,061	623,708
Amortization of debt issuance costs	7,792	8,065
Loss on interest rate swap agreement	427,846	284,591
Loss on property held for sale	-	49,297
Bad debt (recovery) expense	33,466	(13,567)
Realized and unrealized (gain) loss on investments	(2,737,409)	1,596,869
Contributions restricted for investment in endowments	(106,009)	(84,394)
Decrease (increase) in assets:		
Accounts receivable, net of change in allowance for doubtful accounts	187,485	(376,529)
Grants receivable	(16,723)	-
Other receivables	(108)	(30,326)
Inventory	64,275	(53,526)
Prepaid expenses and other current assets	(280,183)	(284,083)
Increase (decrease) in liabilities:		
Accounts payable	(15,666)	416,387
Wages and benefits payable	120,438	66,643
Accrued expenses	(90,198)	46,306
Credits on customer accounts	(399,374)	(269,679)
Assessments payable	(286,401)	14,503
Deferred revenue	23,000	(32,166)
	<u>(209,264)</u>	<u>(1,244,453)</u>
Cash provided by (applied to) investing activities:		
Purchases of property and equipment	(574,043)	(7,399,603)
Purchase of investments	(2,740,647)	(8,113,745)
Proceeds from sale and maturities of investments	4,476,502	9,430,555
	<u>1,161,812</u>	<u>(6,082,793)</u>
Cash provided by (applied to) financing activities:		
Collections of contributions restricted for investment in endowments	106,009	84,394
Proceeds from line of credit	-	1,107,591
Payments on line of credit	(8,382)	-
Proceeds from bond payable	-	6,039,735
Payments on bonds payable	(344,832)	-
	<u>(247,205)</u>	<u>7,231,720</u>
Net increase (decrease) in cash and cash equivalents	705,343	(95,526)
Cash and cash equivalents, beginning of year	<u>1,036,093</u>	<u>1,131,619</u>
Cash and cash equivalents, end of year	<u>\$ 1,741,436</u>	<u>1,036,093</u>
Other cash flow information:		
Interest paid	<u>\$ 403,661</u>	<u>318,178</u>
Income taxes paid	<u>\$ 53,000</u>	<u>88,000</u>

The accompanying notes are an integral part of the consolidated financial statements.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS****NOTE 1 - NATURE OF OPERATIONS**

Emergency Nurses Association and Affiliate (Organization) consists of Emergency Nurses Association (ENA) and ENA Foundation (ENAF).

ENA is a not-for-profit, professional association whose mission is to advocate for patient safety and excellence in emergency nursing practice. ENA, whose national headquarters is located in Schaumburg, Illinois, was founded in 1970. Paid membership is approximately 44,500.

ENAF was established in 1991 to operate exclusively for charitable, educational and scientific purposes relating to emergency nursing. ENAF activities benefit emergency nurses, patients and the public through provision of undergraduate, advance practice, doctoral and continuing education scholarships, and research grants.

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES**Principles of Consolidation**

The accompanying consolidated financial statements include the accounts of ENA and ENAF. In 2016, management oversight of ENAF was the responsibility of the ENAF Management Board. During 2017 this responsibility changed to the ENAF Board of Trustees (ENAF Board). The sole voting member of ENAF is the ENA. Since ENA has control of the ENAF Board, accounting principles generally accepted in the United States of America require that the financial position and activities of both organizations be consolidated. All significant intercompany accounts and transactions have been eliminated in consolidation.

Cash and Cash Equivalents

For purposes of the statement of cash flows, the Organization considers all highly liquid instruments with an original maturity of three months or less to be cash equivalents.

Accounts Receivable

Accounts receivable consists of amounts due from Trauma Nursing Core Courses (TNCC), Emergency Nursing Pediatric Courses (ENPC), the sale of advertising space in various ENA publications and royalty arrangements with vendors for ENA educational offerings. Management reviews the aging of the course receivables to determine the level of allowance for doubtful accounts to establish against the course receivables.

Inventory

Inventory is stated at the lower of cost or net realizable value, determined by the first-in, first-out (FIFO) method. As of December 31, 2019 and 2018, there was no allowance for obsolete and excess inventory recorded.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES, CONTINUED****Investments**

Long-term and short-term investments in marketable securities with readily determinable fair values are presented in the consolidated financial statements at fair value. Short-term investments are those with a maturity of greater than three months but no more than one year. Long-term investments with a maturity of greater than one year are mutual funds or equity securities. The fair values of investments are based on quoted market prices, when available, for those investments. Both realized and unrealized gains and losses are reported as investment income in the consolidated statement of activities and changes in net assets. The Organization's investments are exposed to various risks, such as interest rate, credit and overall market volatility. Due to these risk factors, it is reasonably possible that changes in the values of investments will occur in near term and will materially affect the amounts reported in the consolidated financial statements and changes in net assets.

Property and Equipment

Property and equipment is stated at cost and is depreciated and amortized over the estimated useful lives of the related assets using the straight-line method. Purchases greater than \$2,500 are capitalized to property and equipment. Costs of repairs and maintenance are charged to expense as incurred.

Property Held for Sale

Property held for sale is recorded at the lower of cost or estimated fair value. During 2018, it was determined that the property held for sale was impaired. The Organization recognized an impairment loss of \$49,297. At December 31, 2019 and 2018, property held for sale in the amount of \$2,450,000 consisted of the Organization's previous operating headquarters in Des Plaines, Illinois.

Credits on Customer Accounts

Credits on customer accounts represent overpayments on accounts of ENA course directors relating to course fees. These overpayments are not automatically refunded, but instead are held on the account until the course director provides instruction as to the disposition of the credit. The credits are typically applied to future courses.

Assessments Payable

Assessments payable are amounts due to ENA State Councils and Chapters for their share of paid memberships and course fees. Assessments are calculated and paid quarterly.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES, CONTINUED****Interest Rate Swap Agreements**

Interest rate swap agreements are reflected at fair value in the Organization's consolidated statement of financial position and the related portions of the debt being hedged are reflected at an amount equal to its carrying value.

Under accounting principles generally accepted in the United States of America, not-for-profit entities may elect to use a simplified hedge accounting approach to account for interest rate swap agreements that are entered into for the purpose of economically converting a variable-rate borrowing into a fixed-rate borrowing. Under this approach, the statement of activity charge for interest expense is similar to the amount that would result if the Organization had directly entered into a fixed-rate borrowing instead of a variable-rate borrowing and a receive-variable, pay-fixed interest rate swap. The Organization elected to use the simplified accounting approach.

Net Assets

Net assets, revenues, gains and losses are classified based on the existence or absence of donor or grantor imposed restrictions. Accordingly, net assets and changes therein are classified and reported as follows:

Net Assets Without Donor Restrictions – Net assets available for use in general operations and not subject to donor-imposed restrictions. Currently the ENA Board of Directors (ENA Board) has designated funds for ENAF endowments as well as to fund projects that fall within the criteria of the ENA spending policy. The ENAF Board has also designated funds for the ENAF endowments.

Net Assets With Donor Restrictions – Net assets subject to donor-imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Other donor-imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. Donor-imposed restrictions are released when a restriction expires, that is, when the stipulated time has elapsed, when the stipulated purpose for which the resource was restricted has been fulfilled, or both.

Concentration of Credit Risk

The Organization maintains its cash in bank deposits which, at times, may exceed federally insured limits. The Organization's uninsured cash balance was \$1,156,576 and \$469,385 at December 31, 2019 and 2018, respectively. The Organization believes it is not exposed to any significant credit risk on cash.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES, CONTINUED****Concentration of Credit Risk, Continued**

The Organization maintains its investments in broker accounts which, at times, may exceed federally insured limits. As of December 31, 2019 and 2018, the Organization's uninsured investment balance was \$18,926,091 and \$17,920,644, respectively. The Organization believes it is not exposed to any significant credit risk on cash or investments.

Revenue from Contracts with Customers

The Organization derives a significant portion of its revenue from revenue sources that involve contracts with customers. Those sources include courses, membership dues, conferences, publications, marketplace, sponsorships, royalties and other revenue. Revenues are recognized when control of these goods or services are transferred to its customers, in an amount that reflects the consideration the Organization expects to be entitled to in exchange for those goods or services. The Organization does not have any significant financing components as all payments are received within a year of the services being provided. Costs incurred to obtain a contract will be expensed as incurred when the amortization period is less than a year. All contracts contain specified pricing for each performance obligation thus allocation of the transaction price is not necessary.

Disaggregation of Revenue from Contracts with Customers

The following table disaggregates the Organization's revenue based on the timing of satisfaction of performance obligations for the years ended December 31:

	<u>2019</u>	<u>2018</u>
Performance obligations satisfied at a point in time	\$ 20,119,009	16,246,359
Performance obligations satisfied over time	\$ 5,213,200	5,179,736

Revenues from performance obligations satisfied at a point in time consist of revenues from courses, conferences, publication advertising revenue, marketplace, event sponsorships and other revenues. Revenues from performance obligations satisfied over time consist of membership dues, publication editorial support and profit sharing, corporate engagement council sponsorships and royalties.

Performance Obligations

For performance obligations related to courses, control transfers to the customer at a point in time. Courses occur on specified dates and course fee revenue is recorded when the course is held. Revenue from the sale of manuals is recognized upon shipment to the customer.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES, CONTINUED****Revenue from Contracts with Customers, Continued****Performance Obligations, Continued**

For performance obligations related to membership dues, control transfers to the customer over time. The Organization offers membership categories of one year, three years, five years and lifetime. Revenue is recorded in equal installments as control is passed to the customer over the term of the membership. The Organization has determined that the average career span of an emergency professional is thirteen years and recognizes lifetime memberships over a thirteen-year period.

For performance obligations related to conferences, control transfers to the customer at a point in time. Conferences occur at specified dates and revenue is recorded at the time the conference is held.

For performance obligations related to publication advertising revenue, control transfers at a point in time. Revenue is recorded at the time the advertisement is printed or advertising service is performed. For performance obligations related to publication editorial support and profit sharing, control transfers to the customer over time in equal installments as control is passed to the publisher over the term of the agreement.

For performance obligations related to marketplace, control transfers to the customer at a point in time. Revenue from marketplace is recognized upon shipment of goods to customers.

For performance obligations related to event sponsorships, control transfers to the customer at a point in time. Events occur at specified dates and revenue is recorded at the time the event is held. For performance obligations related to corporate engagement council sponsorships, control transfers to the customer over time. All obligations associated with corporate engagement council sponsorships are satisfied in the year in which the contract was obtained.

For performance obligations related to royalty revenue, control transfers to the customer over time. The Organization recognizes royalty revenue using the output method based on terms agreed upon in contracts established with customers. The Organization receives a percentage of gross income in exchange for a customer's usage of the Organization's name and logo. The Organization also receives commissions based on net revenue generated for promotion of a job board on the Organization's website.

For performance obligations related to other revenues, control transfers to the customer at a point in time. For the year ended December 31, 2019, a significant portion of the other revenues related to postponing the close date of the property held for sale.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES, CONTINUED****Revenue from Contracts with Customers, Continued**

Conference fees received in advance are deferred until the conference takes place. Course fees received in advance are deferred until the course takes place. Membership dues received in advance are deferred until the period to which the dues relate. The deferred amounts as of December 31, 2019 and 2018 are included in deferred revenue on the consolidated statements of financial position.

Contributions

Contributions received are recorded as without donor restrictions or with donor restrictions, depending on the existence and/or nature of any donor restrictions. Contributions not collected at the end of the year are disclosed as pledges receivable and are recorded at their estimated fair values. They are subsequently valued at the present value of future cash flows. All contributions are expected to be collected in one year or less.

All donor-restricted support is reported as an increase in net assets with donor restrictions, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or a purpose restriction is accomplished), net assets with donor restrictions are reclassified to net assets without donor restriction and reported in the consolidated statement of activities and changes in net assets as net assets released from restrictions.

Accounting Estimates

The preparation of consolidated financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, disclosure of contingent assets and liabilities at the date of the consolidated financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

Income Taxes

ENA and ENAF are exempt from federal and state income taxes under Internal Revenue Code Section 501(c)(3). ENA pays unrelated business income tax on advertising revenues derived from various ENA publications, as well as sponsorship revenues that provide marketing opportunities for the sponsor. Unrelated business income tax for the years ended December 31, 2019 and 2018 amounted to \$51,852 and \$48,833, respectively. Unrelated business income tax expense is included in programs, grants and scholarship expense on the consolidated statement of functional expenses.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES, CONTINUED****Income Taxes, Continued**

Management has concluded that as of December 31, 2019 and 2018, there were no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the consolidated financial statements. The Organization would account for any potential interest or penalties related to possible future liabilities for unrecognized income tax benefits as income tax expense. The Organization is no longer subject to examination by federal, state or local tax authorities for periods before 2016.

Functional Expenses

The costs of program and supporting service activities have been summarized on a functional basis in the consolidated statements of activities and changes in net assets. The consolidated statements of functional expenses present the natural classification detail of expenses by function. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

The consolidated financial statements report certain categories of expenses that are attributable to more than one program or supporting function. Therefore, expenses require allocation on a reasonable basis that is consistently applied. The Organization utilizes a direct coding methodology for a majority of their expenses, however, expenses classified as occupancy expenses on the consolidated statements of functional expenses are allocated on the basis of estimates of time and effort.

Going Concern Evaluation

In accordance with accounting principles generally accepted in the United States of America, management performed an evaluation to determine if adverse conditions or events, considered in the aggregate, raise substantial doubt about the Organization's ability to continue as a going concern. Management's assessment did not identify any conditions or events raising substantial doubt about the Organization's ability to continue as a going concern for the period from June 29, 2020 to June 29, 2021.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES, CONTINUED****Change in Accounting Principle – Revenue from Contracts**

The Organization has adopted the Financial Accounting Standards Board (FASB) issued ASU No. 2014-09 – Revenue from Contracts with Customers (Topic 606) as of January 1, 2019 using the full retrospective method. Topic 606 supersedes or replaces nearly all revenue recognition guidance under accounting principles generally accepted in the United States of America. These standards establish a new contract and control-based revenue recognition model, change the basis for deciding when revenue is recognized over time or at a point in time, and expand disclosures about revenue. Analysis of the various provisions of this standard resulted in no significant changes in the way the Organization recognizes revenue, and therefore no changes to the previously issued audited consolidated financial statements were required on a retrospective basis. The presentation and disclosure of revenue from contracts with customers has been enhanced in accordance with Topic 606 for all periods presented with no effect on net assets.

The Organization elected to use the portfolio approach practical expedient for revenues derived from courses, membership dues, conferences, publications, marketplace and sponsorships. The Organization's contracts with customers for conferences, membership dues, courses, publications, marketplace and sponsorships contain similar terms and as a result, the Organization has elected to apply its revenue recognition policies to a portfolio of contracts with similar characteristics. The Organization does not expect the results of doing so to differ materially from applying the guidance to individual contracts.

Change in Accounting Principle – Contributions Received and Made

In June 2018, the FASB issued ASU No. 2018-08, Not-for-Profit Entities (Topic 958) – Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made as of January 1, 2019. ASU No. 2018-08 improves the current guidance on determining whether transactions are contributions or exchange transactions. It also requires determining if a contribution is conditional on the basis of whether an agreement includes a barrier that must be overcome and either a right of return of assets transferred or a right of release of a promisor's obligation to transfer assets. The Organization has implemented the provisions of ASU No. 2018-08 in the consolidated financial statements on a modified prospective basis. Accordingly, there is no effect on net assets in connection with the implementation of ASU No. 2018-08.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES, CONTINUED****New Accounting Standard – Leases**

In February 2016, the FASB issued ASU No. 2016-02, Leases, which is intended to improve financial reporting about leasing transactions. ASU No. 2016-02 requires that leased assets be recognized as assets on the statement of financial position and the liabilities for the obligations under the lease also be recognized on the statement of financial position. ASU No. 2016-02 requires disclosures to help investors and other financial statement users better understand the amount, timing and uncertainty of cash flows arising from leases. The required disclosures include qualitative and quantitative requirements. ASU No. 2016-02 is effective for fiscal years beginning after December 15, 2020 and interim periods within those fiscal years. Early adoption is permitted. ASU No. 2016-02 must be adopted using a modified retrospective transition, and provides for certain practical expedients. Transition will require application of the new guidance at the beginning of the earliest comparative period presented. The Organization is currently evaluating the methods of adoption allowed by ASU No. 2016-02 and the effect that ASU No. 2016-02 is expected to have on its financial position, results of operations, cash flows and related disclosures.

Subsequent Events

Subsequent events have been evaluated through June 29, 2020, the date that the consolidated financial statements were available for issue.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)**NOTE 3 - LIQUIDITY AND AVAILABILITY**

The following tables reflects the Organization's financial assets as of December 31, 2019 and 2018, reduced by amounts not available for general expenditure within one year. Financial assets are considered unavailable when illiquid or not convertible to cash within one year, because donors have imposed restrictions on the use of the funds, or because the governing board has set aside the funds for a specific operational contingency reserve.

Liquidity and Availability as of December 31, 2019					
	Total Per Statement of Financial Position	Funds Not Convertible to Cash Within One Year	Less: Funds Restricted by Donors	Less: Funds Restricted by Board for an Operating Reserve	Financial Assets Available for General Expenditures Within One Year
Cash and cash equivalents \$	1,741,436	-	(46,751)	-	1,694,685
Accounts receivable, net	1,707,684	-	-	-	1,707,684
Grants receivable	16,723	-	-	-	16,723
Other receivables	47,188	-	-	-	47,188
Investments	19,826,403	-	(1,269,540)	(2,427,354)	16,129,509
Total financial assets	\$ 23,339,434	-	(1,316,291)	(2,427,354)	19,595,789

Liquidity and Availability as of December 31, 2018					
	Total Per Statement of Financial Position	Funds Not Convertible to Cash Within One Year	Less: Funds Restricted by Donors	Less: Funds Restricted by Board for an Operating Reserve	Financial Assets Available for General Expenditures Within One Year
Cash and cash equivalents \$	1,036,093	-	(30,941)	-	1,005,152
Accounts receivable	1,928,635	-	-	-	1,928,635
Other receivables	47,080	-	-	-	47,080
Investments	18,824,849	-	(1,000,906)	(2,160,804)	15,663,139
Total financial assets	\$ 21,836,657	-	(1,031,847)	(2,106,804)	18,644,006

The Organization's endowment funds consist of donor-restricted endowments. Income from donor-restricted endowments is restricted for specific purposes. As of December 31, 2019 and 2018, donor-restricted endowment funds were not available for general expenditure.

The Organization's board-designated endowment of \$1,925,444 and \$1,658,894 as of December 31, 2019 and 2018, respectively, is subject to an annual spending rate of 5% as described in Note 12. Although the Organization does not intend to spend from this board-designated endowment (other than amounts appropriated for general expenditure as part of the ENAF Board's annual budget approval and appropriation), these amounts could be made available if necessary.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 3 - LIQUIDITY AND AVAILABILITY, CONTINUED**

Additionally, the ENA Board has designated funds within the parameters of the ENA spending policy for utilizing reserves on identified projects. At December 31, 2019 and 2018 there was a balance of \$501,910 with this designation, respectively. Although the Organization intends to spend these funds in accordance with the ENA spending policy referred to above, these amounts could be made available if necessary.

As part of the Organization's liquidity management plan, cash in excess of current needs for expenses are invested in mutual funds. Investments are released to cover operating expenses as needed upon management approval. Additionally, the Organization maintains a line of credit that if deemed necessary can be drawn upon to cover operating expenses (Note 7).

NOTE 4 - PROPERTY AND EQUIPMENT

The useful lives for purposes of computing depreciation and amortization are as follows:

Buildings	40 years
Building improvements	30 - 40 years
Equipment	5 years
Program development	3 - 7 years
Furniture and fixtures	15 years
Computer software	3 - 7 years

Property and equipment is summarized as follows as of December 31, 2019 and 2018:

	<u>2019</u>	<u>2018</u>
Land	\$ 1,492,112	1,492,112
Buildings	2,948,699	2,948,699
Building improvements	5,969,138	5,969,138
Equipment	262,170	254,189
Program development	815,584	805,182
Furniture and fixtures	1,286,753	1,249,399
Computer software	<u>4,810,643</u>	<u>4,544,026</u>
	17,585,099	17,262,745
Less accumulated depreciation and amortization	(<u>5,318,227</u>)	(<u>4,900,855</u>)
	\$ <u>12,266,872</u>	<u>12,361,890</u>

Depreciation expense of property and equipment charged to operations was \$525,913 and \$533,878 for the years ended December 31, 2019 and 2018, respectively. In addition, the Organization amortized development costs (included in programs, grants and scholarship expenses) for the years ended December 31, 2019 and 2018 in the amounts of \$143,148 and \$89,830, respectively.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 5 - INVESTMENTS**

Investment income (loss) for the years ended December 31 2019 and 2018 were as follows:

	<u>2019</u>	<u>2018</u>
Interest and dividends	\$ 615,504	643,398
Investment fees	(25,000)	(25,000)
Unrealized and realized gains (losses)	<u>2,737,409</u>	<u>(1,596,869)</u>
	\$ <u>3,327,913</u>	<u>(978,471)</u>

NOTE 6 - FAIR VALUE MEASUREMENTS

Accounting standards generally accepted in the United States of America establish a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described below:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that management has the ability to access at the measurement date.

Level 2 Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly such as:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 6 - FAIR VALUE MEASUREMENTS, CONTINUED**

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets and liabilities measured at fair value. There have been no changes in the methodologies used at December 31, 2019 and 2018.

Mutual funds: Valued at the closing price as reported by the fund. Mutual funds held by the Organization are open-end mutual funds that are registered with the U.S. Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price.

Interest rate swap: Valued using both observable and unobservable inputs when available and can generally be corroborated by market data.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Organization believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Assets and liabilities reported at fair value consisted of the following at December 31:

Fair Value at December 31, 2019				
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Assets:				
Mutual funds:				
Fixed income:				
Broad domestic	\$ 4,492,275	-	-	4,492,275
High yield bonds	5,099,422	-	-	5,099,422
Short-term bonds	220,060	-	-	220,060
Equity:				
Domestic large cap	5,181,790	-	-	5,181,790
Domestic small/mid cap	1,001,768	-	-	1,001,768
International equity	1,859,880	-	-	1,859,880
Emerging markets	1,971,208	-	-	1,971,208
	<u>\$ 19,826,403</u>	<u>-</u>	<u>-</u>	<u>19,826,403</u>
Liability -				
Interest rate swap	\$ -	712,437	-	712,437

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 6 - FAIR VALUE MEASUREMENTS, CONTINUED**

		Fair Value at December 31, 2018			
		Level 1	Level 2	Level 3	Total
Assets:					
Mutual funds:					
Fixed income:					
Broad domestic	\$	3,873,859	-	-	3,873,859
High yield bonds		4,766,899	-	-	4,766,899
Short-term bonds		193,686	-	-	193,686
Equity:					
Domestic large cap		4,619,772	-	-	4,619,772
Domestic small/mid cap		793,459	-	-	793,459
International equity		1,646,632	-	-	1,646,632
Market neutral		1,005,331	-	-	1,005,331
Emerging markets		1,925,211	-	-	1,925,211
	\$	<u>18,824,849</u>	<u>-</u>	<u>-</u>	<u>18,824,849</u>
Liability -					
Interest rate swap	\$	<u>-</u>	<u>284,591</u>	<u>-</u>	<u>284,591</u>

For the years ended December 31, 2019 and 2018, there were no significant transfers between Levels 1 and 2 and no transfers in or out of Level 3.

NOTE 7 - LINE OF CREDIT

In October 2017, the Organization obtained a line of credit of \$6,000,000, bearing interest at 1% plus 30 day LIBOR. During 2018, the line of credit was amended to reflect a new borrowing limit of \$2,500,000. During 2019, the line of credit was amended to reflect a new interest rate of 1.5% plus 30 day LIBOR and matures December 21, 2021. The line of credit bears interest at 1.5% plus 30 day LIBOR (3.20% at December 31, 2019). The outstanding balance on the line of credit was \$1,099,209 and \$1,107,591 at December 31, 2019 and 2018, respectively.

Restrictive covenants imposed under the line of credit require the Organization to maintain an unrestricted cash and investment to total fund debt of not less than 1.25 (ENA only). As of December 31, 2019 and 2018, this covenant was met.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 8 - BOND PAYABLE**

On December 21, 2017, a Series 2017 Industrial Revenue Bond (Bond) was issued by the City of Watseka. The aggregate principal amount of the Bond is \$10,000,000, of which \$3,960,265 was remitted to the Organization as of December 31, 2017. During February 2018, the remaining balance of \$6,039,735, was remitted to the Organization. The proceeds of the Bond were used to finance the purchase of the land and building in Schaumburg, IL. The maturity date of the Bond is December 21, 2047.

The Bond bears interest at variable rates throughout the life of the bond. As of December 31, 2019, the interest rate on the Bond is 2.52%. The Bond requires monthly payments of \$28,736.

The Bond agreement requires the Organization to furnish audited financial statements 270 days after each year end.

There were debt issuance costs of \$123,194 related to the bond issuance. Amortization expense for the years ended December 31, 2019 and 2018 was \$7,792 and \$8,065, respectively.

During 2018, the Organization entered into a \$10,000,000 interest rate swap agreement with a bank to fix the rate on the variable rate bond and to manage the borrowing costs. The interest rate swap agreement has a termination date of December 10, 2027 and a fixed interest rate of 3.61%.

The settlement value of the interest rate swap at December 31, 2019 and 2018 was a liability of \$712,437 and \$284,591, respectively. The settlement rate was estimated using a present value calculation of the swap's remaining estimated cash flows, not adjusted for any nonperformance risk.

The Bond payable as of December 31, 2019 and 2018 consisted of the following:

	<u>2019</u>			<u>2018</u>		
	<u>PRINCIPAL</u>	<u>DEBT ISSUE COSTS</u>	<u>NET</u>	<u>PRINCIPAL</u>	<u>DEBT ISSUE COSTS</u>	<u>NET</u>
Bond	\$ 9,655,168	107,337	9,547,831	10,000,000	115,129	9,884,871
Current portion	<u>344,832</u>	<u>7,519</u>	<u>337,313</u>	<u>344,832</u>	<u>7,792</u>	<u>337,040</u>
	<u>\$ 9,310,336</u>	<u>99,818</u>	<u>9,210,518</u>	<u>9,655,168</u>	<u>107,337</u>	<u>9,547,831</u>

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 8 - BOND PAYABLE, CONTINUED**

Principal payments due on Bond payable during each of the next five years are as follows:

2020	\$	344,832
2021		344,832
2022		344,832
2023		344,832
2024		344,832
Thereafter		7,931,008

NOTE 9 - OPERATING LEASES

The Organization is obligated under certain operating leases, primarily for certain office space and office equipment which expire on various dates until 2024.

Total rent expense under all operating leases amounted to \$104,346 and \$99,993 for the years ended December 31, 2019 and 2018, respectively.

The aggregate future minimum lease commitment on these leases as of December 31, 2019 is as follows:

2020	\$	104,275
2021		106,828
2022		99,581
2023		88,094
2024		<u>92,969</u>
	\$	<u><u>491,747</u></u>

NOTE 10 - RETIREMENT SAVINGS PLAN

ENA has a 401(k) defined contribution retirement savings plan (Plan) available to substantially all of the Organization's employees. ENA matches up to 4% of each employee's contribution to the Plan. The Plan also has a profit-sharing component. ENA's profit-sharing contribution is set each year as part of the budget process. In 2019 and 2018, ENA's profit-sharing contribution was 5% of each qualified employee's salary. ENA's contribution is funded on a current basis. Total contributions to the Plan in 2019 and 2018 were \$679,760 and \$603,512, respectively.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS (CONTINUED)

NOTE 11 - COMMITMENTS

The Organization has entered into a number of contracts with various vendors for space, hotel accommodations and ancillary services for future meetings. Minimum estimated cancellation fees are as follows:

2020	\$	164,045
2021		74,244
2022		-
2023		-
2024		<u>2,040,450</u>
	\$	<u><u>2,278,739</u></u>

NOTE 12 - ENDOWMENTS

The Organization's endowment includes three board-designated endowments established for the ENAF and eleven donor-restricted endowment funds primarily for the general operating purposes of the Organization, as well as for specific programs and scholarships. Net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions.

Interpretation of Relevant Law

The State of Illinois adopted the Uniform Prudent Management of Institutional Funds Act (UPMIFA) on December 31, 2009. The Organization has adopted a spending policy that requires the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment fund absent explicit donor stipulations to the contrary.

As a result of this policy, the Organization retains in perpetuity (a) the original value of initial and subsequent gift amounts (including promises to give net of discount and allowance for doubtful accounts) donated to the endowment and (b) any accumulations to the endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added. Donor-restricted amounts not retained in perpetuity are subject to appropriation for expenditure by the Organization in a manner consistent with the standard of prudence described by UPMIFA.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 12 - ENDOWMENTS, CONTINUED****Interpretation of Relevant Law, Continued**

The Organization considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- The duration and preservation of the fund
- The purposes of the Organization and the donor-restricted endowment fund
- General economic conditions
- The possible effect of inflation and deflation
- The expected total return from income and the appreciation of investments
- Other resources of the Organization
- The investment policies of the Organization

Strategies Employed for Achieving Objectives

To satisfy its long-term rate of return objectives, the Organization relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends).

Spending Policy and How the Investment Objectives Relate to Spending Policy

The Organization has a policy of appropriating annually no more than 5% of the prior three-year average of the fair market value of the endowment, including any capital appreciation and/or current yield. In establishing this policy, the Organization considered the long-term expected return on its endowments. This is consistent with the Organization's objective to maintain the fair value of the endowment assets held in perpetuity for a specified term as well as to provide additional real growth through new gifts and investment return. Donor-restricted endowments are spent in accordance with the donors' requirements; distributions are made for purposes that conform to the donors' stated intentions.

Funds with Deficiencies

From time to time, certain donor-restricted endowment funds may have fair values less than the amount required to be maintained by donors or by law (underwater endowments). During 2018, unfavorable market fluctuations resulted in \$2,849 of corpus required to be replenished. There were no funds with deficiencies for the year ended December 31, 2019.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)**NOTE 12 - ENDOWMENTS, CONTINUED**

Endowment net asset composition by type of fund as of December 31, 2019:

	WITHOUT DONOR RESTRICTIONS	WITH DONOR RESTRICTIONS	TOTAL
Board-designated endowment funds	\$ 1,925,444	-	1,925,444
Donor-restricted endowment funds			
Original donor-restricted gift amount and amounts required to be maintained in perpetuity by the donor	-	940,423	940,423
Accumulated investment gains	-	329,116	329,116
	\$ 1,925,444	1,269,539	3,194,983

Changes in endowment net assets for the year ended December 31, 2019:

	WITHOUT DONOR RESTRICTIONS	WITH DONOR RESTRICTIONS	TOTAL
Endowment net assets, January 1, 2019	\$ 1,658,894	1,000,906	2,659,800
Investment return, net	338,200	203,474	541,674
Appropriation of endowment assets for expenditures	(71,650)	(40,850)	(112,500)
Contributions	-	106,009	106,009
	266,550	268,633	535,183
Endowment net assets, December 31, 2019	\$ 1,925,444	1,269,539	3,194,983

EMERGENCY NURSES ASSOCIATION AND AFFILIATE

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)**NOTE 12 - ENDOWMENTS, CONTINUED**

Endowment net asset composition by type of fund as of December 31, 2018:

	WITHOUT DONOR RESTRICTIONS	WITH DONOR RESTRICTIONS	TOTAL
Board-designated endowment funds	\$ 1,658,894	-	1,658,894
Donor-restricted endowment funds			
Original donor-restricted gift amount and amounts required to be maintained in perpetuity by the donor	-	834,414	834,414
Accumulated investment gains	-	166,492	166,492
	\$ 1,658,894	1,000,906	2,659,800

Changes in endowment net assets for the year ended December 31, 2018:

	WITHOUT DONOR RESTRICTIONS	WITH DONOR RESTRICTIONS	TOTAL
Endowment net assets, January 1, 2018	\$ 1,805,757	998,034	2,803,791
Investment return, net	(83,234)	(52,476)	(135,710)
Appropriation of endowment assets for expenditures	(60,780)	(31,895)	(92,675)
Contributions	-	84,394	84,394
Replenishment of corpus	(2,849)	2,849	-
	(146,863)	2,872	(143,991)
Endowment net assets, December 31, 2018	\$ 1,658,894	1,000,906	2,659,800

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 13 - NET ASSETS WITH DONOR RESTRICTIONS**

Net assets with donor restrictions consist of the following:

	<u>2019</u>	<u>2018</u>
Endowments:		
Karen O'Neil Endowed Scholarship Fund	\$ 109,337	92,898
New York State September 11 Endowment Fund	143,831	123,238
Judith C. Kelleher Memorial Endowment Fund	123,264	101,683
Anita Dorr Memorial Endowment Fund	1,932	1,588
Jeanette Ash Endowed Scholarship Fund	49,751	35,780
Richard Wynkoop Scholarship Fund	37,944	23,954
Elizabeth B. Moore Memorial Fund for Scholarships	129,771	111,947
Texas Endowed Scholarship Fund	106,308	49,233
Mildred Fincke Memorial Endowed Scholarship Fund	12,378	3,250
Joan Eberhardt Endowed Scholarship Fund	51,090	42,065
Peggy McCall Fund	25,000	-
General Endowment Fund	<u>478,932</u>	<u>415,270</u>
	<u>1,269,538</u>	<u>1,000,906</u>
Purpose restricted contributions	<u>46,753</u>	<u>30,941</u>
	<u>\$ 1,316,291</u>	<u>1,031,847</u>

NOTE 14 - NET ASSETS RELEASED FROM DONOR RESTRICTIONS

Net assets released from restrictions during the years ended December 31, 2019 and 2018, because donor restrictions were met by satisfying the stated purpose or time or other event are as follows:

	<u>2019</u>	<u>2018</u>
Scholarships	\$ 340,158	303,417
Research	<u>-</u>	<u>3,720</u>
	<u>\$ 340,158</u>	<u>307,137</u>

NOTE 15 - RECLASSIFICATIONS

Certain amounts in the 2018 consolidated financial statements have been reclassified to conform with the year 2019 presentation.

EMERGENCY NURSES ASSOCIATION AND AFFILIATE**NOTES TO CONSOLIDATED FINANCIAL STATEMENTS
(CONTINUED)****NOTE 16 - SUBSEQUENT EVENTS**

In March 2020, the World Health Organization declared the outbreak of a novel coronavirus (COVID-19) as a pandemic, which continues to spread throughout the United States of America. The extent of the impact of COVID-19 on the operational and financial performance of the Organization will depend on certain developments, including the duration and spread of the outbreak, impact on the contributors and vendors of the Organization, all of which are uncertain and cannot be predicted. At this time, the extent to which COVID-19 may impact the financial condition or results of operations of the Organization is uncertain.

In March 2020, the President of the United States of America signed into law the Coronavirus Aid, Relief, and Economic Security Act (CARES Act). The CARES Act makes significant changes in the tax laws and provides direct economic assistance to businesses via the Paycheck Protection Program (PPP). In April 2020, the Organization received a loan through the PPP of approximately \$1,940,000. Based on current provisions of the PPP, the Organization expects the majority of the loan received to be forgiven. As of the date the financial statements were available for issue, the extent to which the other provisions of the CARES Act may impact the Organization's financial condition or results of operations is uncertain.

S U P P L E M E N T A R Y I N F O R M A T I O N



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**INDEPENDENT AUDITOR'S REPORT
ON SUPPLEMENTARY INFORMATION**

Finance Committee
Emergency Nurses Association
ENA Foundation Board of Trustees
Schaumburg, Illinois

We have audited the consolidated financial statements of Emergency Nurses Association and Affiliate as of and for the years ended December 31, 2019 and 2018, and our report thereon, which expresses an unmodified opinion on those consolidated financial statements appears on pages 1 and 2. Our audits were conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The supplementary information is presented for the purposes of additional analysis and is not a required part of the consolidated financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audits of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the consolidated financial statements as a whole.

Mueller & Co., LLP

Elgin, Illinois
June 29, 2020

EMERGENCY NURSES ASSOCIATION
STATEMENTS OF FINANCIAL POSITION
DECEMBER 31, 2019 AND 2018

ASSETS

	<u>2019</u>	<u>2018</u>
Current assets:		
Cash and cash equivalents	\$ 1,449,630	908,817
Receivables:		
Accounts receivable, net of allowance for doubtful accounts of \$197,000 and \$163,534 for 2019 and 2018, respectively	1,702,666	1,928,385
Grants receivable	16,723	-
Other receivables	47,188	47,080
Due from affiliate - ENA Foundation	7,900	6,005
Inventory	50,552	114,827
Prepaid expenses and other current assets	<u>943,648</u>	<u>663,465</u>
Total current assets	4,218,307	3,668,579
Property and equipment, net	12,259,640	12,352,640
Property held for sale	2,450,000	2,450,000
Investments	<u>16,215,232</u>	<u>15,740,600</u>
Total assets	<u>\$ 35,143,179</u>	<u>34,211,819</u>

LIABILITIES AND NET ASSETS

Current liabilities:		
Accounts payable	\$ 766,377	787,995
Wages and benefits payable	944,905	824,467
Accrued expenses	612,605	702,803
Credits on customer accounts	230,910	630,284
Assessments payable	1,330,139	1,616,540
Line of credit	1,099,209	1,107,591
Current portion of deferred revenue	2,579,300	2,842,670
Current portion of bond payable	<u>337,313</u>	<u>337,040</u>
Total current liabilities	<u>7,900,758</u>	<u>8,849,390</u>
Long-term liabilities:		
Interest rate swap agreement	712,437	284,591
Deferred revenue, net of current portion	1,182,892	896,522
Bond payable, net of current portion	<u>9,210,518</u>	<u>9,547,831</u>
Total long-term liabilities	<u>11,105,847</u>	<u>10,728,944</u>
Total liabilities	<u>19,006,605</u>	<u>19,578,334</u>
Net assets -		
Without donor restrictions:		
Undesignated	15,634,664	14,131,575
Board designated	<u>501,910</u>	<u>501,910</u>
Total without donor restrictions	<u>16,136,574</u>	<u>14,633,485</u>
Total liabilities and net assets	<u>\$ 35,143,179</u>	<u>34,211,819</u>

See Independent Auditor's Report on Supplementary Information.

EMERGENCY NURSES ASSOCIATION

STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS

YEARS ENDED DECEMBER 31, 2019 AND 2018

	2019	2018
Revenue, gains and other support:		
Courses	\$ 14,897,385	11,959,342
Membership dues	4,258,905	4,264,519
Conferences	3,333,411	2,758,476
Publications	760,483	832,703
Marketplace	586,580	536,654
Sponsorships	499,010	398,000
Royalties	515,554	473,436
Other	480,881	202,965
Grants	80,988	26,953
Mailing lists	19,781	19,978
Donated services	95,000	95,000
Total revenue, gains and other support	25,527,978	21,568,026
Expenses:		
Programs, grants and scholarships	16,629,817	14,952,758
Management and general	7,818,966	6,973,126
Fundraising and development	1,443,210	1,369,660
Total expenses	25,891,993	23,295,544
Decrease in net assets - before other income	(364,015)	(1,727,518)
Other income (expense):		
Interest expense	(403,661)	(318,178)
Rental income	-	142,522
Investment income (loss), net	2,698,611	(810,532)
Loss on interest rate swap agreement	(427,846)	(284,591)
Loss on assets held for sale	-	(49,297)
	1,867,104	(1,320,076)
Change in net assets	1,503,089	(3,047,594)
Net assets, beginning of year	14,633,485	17,681,079
Net assets, end of year	\$ 16,136,574	14,633,485

See Independent Auditor's Report on Supplementary Information.

EMERGENCY NURSES ASSOCIATION
STATEMENT OF FUNCTIONAL EXPENSES
YEAR ENDED DECEMBER 31, 2019

	PROGRAMS, GRANTS AND SCHOLARSHIPS	MANAGEMENT AND GENERAL	FUNDRAISING AND DEVELOPMENT	TOTAL
Payroll expenses:				
Salaries and wages	\$ 4,480,504	3,435,341	725,819	8,641,664
Employee benefits	959,231	722,663	170,821	1,852,715
Payroll taxes	345,611	245,559	59,084	650,254
	<u>5,785,346</u>	<u>4,403,563</u>	<u>955,724</u>	<u>11,144,633</u>
Operating expenses:				
Advertising and promotion	156,716	-	-	156,716
Discount on sales	174,041	-	-	174,041
Bad debt expense	39,553	-	-	39,553
Bank and credit card fees	-	427,023	-	427,023
Computer	176,130	650,178	158	826,466
Conferences	2,340,523	104,978	28,646	2,474,147
Cost of goods sold	1,830,712	-	-	1,830,712
Depreciation and amortization	299,642	125,162	27,085	451,889
Fulfillment and warehousing services	271,831	-	-	271,831
Grants and scholarships	521,508	162,996	107,356	791,860
Insurance	55,441	50,586	-	106,027
Miscellaneous	113,619	81,974	147	195,740
Postage, freight and shipping	256,042	3,746	20,208	279,996
Printing	309,024	11,119	739	320,882
Professional services	471,390	528,020	184,965	1,184,375
Provision for UBIT	51,852	-	-	51,852
Public relations	26,455	450	-	26,905
Recruitment fees	1,125	68,819	-	69,944
Stipends	143,690	142,000	-	285,690
Supplies and equipment	69,255	90,134	5,159	164,548
Temporary workers	211,305	38,034	-	249,339
Training	36,068	222,051	1,958	260,077
Travel	545,043	291,403	23,466	859,912
	<u>8,100,965</u>	<u>2,998,673</u>	<u>399,887</u>	<u>11,499,525</u>
Occupancy expenses:				
Building maintenance	126,100	94,576	21,825	242,501
Depreciation	115,932	86,949	20,065	222,946
Insurance	9,293	6,969	1,608	17,870
Real estate taxes	190,184	142,639	32,916	365,739
Rent	38,646	37,130	-	75,776
Telephone	7,892	5,919	1,366	15,177
Utilities	56,731	42,548	9,819	109,098
	<u>544,778</u>	<u>416,730</u>	<u>87,599</u>	<u>1,049,107</u>
Assessment expenses:				
State/chapter membership dues	527,315	-	-	527,315
ENPC/TNCC	1,671,413	-	-	1,671,413
	<u>2,198,728</u>	<u>-</u>	<u>-</u>	<u>2,198,728</u>
\$	<u><u>16,629,817</u></u>	<u><u>7,818,966</u></u>	<u><u>1,443,210</u></u>	<u><u>25,891,993</u></u>

See Independent Auditor's Report on Supplementary Information.

EMERGENCY NURSES ASSOCIATION
STATEMENT OF FUNCTIONAL EXPENSES
YEAR ENDED DECEMBER 31, 2018

	PROGRAMS, GRANTS AND SCHOLARSHIPS	MANAGEMENT AND GENERAL	FUNDRAISING AND DEVELOPMENT	TOTAL
Payroll expenses:				
Salaries and wages	\$ 4,080,579	2,893,453	695,281	7,669,313
Employee benefits	934,075	675,292	177,311	1,786,678
Payroll taxes	309,453	204,551	53,920	567,924
	<u>5,324,107</u>	<u>3,773,296</u>	<u>926,512</u>	<u>10,023,915</u>
Operating expenses:				
Advertising and promotion	58,490	-	235	58,725
Discount on sales	147,762	-	-	147,762
Bad debt expense	36,070	-	-	36,070
Bank and credit card fees	-	332,175	-	332,175
Computer	211,365	582,094	138	793,597
Conferences	2,458,713	61,311	29,010	2,549,034
Cost of goods sold	499,837	-	-	499,837
Depreciation and amortization	264,604	134,290	22,656	421,550
Fulfillment and warehousing services	266,662	-	-	266,662
Grants and scholarships	325,757	148,185	80,167	554,109
Insurance	56,360	45,687	-	102,047
Miscellaneous	51,491	93,635	128	145,254
Postage, freight and shipping	271,082	3,089	30,431	304,602
Printing	351,185	9,007	918	361,110
Professional services	645,529	414,093	179,161	1,238,783
Provision for UBIT	48,833	-	-	48,833
Public relations	6,371	-	-	6,371
Recruitment fees	2,800	142,120	-	144,920
Stipends	175,267	142,000	-	317,267
Supplies and equipment	73,369	77,236	2,179	152,784
Temporary workers	325,543	141,046	11,758	478,347
Training	41,803	163,922	509	206,234
Travel	443,936	284,530	15,520	743,986
	<u>6,762,829</u>	<u>2,774,420</u>	<u>372,810</u>	<u>9,910,059</u>
Occupancy expenses:				
Building maintenance	89,816	64,864	11,640	166,320
Depreciation	112,522	81,265	14,586	208,373
Insurance	10,174	7,348	1,319	18,841
Real estate taxes	271,587	196,147	35,206	502,940
Rent	34,887	33,519	-	68,406
Telephone	5,923	4,278	768	10,969
Utilities	52,600	37,989	6,819	97,408
	<u>577,509</u>	<u>425,410</u>	<u>70,338</u>	<u>1,073,257</u>
Assessment expenses:				
State/chapter membership dues	584,405	-	-	584,405
ENPC/TNCC	1,703,908	-	-	1,703,908
	<u>2,288,313</u>	<u>-</u>	<u>-</u>	<u>2,288,313</u>
	<u>\$ 14,952,758</u>	<u>6,973,126</u>	<u>1,369,660</u>	<u>23,295,544</u>

See Independent Auditor's Report on Supplementary Information.

EMERGENCY NURSES ASSOCIATION

STATEMENTS OF CASH FLOWS

YEARS ENDED DECEMBER 31, 2019 AND 2018

	2019	2018
Cash provided by (applied to) operating activities:		
Change in net assets	\$ 1,503,089	(3,047,594)
Adjustments to reconcile change in net assets to net cash applied to operating activities:		
Depreciation and amortization of property and equipment	667,043	621,858
Amortization of debt issuance costs	7,792	8,065
Loss on interest rate swap agreement	427,846	284,591
Loss on property held for sale	-	49,297
Bad debt (recovery) expense	33,466	(13,567)
Realized and unrealized (gain) loss on investments	(2,213,769)	1,339,380
Decrease (increase) in assets:		
Accounts receivable, net of change in allowance	192,253	(376,279)
Grants receivable	(16,723)	-
Other receivables	(108)	(30,326)
Due (to) from affiliate - ENA Foundation	(1,895)	10,808
Inventory	64,275	(53,526)
Prepaid expenses and other assets	(280,183)	(290,434)
Increase (decrease) in liabilities:		
Accounts payable	(21,618)	419,806
Wages and benefits payable	120,438	66,643
Accrued expenses	(90,198)	46,306
Credits on customer accounts	(399,374)	(269,679)
Assessments payable	(286,401)	14,503
Deferred revenue	23,000	(32,166)
	<u>(271,067)</u>	<u>(1,252,314)</u>
Cash provided by (applied to) investing activities:		
Purchases of property and equipment	(574,043)	(7,399,603)
Purchases of investments	(2,331,312)	(7,228,425)
Proceeds from sale and maturities of investments	4,070,449	8,628,230
	<u>1,165,094</u>	<u>(5,999,798)</u>
Cash provided by (applied to) financing activities:		
Proceeds from line of credit	-	1,107,591
Payments on line of credit	(8,382)	-
Proceeds from bond payable	-	6,039,735
Payments on bonds payable	(344,832)	-
	<u>(353,214)</u>	<u>7,147,326</u>
Net increase (decrease) in cash and cash equivalents	540,813	(104,786)
Cash and cash equivalents, beginning of year	908,817	1,013,603
Cash and cash equivalents, end of year	<u>\$ 1,449,630</u>	<u>908,817</u>
Other cash flow information:		
Interest paid	<u>\$ 403,661</u>	<u>318,178</u>
Income taxes paid	<u>\$ 53,000</u>	<u>88,000</u>

See Independent Auditor's Report on Supplementary Information.

ENA FOUNDATION
STATEMENTS OF FINANCIAL POSITION
DECEMBER 31, 2019 AND 2018

ASSETS

	<u>2019</u>	<u>2018</u>
Current assets:		
Cash and cash equivalents	\$ 291,806	127,276
Accounts receivable	<u>5,018</u>	<u>250</u>
Total current assets	296,824	127,526
Property and equipment, net	7,232	9,250
Investments	<u>3,611,171</u>	<u>3,084,249</u>
Total assets	<u>\$ 3,915,227</u>	<u>3,221,025</u>

LIABILITIES AND NET ASSETS

Current liabilities:		
Accounts payable	\$ 7,369	1,417
Due to affiliate - ENA	<u>7,900</u>	<u>6,005</u>
Total current liabilities	<u>15,269</u>	<u>7,422</u>
Net assets:		
Without donor restrictions:		
Undesignated	658,223	522,862
Board designated	<u>1,925,444</u>	<u>1,658,894</u>
Total without donor restrictions	<u>2,583,667</u>	<u>2,181,756</u>
With donor restrictions	<u>1,316,291</u>	<u>1,031,847</u>
Total net assets	<u>3,899,958</u>	<u>3,213,603</u>
Total liabilities and net assets	<u>\$ 3,915,227</u>	<u>3,221,025</u>

See Independent Auditor's Report on Supplementary Information.

ENA FOUNDATION

STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS

YEARS ENDED DECEMBER 31, 2019 AND 2018

	2019			2018		
	WITHOUT DONOR RESTRICTIONS	WITH DONOR RESTRICTIONS	TOTAL	WITHOUT DONOR RESTRICTIONS	WITH DONOR RESTRICTIONS	TOTAL
Support, revenues and other additions -						
Support:						
Contributions	\$ 510,783	421,128	931,911	414,793	393,426	808,219
Special events revenue, net of direct expenses	52,389	-	52,389	49,217	-	49,217
Net assets released from restrictions	340,158	(340,158)	-	307,137	(307,137)	-
Total revenue, gains and other support	903,330	80,970	984,300	771,147	86,289	857,436
Expenses:						
Programs, grants and scholarships	575,648	-	575,648	515,049	-	515,049
Management and general	226,616	-	226,616	246,217	-	246,217
Fundraising and development	124,983	-	124,983	87,189	-	87,189
Total expenses	927,247	-	927,247	848,455	-	848,455
Increase (decrease) in net assets - before other income	(23,917)	80,970	57,053	(77,308)	86,289	8,981
Other income (expense) -						
Investment income (loss), net	425,828	203,474	629,302	(115,463)	(52,476)	(167,939)
Change in net assets	401,911	284,444	686,355	(192,771)	33,813	(158,958)
Net assets, beginning of year	2,181,756	1,031,847	3,213,603	2,374,527	998,034	3,372,561
Net assets, end of year	\$ 2,583,667	1,316,291	3,899,958	2,181,756	1,031,847	3,213,603

See Independent Auditor's Report on Supplementary Information.

ENA FOUNDATION
STATEMENT OF FUNCTIONAL EXPENSES
YEAR ENDED DECEMBER 31, 2019

	<u>PROGRAMS, GRANTS AND SCHOLARSHIPS</u>	<u>MANAGEMENT AND GENERAL</u>	<u>FUNDRAISING AND DEVELOPMENT</u>	<u>TOTAL</u>
Operating expenses:				
Bank charges and credit card processing fees	\$ -	276	-	276
Computer	-	5,521	-	5,521
Conferences	-	1,054	11,154	12,208
Depreciation	-	2,018	-	2,018
Grants and scholarships	461,519	-	-	461,519
Insurance	-	480	-	480
Miscellaneous	-	859	155	1,014
Postage, freight and shipping	-	144	404	548
Printing	-	504	6,400	6,904
Professional services	114,129	188,668	104,992	407,789
Supplies and equipment	-	3,258	852	4,110
Temporary workers	-	1,598	-	1,598
Travel	-	22,236	1,026	23,262
	<u>\$ 575,648</u>	<u>226,616</u>	<u>124,983</u>	<u>927,247</u>

See Independent Auditor's Report on Supplementary Information.

ENA FOUNDATION

STATEMENT OF FUNCTIONAL EXPENSES

YEAR ENDED DECEMBER 31, 2018

	PROGRAMS, GRANTS AND SCHOLARSHIPS	MANAGEMENT AND GENERAL	FUNDRAISING AND DEVELOPMENT	TOTAL
Operating expenses:				
Computer	\$ -	7,872	-	7,872
Conferences	-	4,275	-	4,275
Depreciation	-	1,850	-	1,850
Grants and scholarships	437,292	-	-	437,292
Insurance	-	480	-	480
Miscellaneous	-	439	4,550	4,989
Postage, freight and shipping	-	1,379	1,001	2,380
Printing	-	12,115	400	12,515
Professional services	77,757	166,927	80,167	324,851
Supplies and equipment	-	909	1,071	1,980
Temporary workers	-	21,697	-	21,697
Travel	-	28,274	-	28,274
	<u>\$ 515,049</u>	<u>246,217</u>	<u>87,189</u>	<u>848,455</u>

See Independent Auditor's Report on Supplementary Information.

ENA FOUNDATION

STATEMENTS OF CASH FLOWS

YEARS ENDED DECEMBER 31, 2019 AND 2018

	2019	2018
Cash provided by (applied to) operating activities:		
Change in net assets	\$ 686,355	(158,958)
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Depreciation of property and equipment	2,018	1,850
Realized and unrealized (gain) loss on investments	(523,640)	257,489
Contributions restricted for investment in endowment	(106,009)	(84,394)
Decrease (increase) in assets:		
Accounts receivable	(4,768)	(250)
Prepaid expenses and other assets	-	6,351
Increase (decrease) in liabilities:		
Accounts payable	5,952	(3,419)
Due (to) from affiliate - ENA	1,895	(10,808)
	<u>61,803</u>	<u>7,861</u>
Cash provided by (applied to) investing activities:		
Purchases of investments	(409,335)	(885,320)
Proceeds from sale and maturities of investments	406,053	802,325
	<u>(3,282)</u>	<u>(82,995)</u>
Cash provided by financing activities -		
Collections of contributions restricted for investment in endowment	106,009	84,394
Net increase in cash and cash equivalents	164,530	9,260
Cash and cash equivalents, beginning of year	127,276	118,016
Cash and cash equivalents, end of year	\$ <u>291,806</u>	<u>127,276</u>

See Independent Auditor's Report on Supplementary Information.



FINAL 2020 ENA VOLUNTEER GROUP ROSTER, CHARGES AND CRITERIA

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2020 General Criteria***General Criteria for all committees (unless specifically noted) is as follows:***

- Strong attention to detail and the ability to meet deadlines
- Professional writing and editing skills
 - Writing and/or editing samples may be required for consideration
- Ability to provide expert and time-sensitive feedback on documents from external entities, as requested by the Association, on behalf of the President
- Proficient in Microsoft Office Suite (Word, Excel, PowerPoint)
- Ability to use ENA Connect for committee activity (online)
- Timely response to email and phone calls
- Ability to participate in meetings via phone, WebEx or in person
 - Some committees require attendance at onsite meetings, requiring travel (expenses paid by ENA)
 - Review and agree to ENA's travel policy and guidelines if applicable
 - Agree to participate in conference calls via WebEx Conferencing and share documents via ENA Connect
- In general, committee meetings, WebEx teleconferences and conference calls are scheduled during ENA business days of Monday through Friday, however these meetings may take place outside of the general timeframe as needed.

ADVOCACY ADVISORY COUNCIL

Name	Position	State	Position Term	Service Term
1. Amie Porcelli, RN, CEN	Chair	PA	1/1/20 – 12/31/20	1/1/19 - 12/31/21
2. Nick Chmielewski, MSN, RN, CEN, CNML, NE-BC, FAEN	Member	OH	1/1/20 – 12/31/20	1/1/18 – 12/31/20
3. Stephanie Fitch, BSN, RN, CEN, TCRN	Member	VA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
4. Danita Mullins, MSN, RN, CEN	Member	AR	1/1/20 – 12/31/21	1/1/20 – 12/31/21
5. William Schueler, MSN, RN, CEN, FAEN	Member	OR	1/1/20 – 12/31/21	1/1/20 – 12/31/21
6. Karen Wiley, MSN, RN, CEN	Member	NE	1/1/19 – 12/31/20	1/1/19 – 12/31/20

Board Liaison: Kristen Cline

Staff Liaison: Rob Kramer

2020 Charges:

1. Review and identify public policy as it relates to advocacy in emergency nursing
2. Generate ideas for program development and implementation related to government relations and advocacy.
3. Assist in prioritizing advocacy efforts based on ENA's organizational priorities
4. Provide assistance to ENA State Government Affairs Chairs for assigned states

2020 Specific Criteria:

- Must have extensive knowledge of public policy issues affecting emergency care and emergency nursing at the state and federal levels
- Demonstrated advocacy involvement with ENA State Council/Chapter
- Ability to serve for a two-year term
- One onsite meeting at Day on the Hill required

AWARDS COMMITTEE

Name	Position	State	Position Term	Service Term
1. Kevin Jennings, BSN, BS, RN	Chair	MO	1/1/20 – 12/31/20	1/1/19 - 12/31/21
2. Linda Arapian, MSN, RN, EMT-B, CEN, CPEN, TCRN, FAEN	Member	MD	1/1/19 – 12/31/20	1/1/19 – 12/31/20
3. Melanie Gibbons Hallman, DNP, RN, CRNP, CEN, ACNP-BC, ENP-C, FNP-BC, TCRN, FAEN	Member	AL	1/1/20 – 12/31/20	1/1/20 – 12/31/20
4. Todd Haines MSN, RN, EMT-I, CEN	Member	TN	1/1/20 – 12/31/20	1/1/18 – 12/31/20
5. Marcia Harmon, BSN, RN, CEN	Member	NE	1/1/20 – 12/31/21	1/1/20 – 12/31/21
6. Vanessa Lozada, BSN, RN, SANE-A, SANE-P	Member	TX	1/1/20 – 12/31/21	1/1/20 – 12/31/21
7. Regina Newby, BSN, RN, CEN	Member	OK	1/1/20 – 12/31/21	1/1/20 – 12/31/21
8. Tameka Poston-Myricks, MSN, BSN, RN, CEN	Member	AL	1/1/20 – 12/31/21	1/1/20 – 12/31/21
9. Anthony Thomsen, BSN, RN, CEN, NREMT-P, NRP	Member	IA	1/1/20 – 12/31/21	1/1/20 – 12/31/21
10. Abigail White, MSN, BSN, RN, CEN, ACCNS-AG	Member	IL	1/1/20 – 12/31/21	1/1/20 – 12/31/21
11. Michael Zonak, MSN, RN, CEN, CNL	Member	FL	1/1/19 – 12/31/20	1/1/19 – 12/31/20

Board Liaison: Terry Foster**Staff Liaison:** Ellen Siciliano**2020 Charges:**

1. Encourage award application submission
2. Review awards and their applicable criteria and provide recommendations for revisions
3. Review and score eligible candidate applications

2020 Specific Criteria:

- Must be able to participate in reviewer training and utilize the electronic award scoring tool
- Experience at a state or chapter level at ENA
- Ability to serve for a two-year term
- No onsite meeting required

CLINICAL PRACTICE GUIDELINES COMMITTEE

Name	Position	State	Position Term	Service Term
1. Judith Young Bradford, DNS, MSN, RN, FAEN	Chair	MS	1/1/18 – 12/31/20	1/1/18 – 12/31/20
2. Annie Horigan, PhD, RN Chairperson (1/1/21 – 12/31/22)	Chair-Elect	GA	1/1/18 – 12/31/20	1/1/18 – 12/31/22
3. Sue Barnason, PhD, RN, APRN, CNS, CS, CEN, CCRN, FAEN, FAAN	Member	NE	1/1/18 – 12/31/21	1/1/18 – 12/31/21
4. Janet Kaiser, MSN, BSN, RN, CEN	Member	VA	1/1/18 – 12/31/21	1/1/18 – 12/31/21
5. Lisa Gilmore, DNP, MSN-ED, RN, APRN, FNP, CNS, EMT-P, CEN, CPEN, CFRN, ACCNS-AG, ACCNS-P, FNP-C, NREMT-P	Member	MO	1/1/19 – 12/31/21	1/1/19 – 12/31/21
6. Robin MacPherson-Dias, MS, BSN, RN, CEN, CCRN, TCRN	Member	CA	1/1/18 – 12/31/20	1/1/18 – 12/31/20
7. Jean Proehl, MN, RN, CEN, CPEN, TCRN, FAEN, FAAN	Member	NH	1/1/18 – 12/31/20	1/1/18 – 12/31/20
8. Andrea Slivinski, DNP, RN, CEN, ACNS-BC	Member	NC	1/1/18 – 12/31/20	1/1/18 – 12/31/20
9. Kathy Van Dusen, MSN, RN, CEN, CPEN, NHDP-BC	Member	CA	1/1/19 – 12/31/21	1/1/19 – 12/31/21
10. Mary Vanhoy, MSN, RN, CEN, CPEN, NREMT-P, FAEN	Member	MD	1/1/19 – 12/31/20	1/1/19 – 12/31/20

Board Liaison: Terry Foster

Staff Liaison: Altair Delao

2020 Charges:

1. Develop evidence-based clinical practice guidelines
2. Recommend topic areas for future clinical practice guidelines development
3. Review and update existing clinical practice guidelines as appropriate

2020 Specific Criteria:

- Formal training in research and evidence-based practice translation required
- Must have current emergency department experience
- Must have capacity to review significant numbers of scientific articles and other literature, conduct literature searches and be able to critically analyze and discuss the results of the literature searches including a working knowledge of evidence ratings
- Must be able to write clearly, professionally, and within the time constraints of the CPG process
 - Scientific writing samples are required as part of submission process
- Doctoral degree preferred, master's degree required
- Ability to serve for a three-year term
- Two onsite meetings required

COURSE ADMINISTRATION FACULTY

Name	Position	State	Position Term	Service Term
1.Cassondra Richard, RN, CEN, TCRN	Chair	OR	1/1/19 – 12/31/20	1/1/18 - 12/31/21
2.Amy Boren, MS, BSN, RN, CEN, CPEN	Member	CO	1/1/19 – 12/31/20	1/1/19 – 12/31/20
3.Kathleen Carlson, MSN, RN, CEN, FAEN	Member	VA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
4.Geraldine Muller, MSN, RN, CEN, TCRN	Member	MI	1/1/19 – 12/31/20	1/1/19 – 12/31/20
5.Kristine Powell, MSN, RN, CEN, NEA-BC, FAEN	Member	TX	1/1/20 – 12/31/21	1/1/20 – 12/31/21
6.Jennifer Taylor, MSN, RN, EMT-B, CEN, TCRN	Member	TN	1/1/20 – 12/31/21	1/1/20 – 12/31/21

Board Liaison: Jennifer Schmitz**Staff Liaison:** Nicole Williams**2020 Charges:**

1. Review course administrative procedures and provide recommendations on an ongoing basis
2. Recommend disciplinary action of Course Directors and Course Instructors as necessary
3. Serve as ambassadors on ENA Connect sites for Course Directors and Instructors

2020 Specific Criteria:

- Must be TNCC and ENPC Faculty
- Experience in working with ENA educational programs
- Ability to serve for a two-year term
- Willingness to engage in online TNCC and ENPC communities consistently
- No onsite meeting required

DIVERSITY AND INCLUSIVITY WORK TEAM

Name	Position	State	Position Term	Service Term
1. William Welsh, MSN, MBA, RN	Lead	PA	5/28/19 – 12/31/20	5/28/19 – 6/30/20
2. Leah Bagley, RN	Member	GA	5/28/19 – 12/31/20	5/28/19 – 6/30/20
3. Garrett Chan, PhD, RN, NP, CNS, CEN, FAEN, FAAN	Member	CA	5/28/19 – 12/31/20	5/28/19 – 6/30/20
4. Derrick Johnson, RN	Member	VA	5/28/19 – 12/31/20	5/28/19 – 6/30/20
5. Jo Tabler, MSN, BSN, RN, CEN, CFRN, AGCNS-BC	Member	IN	5/28/19 – 12/31/20	5/28/19 – 6/30/20
6. TBD	Member			

Board Liaison: Patricia Kunz Howard

Staff Liaison: Matt Hessler and Heidi Garcia

Charges:

1. Develop a recommended definition of diversity and inclusivity for ENA
2. Assess and identify the needs of current and future ENA members to promote diversity and inclusion
3. Determine barriers to diversity and inclusivity within the emergency nursing profession and ENA community
4. Advise on opportunities for expanding engagement with members from diverse backgrounds and creating a welcoming environment that encourages diversity of thought

Specific Criteria:

- Must have current ENA membership
- Ability to serve for at least a 6-month term
- Must be comfortable with virtual engagement via online meetings, email and document sharing
- Experience working within, creating or the desire to impact the development of an environment that values and encourages diversity of thought, experience, demographic backgrounds and identifies

EMERGENCY DEPARTMENT OPERATIONS COMMITTEE

Name	Position	State	Position Term	Service Term
1. Rita Anderson, BSN, RN, CEN, FAEN	Chair	AZ	1/1/20 – 12/31/20	1/1/19 – 12/31/21
2. Denise Bayer, MSN, RN, FAEN	Member	CA	1/1/20 – 12/31/21	1/1/20 – 12/31/21
3. Beth Estep, MSN, RN, CEN	Member	OH	1/1/20 – 12/31/21	1/1/20 – 12/31/21
4. Jonathan Green, DNP, RN, NP, CEN, CCRN, ENP-C, FNP-C	Member	NJ	1/1/20 – 12/31/21	1/1/20 – 12/31/21
5. Laura Kitch, APRN, CNS	Member	MN	1/1/20 – 12/31/20	1/1/20 – 12/31/20
6. Andrew Slifko, MBA, BSN, RN, EMT-B, NEA-BC	Member	NJ	1/1/19 – 12/31/20	1/1/19 – 12/31/20

Board Liaison: Patricia Kunz Howard

Staff Liaison: Cathy Olson

2020 Charges:

1. Provide subject matter expertise related to emergency department operations/management
2. Identify, recommend, and/or develop evidence-based best practices for emergency department leadership to improve patient and staff safety in emergency care settings and provide evidence-based recommendation for creating a safe work environment
3. Review and provide feedback on educational content and other ENA initiatives as requested

2020 Specific Criteria:

- Must have a good understanding of systems, organization and management of operations in the delivery of emergency care
- Experience in a leadership role in an emergency care setting
- Ability to serve for a two-year term
- No onsite meeting required

EMERGENCY MANAGEMENT AND PREPAREDNESS COMMITTEE

Name	Position	State	Position Term	Service Term
1. Brian Rogers, MSN, BSN, RN, CEN	Chair	PA	1/1/20 – 12/31/20	1/1/19 – 12/31/21
2. April Burge, MSN, RN, EMT-B	Member	TX	1/1/20 – 12/31/21	1/1/20 – 12/31/21
3. Angie Lee, MSN-ED, RN, CEN	Member	NY	1/1/20 – 12/31/21	1/1/20 – 12/31/21
4. George Flores, MS, RN	Member	AK	1/1/19 – 12/31/20	1/1/19 – 12/31/20
5. Paul Mikita, BSN, RN	Member	NJ	1/1/20 – 12/31/21	1/1/20 – 12/31/21
6. Lauren Plaine, BSN, RN, CEN	Member	VA	1/1/19 – 12/31/20	1/1/19 – 12/31/20

Board Liaison: Ryan Oglesby

Staff Liaison: Monica Kolbuk

2020 Charges:

1. Provide subject matter expertise on emergency management and preparedness
2. Identify best practices for all patient populations related to emergency management preparedness
3. Identify, recommend and develop resources for emergency management and preparedness

2020 Specific Criteria:

- Must have knowledge and active involvement in emergency management, planning, application and evaluation
- Ability to serve for a two-year term
- No onsite meeting required

EMERGENCY MEDICAL SERVICES ADVISORY COUNCIL

Name	Position	State	Position Term	Service Term
1. Gina Slobogin, DNP, MSN, BSN, AND, RN, APRN, FNP, EMT-B, EMT-P, APRN-BC, FNP-BC, NHDP-BC, NREMT-P, PHRN	Chair	PA	1/1/20 – 12/31/20	1/1/19 – 12/31/21
2. Benjamin Coe, PhD(c), MA, BSN, BS, RN, EMT-P, CEN, NHDP-BC, PCCN, TCRN	Member	MO	1/1/19 – 12/31/20	1/1/19 – 12/31/20
3. Justin Beal, RN, EMT-P, CEN, CPEN, CFRN, NREMT-P, PHRN, TCRN	Member	WV	1/1/20 – 12/31/21	1/1/20 – 12/31/21
4. Kay-Ella Bleacher, MSN, RN, APN, CRNP, CEN, FNP-C, NREMT-P, PHRN, FAEN	Member	PA	1/1/20 – 12/31/21	1/1/20 – 12/31/21
5. Bradley Jordan, DHS, MHA, BA, EMT-P	Member	FL	1/1/19 – 12/31/20	1/1/19 – 12/31/20
6. Jeffrey Maler, BSN, RN, EMT-B, CEN, TCRN	Member	TX (AE)	1/1/20 – 12/31/21	1/1/20 – 12/31/21

Board Liaison: Kristen Cline**Staff Liaison:** Monica Kolbuk**2020 Charges:**

1. Provide subject matter expertise on emergency medical services as it relates to the emergency nurse
2. Review and recommend resources to promote collaboration between EMS providers and emergency nurses
3. Review EMS initiatives to improve population health and provide recommendations as relevant to emergency nursing

2020 Specific Criteria:

- Must have current or recent experience as an EMS provider (basic, advanced, pre-hospital RN, flight nursing that does 911 response) or be in an EMS leadership or education position
- Ability to review and respond to assigned documents related to EMS and emergency nursing, sometimes on urgent timelines
- Ability to serve for a one-year term

EMERGENCY NURSING ADVANCED PRACTICE ADVISORY COUNCIL

Name	Position	State	Position Term	Service Term
1. David House, DNP MSN BSN BS RN APRN CRNP FNP CNS CEN ENP-C FNP-BC	Chair	AL	1/1/20 – 12/31/20	1/1/19 - 12/31/21
2. Kimberly Brandenburg, CEN, CPEN, APRN-BC, FNP-C	Member	NE	1/1/20 – 12/31/21	1/1/20 – 12/31/21
3. Nancy Denke, DNP, RN, ACNP, CEN, ACNP-BC, CCRN, FNP-BC, FAEN	Member	AZ	1/1/20 – 12/31/21	1/1/20 – 12/31/21
4. Chris Gisness, MSN, RN, FNP, CEN, ATCN, ENP-C, FNP- C, TCRN, FAEN	Member	GA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
5. Michael Gooch, DNP, NP, CEN, CFRN, CTRN, ACNP-BC, ENP-BC, ENP-C, FNP-BC, NREMT-P, TCRN	Member	TN	1/1/20 – 12/31/20	1/1/20 – 12/31/20
6. Nycole Oliver, DNP, RN, APRN, CEN, ACNPC-AG, FNP-C	Member	AR	1/1/20 – 12/31/20	1/1/18 – 12/31/20
7. Darleen Williams, DNP, CNS, EMT-P, CEN, CCNS	Member	FL	1/1/19 – 12/31/20	1/1/19 – 12/31/20
8. Tresa Zielinski, DNP, RN, APRN, CPNP-PC	Member	IL	1/1/20 – 12/31/21	1/1/20 – 12/31/21

Board Liaison: Jennifer Schmitz**Staff Liaison:** Margaret Carman**2020 Charges:**

1. Provide subject matter expertise for advanced practice nursing issues
2. Generate ideas for advanced practice nursing program development and implementation in accordance with ENA's strategic plan
3. Review and provide feedback on educational content and other ENA initiatives as requested
4. Collaborate with conference education planning committee to enhance the APRN conference experience

2020 Specific Criteria:

- Must have experience in advanced practice in emergency or urgent care settings
- Evidence of scholarly activities such as developing evidence-based practice protocols, developing or conducting nursing education, implementing evidence into practice, evaluating outcomes (patient/population, nurse, or systems level), and/or publications is required
- Certified nurse practitioner or clinical nurse specialist preferred
- Doctorate of Nursing Practice or other appropriate advance degree required
- Ability to serve for a two-year term
- Onsite meeting required

EMERGENCY NURSING CONFERENCE EDUCATION PLANNING COMMITTEE

Name	Position	State	Position Term	Service Term
1. Michael Dustin Bass, MHA, BSN, RN, CEN	Co-Chair	NV	1/1/20 – 12/31/20	1/1/18 – 12/31/20
2. Jaime Stephens-Davenport, BSN, RN, CEN, CPEN, TCRN	Co-Chair	KY	1/1/20 – 12/31/20	1/1/18 – 12/31/20
3. Don Andrews, MS, BSN, RN, CEN	Member	LA	1/1/20 – 12/31/20	1/1/17 – 12/31/20
4. Trina Cole, MSN, BSN, RN, SANE, FACHE	Member	MO	1/1/17 – 12/31/20	1/1/17 – 12/31/20
5. Teresa Dodge, RN, BSN, CEN	Member	NY	1/1/18 – 12/31/21	1/1/18 – 12/31/20
6. Melinda Elayda, MPA, BSN, RN	Member	CA	1/1/20 – 12/31/21	1/1/20 – 12/31/21
7. Christopher Fernandez, BSN, RN	Member	Canada	1/1/19 – 12/31/20	1/1/19 – 12/31/20
8. Diane Fuller Switzer, DNP, RN, ARNP, CEN, CCRN, ENP-BC, ENP-C, FNP-BC, FAEN	Member	WA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
9. Heidi Gilbert, BSN, RN, CEN, SANE	Member	OK	1/1/20 – 12/31/21	1/1/20 – 12/31/21
10. Jill LeBeau, RN	Member	CO	1/1/20 – 12/31/21	1/1/20 – 12/31/21
11. William Light, MSN, BSN, BS, ADN, RN, CEN, CPEN, TCRN	Member	OR	1/1/19 – 12/31/20	1/1/19 – 12/31/20
12. Sarah Sargalski Munier, MSN, RN, CEN	Member	MD	1/1/20 – 12/31/21	1/1/20 – 12/31/21
13. Brett Pickens, DNP, MSN-ED, BSN, ADN, RN, CEN, CPEN, CNE	Member	MS	1/1/20 – 12/31/21	1/1/20 – 12/31/21
14. Bradley Rund, MSN, BSN, AS, RN, EMT-P, CEN, CPEN, CFRN, NREMT-P	Member	IN	1/1/20 – 12/31/21	1/1/20 – 12/31/21
15. Brent Seus, RN	Member	MO	1/1/20 – 12/31/21	1/1/20 – 12/31/21
16. Rachael Smith, MSN-ED, RN, CEN	Member	CT	1/1/18 – 12/31/21	1/1/18 – 12/31/20
17. Kirk Tapia-Bobst, MSN, RN, CEN, CPEN, PHRN, TCRN	Member	IL	1/1/20 – 12/31/21	1/1/20 – 12/31/21
18. Marie Yabut, MN, RN, CEN	Member	WA	1/1/20 – 12/31/21	1/1/20 – 12/31/21

Board Liaison: Mike Hastings**Staff Liaison:** Rashonda Legault**2020 Charges:**

1. Identify key learning outcomes and content for education relevant to emergency nursing
2. Explore and implement innovative learning approaches to enhance the overall ENA conference experience
3. In collaboration with advanced practice advisory council and other organizations as appropriate, create a plan to include content designed for advanced practice nurses, including pharmacology and relevant clinical and professional development issues based on member feedback and needs assessment

2020 Specific Criteria:

- Highly recommended that applicants have attended the Emergency Nursing 2019 to observe meeting processes and flow of events
- Must be available to attend the annual Emergency Nursing conference
 - Willingness to work throughout annual conference as session monitors
 - Ability to walk long distances and participate in conference activities as scheduled
 - Suggest that applicants not participate as delegates or alternate delegates at the 2020 General Assembly to avoid scheduling issues
- Experience in program planning and/or nursing education
- Knowledge of the American Nurses Credentialing Center (ANCC) Guidelines for continuing education
- Onsite meeting required at the ENA National office
- Ability to adapt to quickly to new technology
- Ability to serve for a two-year term

EMERGENCY NURSING EDUCATION ADVISORY COUNCIL

Name	Position	State	Position Term	Service Term
1.Wesley Davis, DNP, APRN, CEN, AGACNP-BC, ENP-C, FNP-C	Chair	WY	1/1/20 – 12/31/20	1/1/19 – 12/31/21
2.Barbra Bachmeier, JD, MSN, APRN, NP-C, FAEN	Member	IN	1/1/20 – 12/31/21	1/1/20 – 12/31/21
3.Deborah Burg, MSN, RN	Member	NJ	1/1/19 – 12/31/20	1/1/19 – 12/31/20
4.Jamie Dahm, MSN-ED, RN, CEN	Member	MO	1/1/19 – 12/31/20	1/1/19 – 12/31/20
5.Julie Slack, PhD, RN	Member	MI	1/1/20 – 12/31/21	1/1/20 – 12/31/21
6.Deborah Spann, MSN ADN RN CEN RN-BC	Member	IL	1/1/20 – 12/31/20	1/1/19 – 12/31/20

Board Liaison: Chris Dellinger

Staff Liaison: Nicole Williams

2020 Charges:

1. Provide subject matter expertise for educational products and other initiatives
2. Generate ideas for educational products, program development and implementation
3. Assist in prioritizing the content development initiatives based upon the ENA Strategic Plan
4. Review and provide feedback on educational content as requested

2020 Specific Criteria:

- Must have extensive knowledge about and experience in nursing education
- Knowledge of adult learning principles
- Experience with various educational delivery methods, including live, enduring, online, and/or distance learning
- Must have a minimum of a Master's degree in Nursing
- Ability to serve for a two-year term
- No onsite meeting required

EMERGENCY NURSING RESEARCH ADVISORY COUNCIL

Name	Position	State	Position Term	Service Term
1. Paul Clark, PhD, MA, RN	Chair	IN	1/1/20 – 12/31/20	1/1/19 - 12/31/21
2. Kathy Baker, PhD, RN, NE-BC	Member	VA	1/1/18 – 12/31/20	1/1/18 – 12/31/20
3. Courtney Edwards, DNP, MPH, RN, CEN, CCRN, TCRN	Member	TX	1/1/19 – 12/31/21	1/1/19 – 12/31/21
4. Warren Frankenberger, PhD, MSN, RN, CCNS	Member	DE	1/1/18 – 12/31/20	1/1/18 – 12/31/20
5. Kimberly Johnson, PhD, RN, CEN	Member	OH	1/1/19 – 12/31/21	1/1/19 – 12/31/21
6. Kathleen Zavotsky, PhD, RN, CEN, ACNS-BC, CCRN, FAEN	Member	NJ	1/1/19 – 12/31/19	1/1/18 – 12/31/20

Board Liaison: Ryan Oglesby

Staff Liaison: Lisa Wolf

2020 Charges:

1. Provide subject matter expertise for the advisory council
2. Assist in development and implementation of 5 year research strategic plan
3. Assist in prioritizing the advisory council's programs based upon the ENA Strategic Plan
4. Collaborate with ENA Foundation to review research grant proposals
5. Participate in developing research protocols, analyzing data and contributing to manuscripts
6. Participate in development and writing *Understanding Research* column for *Journal of Emergency Nursing (JEN)*

2020 Specific Criteria:

- Writing sample may be required as part of submission
- Must have extensive knowledge about and experience in nursing research
- Evidence of scholarly activities such as developing proposals, conducting research, dissemination, and/or implementing findings into practice is required
- Interest in collaborative research with other members of the Advisory Council
- Must have a minimum of a doctorate, will consider those enrolled in PhD programs
- Ability to serve for a two- or three-year term in order to collaborate meaningfully on research projects
- Onsite meeting required

EMERGING PROFESSIONAL ADVISORY COUNCIL

Name	Position	State	Position Term	Service Term
1. Shannen Kane, BSN, RN	Chair	NC	1/1/20 – 12/31/20	1/1/19 – 12/31/20
2. Kelsea Bice, MSN, BSN, BS, RN, CEN	Member	TX	1/1/19 – 12/31/19	1/1/19 – 12/31/20
3. Haley Brown, BSN, RN, EMT-B	Member	TX	1/1/20 – 12/31/21	1/1/20 – 12/31/21
4. Sydney Bryant, RN	Member	OH	1/1/19 – 12/31/20	1/1/19 – 12/31/20
5. Norma Hernandez-Ramirez, MSN, RN	Member	CA	1/1/20 – 12/31/21	1/1/20 – 12/31/21
6. Adam Tebben, BSN, RN	Member	KS	1/1/19 – 12/31/20	1/1/19 – 12/31/20
7. Mica David, BSN, RN	Emerging Professional Liaison	GA	1/1/20 – 12/31/21	1/1/20 – 12/31/21

Board Liaison: Jennifer Schmitz**Staff Liaison:** Matt Hessler**2020 Charges:**

1. Help assess and engage the needs of emerging professional members
2. Evaluate whether any new benefits or resources are necessary to support the needs of emerging professionals
3. Advise ENA on the best channels to communicate with this membership group
4. Advise on opportunities for expanding engagement of emerging professionals
5. Serve as the planning team for the emerging professionals event held during annual conference

2020 Specific Criteria:

- Must have five years or less experience in emergency nursing at the time of appointment
- Must be comfortable with virtual engagement via online meetings, email, and document sharing
- Ability to serve a two-year term
- No onsite meeting required

EMERGING PROFESSIONAL LIAISON

Name	Position	State	Position Term	Service Term
1. Mica David, BSN, RN	Member	GA	1/1/20 – 12/31/20	1/1/20 – 12/31/20

Staff Liaison: Ashley Schuring

2020 Charges:

1. Provide the emerging professional perspective and key insights at the national level through active participation in all Board meetings
2. Serve as a non-voting liaison to the ENA Board of Directors for a one-year term
3. Participate in person at all Board meetings during the year and attend the State and Chapter Leaders Orientation and Day on the Hill
4. Participate in Board projects and workgroups as assigned
5. Provide an update/seek commentary on issues facing emerging professionals during the ENA Update with the Board of Directors at the annual conference
6. Simultaneously serve as a member of the Emerging Professional Advisory Council for one year and serve as Chair the following year Draft an end-of-year report on the experience as an Emerging Professional Liaison and support the transition of the role to a new emerging leader
7. Other mentoring/shadowing opportunities may include: a one-on-one meeting with the ENA president and shadowing a Board Liaison during a state visit and/or national volunteer group call (with permission)

2020 Specific Criteria:

- Must have five years or less experience in emergency nursing at the time of appointment
- Be a current ENA member in good standing
- Previous experience in an ENA State Council/Chapter leadership position or ENA volunteer position is recommended
- Cannot be a sitting member of the ENA Board of Directors
- Must be able to commit to attending in-person meetings and various conference calls as needed
- Must be comfortable with virtual engagement via online meetings, email, and document sharing

ENPC REVIEW WORK TEAM

Name	Position	State	Position Term	Service Term
1.Cam Brandt, MSN, RN, CEN, CPEN	Chair	TX	1/1/20 – 6/30/20	1/1/20 – 6/30/20
2.Paula Davis, MSN, APRN, CEN, CPEN, CFRN, FNP-BC	Member	FL	1/1/20 – 6/30/20	1/1/20 – 6/30/20
3.Mara Harner, MSN, RN, CPEN	Member	CO	1/1/20 – 6/30/20	1/1/20 – 6/30/20
4.Jennifer Jordan, MSN, RN, CEN, CPEN	Member	WA	1/1/20 – 6/30/20	1/1/20 – 6/30/20
5.Justin Milici, MSN, RN, CEN, CPEN, CCRN, TCRN, FAEN	Member	TX	1/1/20 – 6/30/20	1/1/20 – 6/30/20
6.Katherine Stolz Grindinger, RN	Member	CO	1/1/20 – 6/30/20	1/1/20 – 6/30/20
7.Philip Vondrus, BSN, BA, RN, CEN, CPEN, CTRN, MICN	Member	HI	1/1/20 – 6/30/20	1/1/20 – 6/30/20
8.Jennifer Zaremba, DNP, APRN, CNS	Member	MN	1/1/20 – 6/30/20	1/1/20 – 6/30/20

Board Liaison: Terry Foster**Staff Liaison:** Nicole Williams**2020 Charges:**

1. Provide subject matter expertise for the Emergency Nursing Pediatric Course (ENPC) 5th ed
2. Serve as subject matter experts (SMEs) in the quarterly Agile Revision process
3. Provide content review of course material and recommendations for course content edits

2020 Specific Criteria:

- Must have subject matter expertise in pediatrics
- It is desired that this work team represents diversity in experience, including pediatric nurses representing children's hospitals as well as nurses representing general hospitals providing emergency care to pediatric patients
- ENPC 5th ed Course Instructor or Course Director verification required
- Ability to serve for a 6-month term

GERIATRIC COMMITTEE

Name	Position	State	Position Term	Service Term
1. Aaron Malsch, RN, MSN, GCNS-BC	Chair	WI	1/1/19 – 12/31/20	1/1/19 - 12/231/21
2. Scott Isenberg, BSN, RN, CEN, TCRN	Member	IN	5/27/19 – 12/31/20	5/27/19 – 12/31/20
3. Joan Michelle Moccia, DNP, MSN, RN, ANP-BC, CCRN	Member	MI	1/1/19 – 12/31/20	1/1/19 – 12/31/20
4. Dawn Specht, PhD, MSN, RN, CRNP, CNS, CEN, CPEN, AGACNP-BC, CCNS, CCRN, FAEN	Member	NJ	1/1/19 – 12/31/20	1/1/19 – 12/31/20
5. Lisa Gaeta, MSN, RN, CEN	Member	NY	5/28/2020 – 12/31/21	1/1/20 – 12/31/21
6. Vibeka Wilt, BSN, BA, RN, CEN, CCRN	Member	WV	1/1/20 – 12/31/21	1/1/20 – 12/31/21

Board Liaison: Joop Breuer**Staff Liaison:** Katrina Ceci**2020 Charges:**

1. Provide subject matter expertise related to geriatric emergency care
2. Identify and recommend resources to promote geriatric readiness in the emergency department
3. Revise, edit and develop resources for geriatric emergency care as requested

2020 Specific Criteria:

- Must have subject matter experience in Geriatrics (elderly) population and be willing to serve on collaborative projects
- Research and/or performance improvement background recommended
- Background in emergency nursing education preferred
- Ability to write clearly, professionally, and within established timelines
- Ability to serve for a one-two year term

INTERNATIONAL ADVISORY COUNCIL

Name	Position	Country	Position Term	Service Term
1. Vanessa Gorman, BS, RN, CEN Chairperson (2/27/2019 – 12/31/20)	Chair	Australia	2/27/19 – 12/31/20	1/1/17 – 12/31/20
2. Dawn Peta, BSN, RN Chairperson (1/1/21 – 12/31/21)	Chair-Elect	Canada	1/1/20 – 12/31/20	1/1/19 – 12/31/21
3. Margaret Dymond, BSN, RN	Member	Canada	1/1/20 – 12/31/21	1/1/20 – 12/31/21
4. Melissa Hanley, BSN, RN, CEN, TCRN	Member	Japan	1/1/19 – 12/31/20	1/1/19 – 12/31/20
5. Walter Sergio Lugari, BSN, RN, ATCN	Member	Germany	1/1/20 – 12/31/21	1/1/20 – 12/31/21
6. Gunilla Lundgren, RN	Member	Sweden	1/1/19 – 12/31/20	1/1/19 – 12/31/20
7. Marc Marquez, RN	Member	Australia	1/1/20 – 12/31/21	1/1/20 – 12/31/21

Board Liaison: Joop Breuer

Staff Liaison: Heather Nash

2020 Charges:

1. Advise ENA on opportunities to advance ENA's international strategy
2. Develop opportunities to expand the international community
3. Evaluate current process for international delegate selection and provide recommendations
4. Evaluate all ENA white papers, position statements and topic briefs for global perspective

2020 Specific Criteria:

- Strong understanding of ENA
- Understanding of local and global nursing issues
- Ability to participate in virtual and in-person meetings in the United States. Onsite meeting at annual emergency nursing conference required
- Ability to serve for a two-year term

LANTERN AWARD COMMITTEE

Name	Position	State	Position Term	Service Term
1. Jennifer Van Cura, DNP, MSN, MPH, MBA, RN, CEN, CPEN, TCRN	Chair	CO	1/1/20 – 12/31/20	1/1/19 - 12/31/21
2. Tyler Babcock, MSN, MBA, BSN, RN, CEN	Member	PA	1/1/20 – 12/31/21	1/1/20 – 12/31/21
3. David Gueldner, BSN, RN, EMT-P, CEN, CPEN	Member	MO	1/1/20 – 12/31/21	1/1/20 – 12/31/21
4. Derrick Johnson, RN	Member	VA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
5. Chantel Knox, MSN, RN, CEN, TCRN	Member	MD	1/1/19 – 12/31/20	1/1/19 – 12/31/20
6. Ma Cecilia Reyes, BSN, RN	Member	NC	1/1/20 – 12/31/21	1/1/20 – 12/31/21
7. Debra Rodriguez, MSN, BSN, RN, SANE	Member	TX	1/1/20 – 12/31/21	1/1/20 – 12/31/21
8. Samuel Snell, RN	Member	CA	1/1/20 – 12/31/20	1/1/20 – 12/31/20
9. Kevin Stansbury, MBA, BS, RN, CEN, VA-BC	Member	CA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
10. Teresa Wenner, MSN, BSN, RN, CEN, CPEN	Member	WV	1/1/19 – 12/31/20	1/1/19 – 12/31/20

Board Liaison: Ryan Oglesby

Staff Liaison: Ellen Siciliano

2020 Charges:

1. Review and recommend revisions for Lantern Award program materials as requested
2. Review and score eligible Lantern Award applications
3. Provide substantive and supported comments/feedback for Lantern application responses

2020 Specific Criteria:

- Must be able to participate in reviewer training and utilize the online reviewer tool to evaluate Lantern applications
- Willingness to mentor Lantern Award reviewers if needed
- Deadlines and activity are heaviest between January-July; must have capacity to review a significant number of applications within an eight-week period (April-May) and participate in WebEx meetings during June and/or July to create applicant feedback letters
- Excellent writing skills required in order to provide content for inclusion in applicant feedback letters.
- Ability to serve for a two-year term
- No onsite meeting required

LANTERN AWARD REVIEWERS

Name	Position	State	Position Term	Service Term
1.Carol Fridal, MS, RN EMT-B, CEN, CLNC	Member	IA	1/1/18 – 12/31/20	1/1/18 – 12/31/20
2.Christina Kelly, BSN, RN, CEN	Member	PA	1/1/20 – 12/31/21	1/1/20 – 12/31/21
3.Diane Koyasu Heine, DNP, MSN, BSN, AND, RN, CEN	Member	CA	1/1/18 – 12/31/20	1/1/18 – 12/31/20
4.Kimberly Mueller, BSN, RN, CEN, CPEN	Member	IA	1/1/20 – 12/31/21	1/1/20 – 12/31/21
5.Jaimie Ostrom, MSN, BSN, RN, CEN, CNL	Member	TX	1/1/18 – 12/31/20	1/1/18 – 12/31/20
6.Kimberly Probus, MSN, MBA, RN, CEN, NEA-BC	Member	LA	1/1/18 – 12/31/20	1/1/18 – 12/31/20
7.Chris Rankin, MSN, RN, EMT-B, CEN	Member	OH	1/1/18 – 12/31/20	1/1/18 – 12/31/20
8.Mary Beth Tucker, RN, CEN, CCNS	Member	GA	1/1/20 – 12/31/21	1/1/20 – 12/31/21
9.Jennifer Wheeler, BSN, RN	Member	NC	1/1/18 – 12/31/20	1/1/18 – 12/31/20
10.Heidi Webber, RN	Member	MO	1/1/20 – 12/31/21	1/1/20 – 12/31/21

Board Liaison: Ryan Oglesby**Staff Liaison:** Ellen Siciliano**2020 Charges:**

1. Review and score eligible Lantern Award applications
2. Provide substantive and supported comments/feedback for Lantern application responses

2020 Specific Criteria:

- Must be able to participate in reviewer training and utilize the online reviewer tool to evaluate Lantern applications
- Must have capacity to review a significant number of applications within an eight-week period (April-May)
- Must be able to participate in reviewer discussions through email and conference/WebEx calls
- Each reviewer will be overseen by a Lantern Award Committee member if needed
- Reviewer focus is on scoring applications using the defined set of criteria in the scoring tool
- No participation in committee decisions or onsite meeting is involved
- Ability to participate in several conference calls and share documents via WebEx Conferencing
- Ability to serve for a two-year term

PEDIATRIC COMMITTEE

Name	Position	State	Position Term	Service Term
1.Katherine Logee, MSN, RN, NP, CEN, CPEN, CFRN, CNE, FNP-BC, PNP-BC	Chair	CA	1/1/20 – 12/31/20	1/1/19 – 12/31/21
2.Dixie Elizabeth Bryant, MSN, RN, CEN, CPEN, NE-BC	Member	KY	1/1/19 – 12/31/20	1/1/19 – 12/31/20
3. Maureen Curtis Cooper, BSN, RN, CEN, CPEN, FAEN	Member	MA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
4.Karen Kaskie, BSN, RN, CEN, CPEN, CFRN	Member	SD	1/1/20 – 12/31/21	1/1/20 – 12/31/21
5.Tristen Palumbo, MSN, MBA, BSN, RN, CPEN, CPN	Member	LA	1/1/20 – 12/31/21	1/1/20 – 12/31/21
6.Gail Schoolden, DNP, RN, APRN, CNS, CPEN, ATCN	Member	MD	1/1/20 – 12/31/21	1/1/20 – 12/31/21

Board Liaison: Kristen Cline

Staff Liaison: Cathy Olson

2020 Charges:

1. Provide subject matter expertise related to pediatric emergency care
2. Identify, recommend and/or develop resources for care of the pediatric patient in emergency care settings
3. Review and provide feedback on educational content and other ENA initiatives as requested

2020 Specific Criteria:

- Must have subject matter experience in pediatrics
- Experienced nurses representing children's hospitals as well as nurses representing general hospitals that provide emergency care to pediatric patients desired
- Current ENPC provider status
- Ability to serve for a two-year term
- No onsite meeting is required

PEER REVIEW EDUCATION COMMITTEE

Name	Position	State	Position Term	Service Term
1.Sara Abel, MSN, RN, CEN	Member	IN	1/1/19 – 12/31/20	1/1/19 – 12/31/20
2.Charlene Draleau, MSN, RN, CPEN, CPN, RN-BC	Member	RI	1/1/20 – 12/31/21	1/1/20 – 12/31/21
3.Mariann Cosby, DNP, MSN, MPA, RN, CEN, CCM, LNC, NE-BC PHN	Member	CA	1/1/20 – 12/31/21	1/1/20 – 12/31/21
4.Lisa Eckenrode, DNP, MSN, MBA, RN, NRP, TCRN	Member	PA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
5.Janis Farnholtz-Provinse, MS, BSN, RN, CNS, CEN, TCRN, FAEN	Member	CA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
6.Sandra Fonkert, MSN, RN, CEN, CPEN, TCRN	Member	MN	1/1/19 – 12/31/20	1/1/19 – 12/31/20
7.Marie Garrison, MSN, RN, EMT-I, CEN	Member	OH	1/1/19 – 12/31/20	1/1/19 – 12/31/20
8.Candi Miller-Morris, MSN, RN, CNS, CEN, CCRN	Member	NM	1/1/20 – 12/31/21	1/1/20 – 12/31/21
9.Nicole Price, MSN, ANP, CNS, CEN, CPEN, RN-BC	Member	AK	1/1/19 – 12/31/20	1/1/19 – 12/31/20
10.Michele Redlo, MSN, MPA, BSN, RN, CPEN, PHN	Member	CA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
11.Jessica Ungerer, MSN, BSN, RN, CEN	Member	OH	1/1/19 – 12/31/20	1/1/19 – 12/31/20
12.Shuba Samuel, PhD, MSN, BSN, RN, FNP, CEN, CNE, FNP-BC	Member	MI	1/1/20 – 12/31/21	1/1/20 – 12/31/21
13.Melissa Scott, PhD, MSN, BSN, ADN, RN	Member	NC	1/1/20 – 12/31/21	1/1/20 – 12/31/21
14.Joan Somes, PhD, MSN, RN, CEN, CPEN, RN-BC, FAEN	Member	MN	1/1/20 – 12/31/21	1/1/20 – 12/31/21
15.Jonathan Willis, MSN, RN, CEN, CPEN, CCRN-K (Adult), TCRN	Member	IN	1/1/20 – 12/31/21	1/1/20 – 12/31/21
16.Mary Zaleski, DNP, RN, CEN, RN-BC, FAEN	Member	MD	1/1/20 – 12/31/21	1/1/20 – 12/31/21

Board Liaison: N/A**Staff Liaison:** Kim Cheramie**2020 Charges:**

1. Serve as peer review members of the ENA's accredited Approver Unit CNE applications
2. Participate as pilot study subjects for ENA's accredited Provider Unit's newest products or activities
3. Serve as content reviewers for ENA's accredited Provider Unit ongoing CNE activities

2020 Specific Criteria:

- Experience with the American Nurses Credentialing Center's criteria for continuing nursing education
- Ability to independently review, on average one to two continuing education applications and required forms submitted to ENA's approval unit each month, occasionally requiring a quick turn-around. The number of submitted applications and required forms varies each quarter.
- Mentor new members through at least three CNE applications of varying complexity
- Ability to serve for a two-year term No onsite meeting is required

POSITION STATEMENT COMMITTEE

Name	Position	State	Position Term	Service Term
1.Elizabeth Stone, MSN, RN, CPEN, FAEN	Chair	NC	1/1/20 – 12/31/20	1/1/20 – 12/31/22
2.Andrew Bowman, MSN, BSN, RN, APRN, NP, ACNP, EMT-P, CEN, CPEN, CFRN, CTRN, ACNP-BC, ACNPC, CCRN, CCRN-CMC, CVRN, NREMT-P, NRP, TCRN	Member	IN	1/1/20 – 12/31/22	1/1/20 – 12/31/22
3.Brenda Braun, MSN, BSN, RN, CEN, CPEN, FAEN	Member	NJ	1/1/20 – 12/31/22	1/1/20 – 12/31/22
4.Carla Brim, MN, RN, CNS, CEN, PHCNS-BC	Member	WA	1/1/19 – 12/31/21	1/1/19 – 12/31/21
5.Alison Day, PhD, MSN, BS, RN, FAEN	Member	UK	1/1/20 – 12/31/22	1/1/20 – 12/31/22
6.Judith Carol Gentry, MHA, BSN, RN, CEN, CPEN, CFRN, CTRN, CNML, NE-BC, RN-BC	Member	OR	1/1/18 – 12/31/20	1/1/18 – 12/31/20
7.Ann Marie Papa, DNP, MSN, BSN, RN, CEN, NE-BC, FAEN, FAAN	Member	PA	1/1/19 – 12/31/21	1/1/19 – 12/31/21
8.Matt Proud, DNP, RN, CEN	Member	KY	1/1/19 – 12/31/21	1/1/19 – 12/31/21
9.Cheryl Riwitis, MSN, RN, FNP, EMT-B, CEN, CFRN, FAEN	Member	IN	1/1/18 – 12/31/20	1/1/18 – 12/31/20
10.Kathryn Rogers, MSN, RN, CEN, CPEN, CPHQ, NEA-BC, TCRN	Member	OR	1/1/19 – 12/31/21	1/1/19 – 12/31/21
11.Diane Salentiny-Wroblewski, PhD, MS, RN, CEN, ACNS-BC, RN-BC	Member	MN	10/1/18 – 12/31/20	10/1/18 – 12/31/20
12.Jennifer Schieferle Uhlenbrock, DNP, MBA, RN	Member	TX	1/1/20 – 12/31/20	1/1/18 – 12/31/20
13.Sharon Vanairsdale, DNP, MS, RN, APRN, NP, CNS, CEN, ACNS-BC, NP-C, FAEN, FAAN	Member	GA	1/1/20 – 12/31/22	1/1/20 – 12/31/22
14.Jennifer Williams, PhD, RN, ACNS-BC	Member	MO	9/23/19 – 12/31/21	9/23/19 – 12/31/21

Board Liaison: Gordon Gillespie**Staff Liaison:** Monica Kolbuk**2020 Charges:**

1. Recommend subject matter experts to collaborate with ENA committees and work teams in developing new position statements
2. Review, revise, develop and/or recommend for archive, Position Statements for ENA Board approval
3. Collaborate with external organizations on Joint and Supported Position Statements at the direction of the ENA Board of Directors

2020 Specific Criteria:

- Capacity to review significant number of scientific articles and other literature, conduct literature searches, and be able to critically analyze and discuss the results of the literature searches
- Ability to write clearly, professionally, and within the timelines established by the PSC process
 - Academic writing sample using APA format and editing sample will be required as part of submission
- Master's degree required; Doctoral degree is preferred.
- Previous experience on the Clinical Practice Guidelines Committee, IENR Advisory Council or Journal of Emergency Nursing (JEN) Editorial Board is preferred
- Ability to participate in at least one conference call each month
- Ability to serve for a three-year term
- No onsite meeting is required

QUALITY AND SAFETY ADVISORY COUNCIL

Name	Position	State	Position Term	Service Term
1.Elizabeth Brennan, EdD, MSN, Med, BS, ADN, RN, CEN	Chair	PA	1/1/20 – 12/31/20	1/1/19 – 12/31/21
2.Janet Abbott Eckhart, EdD, MSN, RN	Member	IA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
3.Leann Briggs, BSN, BA, RN	Member	KS	1/1/20 – 12/31/21	1/1/20 – 12/31/21
4.Melinda Elayda, MPA, BSN, RN	Member	CA	1/1/20 – 12/31/20	1/1/17 – 12/31/20
5.Robert Kentner, MSN, RN, EMT-P, CEN, CPHQ, NREMT-P, TCRN	Member	NE	1/1/20 – 12/31/21	1/1/20 – 12/31/21
6.Deborah Schwytzer, DNP, RN, CEN, RN-BC	Member	OH	1/1/19 – 12/31/20	1/1/19 – 12/31/20

Board Liaison: Ron Kraus**Staff Liaison:** Cathy Olson**2020 Charges:**

1. Provide subject matter expertise on quality, safety and injury prevention relevant to emergency nursing practice
2. Generate ideas for program development and implementation for quality, safety and injury prevention in accordance with the ENA Strategic Plan
3. Review and provide feedback on initiatives, practice resources or other documents as requested

2020 Specific Criteria:

- Must have knowledge about and experience in quality, safety, and/or injury prevention
- Previous experience in implementing quality, safety and/or injury prevention activities
- Ability to serve for a two-year term
- No onsite meeting required

RESOLUTIONS COMMITTEE

Name	Position	State	Position Term	Service Term
1. Adam Johnston, BA, RN, CEN	Chair	ND	1/1/19 – 12/31/20	1/1/18 – 12/31/20
2. Donelle Brasseal, MSN, RN	Member	LA	1/1/18 – 12/31/20	1/1/18 – 12/31/20
3. Daniel Misa, MSN, RN, CEN, CPEN	Member	NJ	1/1/19 – 12/31/21	1/1/19 – 12/31/21
4. India Owens, MSN, RN, CEN, NE-BC, FAEN	Member	IN	1/1/19 – 12/31/21	1/1/19 – 12/31/21
5. Christopher Parker, MSN, BSN, RN, CEN, CPEN, CFRN, CNL, NRP, TCRN	Member	VA	1/1/20 – 12/31/22	1/1/20 – 12/31/22
6. Cody Staub, RN	Member	WA	1/1/20 – 12/31/22	1/1/20 – 12/31/22

Board Liaison: Ron Kraus**Staff Liaison:** Ashley Schuring**2020 Charges:**

1. Conduct annual call for resolutions and bylaws amendments
2. Provide assistance to resolution and bylaws authors submitting a proposal
3. Ensure submitted bylaw amendments and resolutions adhere to ENA guidelines and formatting requirements
4. Review and provide feedback regarding the resolutions and bylaws amendments guidelines and supporting materials for submission of a proposal
5. Lead the reference committee hearings and report writing session and assist with debate and vote during the onsite General Assembly meeting
6. Deliberate and determine final recommendations and potential amendments for consideration during day two of General Assembly

2020 Specific Criteria:

- Experience with the resolutions and bylaws process on the local, state, or national level
- Prior attendance at one ENA General Assembly as a delegate
- Working knowledge of Roberts Rules of Order
- Two onsite meetings required. One held at the ENA National office and one held at the ENA annual emergency nursing conference
- Ability to serve for a three-year term

TNCC REVIEW WORK TEAM

Name	Position	State	Position Term	Service Term
1. Joseph Blansfield, MS, NP, TCRN	Chair	MA	4/1/17 – 6/30/20	4/1/17 – 6/30/20
2. Melanie Crowley, MSN, RN, CEN	Member	CA	4/1/17 – 6/30/20	4/1/17 – 6/30/20
3. Janis Farnholtz-Provinse, MS, BSN, RN, CNS, CEN, TCRN	Member	CA	4/1/17 – 6/30/20	4/1/17 – 6/30/20
4. Margaret McNeill, PhD, MS, BS, RN, APRN, CNS, CCNS, CCRN, NE-BC, FAAN	Member	MD	4/1/17 – 6/30/20	4/1/17 – 6/30/20
5. Kellyn Pak, MSN, RN, CEN, MICN	Member	CA	4/1/17 – 6/30/20	4/1/17 – 6/30/20
6. Sheila Silva, DNP, RN	Member	MA	4/1/17 – 6/30/20	4/1/17 – 6/30/20
7. Angela Westergard, MSN, MBA, RN, CEN	Member	AZ	4/1/17 – 6/30/20	4/1/17 – 6/30/20

Board Liaison: Chris Dellinger**Staff Liaison:** Katrina Ceci**2020 Charges:**

1. Provide subject matter expertise for the Trauma Nurse Core Course 8th ed
2. Serve as subject matter experts (SMEs) in the quarterly Agile Revision process
3. Provide content review of course material and recommendations for course content edits

2020 Specific Criteria:

- Must have current emergency department experience, including care of the trauma patient
- Must be a current TNCC instructor or course director status required)
- Ability to serve for a 6 month term

TRAUMA COMMITTEE

Name	Position	State	Position Term	Service Term
1. Steven Talbot, MSN, RN, CEN, TCRN	Chair	TX	1/1/20 – 12/31/20	1/1/19 – 12/31/20
2. Maria Teresa Ackerman, RN	Member	LA	1/1/20 – 12/31/21	1/1/21 - 12/31/21
3. Michael Dexter, BSN, RN, EMT-B, CEN, CPEN, CFRN, CCRN, TCRN	Member	LA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
4. Justin Heinrich, MSN, RN	Member	PA	1/1/20 – 12/31/21	1/1/21 - 12/31/21
5. Casey Hill, MSN, RN, CEN, TCRN	Member	NH	1/1/20 – 12/31/21	1/1/21 - 12/31/21
6. Renee Malaro, RN	Member	CT	1/1/19 – 12/31/20	1/1/19 – 12/31/20
7. Sonny Ruff, DNP, MSN, BSN, ADN, RN, APRN, FNP, CEN, ENP-BC, FNP-C	Member	MS	1/1/20 – 12/31/21	1/1/21 - 12/31/21
8. Justin Winger, PhD, MA, BSN, BA, RN, PHN	Member	CA	1/1/20 – 12/31/21	1/1/19 – 12/31/21

Board Liaison: Chris Dellinger**Staff Liaison:** Monica Kolbuk**2020 Charges:**

1. Collaborate on the ongoing updates and revisions of ENA's trauma related courses
2. Provide subject matter expertise related to trauma emergency care.
3. Collaborate on the development of trauma and/or injury prevention resources

2020 Specific Criteria:

- Must have subject matter experience in trauma and be willing to serve in collaborative projects
- Must currently be providing emergency care to trauma patients
- TNCC Instructor status preferred, not required
- Ability to serve for a two-year term
- No onsite meeting required

APPENDIX A:

FOR REFERENCE: ELECTED OR CONTRACTED VOLUNTEER GROUPS
(Standing ENA Boards and Committees)

ACADEMY OF EMERGENCY NURSING (AEN) BOARD – Elected Board

Name	Position	State	Position Term	Service Term
1. Vicki Patrick, MS, RN, CEN, ACNP-BC, FAEN	Chair	TX	1/1/20 – 12/31/20	1/1/17 – 12/31/21
2. Garrett K. Chan, PhD, APRN, CNS, CEN, FAEN, FAAN	Chair-Elect	CA	1/1/20 – 12/31/20	1/1/18 – 12/31/20
3. Denise Bayer, MSN, RN, FAEN	Member-at-Large	CA	1/1/20 – 12/31/21	1/1/20 – 12/31/21
4. Nicholas A. Chmielewski, MSN, RN, CEN, CNML, NEA-BC, FAEN	Member-at-Large	OH	1/1/19 – 12/31/20	1/1/19 – 12/31/20
5. Stephen Stapleton, PhD, RN, CEN, FAEN	Immediate Past Chair	MO	1/1/20 – 12/31/20	1/1/18 – 12/31/20

Board Liaison: Patricia Kunz Howard**Staff Liaison:** Heather Nash**Charges*:**

1. Support the recommendations of the ENA Diversity and Inclusivity work group by having a diverse membership within the Academy
2. Enhance the Academy Fellow applications process
3. Develop work groups within the Academy
4. Continue oversight of ENA Mentoring Program

Charges are being reviewed at December Board meeting*ENA FOUNDATION BOARD OF TRUSTEES – Elected Board**

Name	Position	State	Position Term
1. James Hoelz, MS, RN, CEN, FAEN	Chair	PA	1/1/18 – 12/31/21
2. Sally K Snow, BSN, RN, CPEN, FAEN	Chair-Elect	TX	1/1/18 – 12/31/22
3. Mickey Forness, BS, RN, CEN	Immediate Past Chair	NY	1/1/18 – 12/31/20
4. Jeff Solheim, MSN, RN, CEN, TCRN, CFRN, FAEN, FAAN	Member-At-Large	OR	1/1/19 – 12/31/21
5. Nancy Mannion Bonalumi, DNP, MS, RN, CEN, FAEN	Member-At-Large	PA	1/1/19 – 12/31/21
6. Melanie Jean Marsh, BSN, RN CEN, SANE, AEMD, ENC, ENCQ, CMRN, APHON	Member-At-Large	NV	1/1/19 – 12/31/21
7. Thelma Kuska, BSN, RN, CEN, FAEN	Member-At-Large	IL	1/1/19 – 12/31/20
8. Jackie M. Taylor-Wynkoop, MSN, RN	Member-At-Large	PA	1/1/19 – 12/31/20
9. Chris Gisness, RN, MSN, BC, FNP-C, CEN, TCRN, FAEN	Member-At-Large	GA	1/1/19 – 12/31/21
10. Andi L. Foley, DNP, RN, APRN, CEN, ACCNS-AG, TCRN	Member-At-Large	ID	1/1/19 – 12/31/20
11. Jessica Mathieson	Corporate Member-At-Large	MI	1/1/19 – 12/31/21
12. Michael Loughran, BA	Corporate Member-At-Large	PA	1/1/19 – 12/31/21
13. Dan Smith, RN, BSN, CEN, CFRN	Corporate Member-At-Large	NJ	1/1/19 – 12/31/21

Board Liaison: N/A**Staff Liaison:** Lise Jinno**Responsibilities:**

1. Promote the mission of the foundation
 - a. Champion the value of education and research to potential applicants and donors.
2. Engage and participate in fundraising activities on behalf of the foundation
 - a. Making a personal gift
 - b. Cultivate prospective donors
 - c. Solicit donations
 - d. Provide stewardship to donors

3. Participate in the development of new strategic programs
 - a. Academic scholarships
 - b. Continuing education scholarships
 - c. Research grants
4. Review and select scholarship and grant award recipients
 - a. Academic scholarships
 - b. Continuing education scholarships
 - c. Research grants

Expectations:

1. Participate in all board meetings and conference calls as required
2. Liaison to state councils for fundraising activities and providing information
3. Actively participate in all foundation outreach activities through participation and volunteer time.
 - a. State Challenge
 - b. Conference events and activities

JOURNAL OF EMERGENCY NURSING EXECUTIVE EDITORIAL BOARD – Contracted Board

Name	Position	Position Term	Service Term
1. Jessica Castner	Editor in Chief	N/A	N/A
2. TBD	Deputy Editor	N/A	N/A
3. TBD	Clinical Editor	N/A	N/A
4. Sue Barnason	Strategic Editor	N/A	N/A
5. Jessica Gill	Strategic Editor	N/A	N/A

Board Liaison: Gordon Gillespie**Staff Liaison:** Bridget Walsh and Robin Campbell**Charges:**

1. Assist the *Journal of Emergency Nursing* editor in addressing the development, direction, and policies of the Journal
2. Participation in the *Journal of Emergency Nursing* as a consulting editor, contributing editor, reviewer and/or author
3. Actively participate in the solicitation of authors and manuscripts for the *Journal of Emergency Nursing*

Specific Criteria:

- Previous publishing and demonstrated editing skill and experience
- Must have ability to solicit, review and edit manuscripts as needed for the Journal of Emergency Nursing

NOMINATIONS AND ELECTIONS COMMITTEE – Elected Committee

Name	Position	State	Position Term	Service Term
1. Matthew F. Powers, MS, BSN, RN, MICP, CEN, FAEN	<i>Chairperson</i> <i>Past ENA Board Member</i>	CA	1/1/20 – 12/31/20 1/1/20 – 12/31/22	1/1/20 – 12/31/20 1/1/20 – 12/31/22
2. David Samuelson, MSN, RN, CEN, CPEN, CTRN, CCRN	Member – Region 1	CA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
3. Julie Miller, BSN, RN, CEN	Member – Region 2	KS	1/1/20 – 12/31/22	1/1/20 – 12/31/22
4. Charles Schlichting, BSN, CEN	Member – Region 3	WI	1/1/19 – 12/31/20	1/1/19 – 12/31/20
5. Gina Slobogin, DNP, APRN, FNP-BC, NHDP-BC, CEN, PHRN	Member – Region 4	PA	1/1/20 – 12/31/21	1/1/20 – 12/31/21
6. Marge Letitia, BSN, RN, EMT-P, CEN	Member – Region 5	CT	1/1/19 – 12/31/20	1/1/19 – 12/31/20
7. Barbara Gibson, BSN, RN, CEN	Member – Region 6	TN	1/1/20 – 12/31/21	1/1/20 – 12/31/21

Board Liaison: Mike Hastings**Staff Liaison:** Ashley Schuring**2020 Charges:**

1. Conduct an equitable national election according to established ENA bylaws, policies and procedures

2. Assess, plan, implement and evaluate committee activities, progress and accomplishments throughout the year
3. Review and provide feedback regarding the national candidate applications for content, ease of use and effectiveness, in accordance with established bylaws, policies and procedures
4. Solicit potential candidates for the ENA Board of Directors and Nominations and Elections Committee
5. Present a ratified slate of candidates to the ENA Board of Directors
6. Provide a written and/or verbal progress report to the ENA Board of Directors at scheduled meetings as requested
7. Continue to incorporate competency based leadership development and assessment into the committee process.

APPENDIX B:

FOR REFERENCE: ENA FOUNDATION VOLUNTEER GROUPS
(ENA Foundation volunteer group participants selected by ENA Foundation Board)

ENA FOUNDATION FUNDRAISING COMMITTEE – ENA Foundation Committee

Name	Position	State	Position Term	Service Term
1. Jeff Solheim, MSN, RN, CEN, FAEN	Chair	OR	1/1/20 – 12/31/20	1/1/20 – 12/31/20
2. Melane Marsh, BSN, RN, CEN, SANE	Associate Chair	NV	1/1/20 – 12/31/20	1/1/20 – 12/31/20
3. Khay Douangdara, MSN, RN, CPEN	Member	KY	1/1/19 – 12/31/20	1/1/19 – 12/31/20
4. William Light, MSN, BSN, BS, ADN, RN, CEN, CPEN, TCRN	Member	OR	1/1/19 – 12/31/20	1/1/19 – 12/31/20
5. CherylAnn MacDonald Sweet, BS, RN, CEN, CPEN	Member	PA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
6. Kimberly Russo, MSN, BSN, RN, CEN	Member	NJ	1/1/19 – 12/31/20	1/1/19 – 12/31/20
7. Jackie Taylor-Wynkoop, MSN, RN, PHRN FAEN	Member	NJ	1/1/19 – 12/31/20	1/1/19 – 12/31/20
8. Melissa Easdon, MBA, BSN, RN, CEN, CPEN	Member	AR	1/1/20 – 12/31/21	1/1/20 – 12/31/21
9. Todd Haines, MSN, BSN, RN, EMT-I, CEN	Member	TN	1/1/20 – 12/31/21	1/1/20 – 12/31/21
10. Howard Miller, BSN, RN, NREMT-P, PHRN	Member	PA	1/1/20 – 12/31/21	1/1/20 – 12/31/21

Board Liaisons: Michael Loughran and Jessica Mathieson**Staff Liaison:** Lise Jinno**2020 Charges:**

1. Promotes and strengthens the culture of philanthropy
2. Champion fundraising for the ENA Foundation in your community and state
3. Provide advice and guidance to the Foundation Board of Trustees with respect to the mission, and strategic outlook, of the Foundation as it relates to raising money to further the mission of safe practice and safe care
4. Develop a network of resources

2020 Specific Criteria:

- Collaborate with the ENA Foundation and the ENA Foundation Board of Trustees to assist in local and state fundraising and program initiatives
- Participate in the promotion of the State Challenge, ENA National scholarships and research grants, and engage in ENA National fundraising activities
- Establish and maintain annual fundraising initiatives at the state level through collaboration with the State Council President and Treasurer and plan for adequate resources to maintain or expand fundraising efforts
- Maintain communications about current and ongoing fundraising activities with ENA Foundation, ENA Foundation Board of Trustees members, and other ENA State Fundraising Chairs
- Network within the state and with other similar organizations on fundraising and development initiatives in venues such as ENA National and local conferences, meetings, coalitions, and task forces
- Participate in ENA Foundation fundraising events at ENA conferences, if attending
- Ability to serve a two-year term
- Have fundraising responsibilities/role within their local Council or Chapter

ENA FOUNDATION RESEARCH GRANT COMMITTEE – ENA Foundation Committee

Name	Position	State	Position Term	Service Term
1. Nancy Bonalumi, DNP, MS, RN, CEN, FAEN	Chair	PA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
2. Garrett Chan, PhD, RN, NP, CNS, CEN, FAEN, FAAN	Associate Chair	CA	1/1/20 – 12/31/20	1/1/20 – 12/31/20
3. Erin Dees, MSN, RN, CEN	Member	MS	1/18/19 – 12/31/20	1/18/19 – 12/31/20
4. Kimberly Dawn Johnson, PhD, RN, CEN	Member	OH	1/1/19 – 12/31/20	1/1/19 – 12/31/20

5. Denise Campbell, DNP, RN, CEN, ACNS-BC	Member	MI	1/1/20 – 12/31/21	1/1/20 – 12/31/21
6. Sharon Jones, EdD, MSN, RN, CEN	Member	NJ	1/1/20 – 12/31/21	1/1/20 – 12/31/21

Board Liaison: Andi Foley

Staff Liaison: Lise Jinno

2020 Charges:

1. Review and score applications for ENA designated research grants and seed grants.
2. Provide guidance and strategic outlook for future research as it relates to engaging ENA membership on available research and successful funding of research
3. Champion ENA research and seed grant activity in your community and state

2020 Specific Criteria:

- Participate in conference calls for training and review of research grants
- Promote research grants to members at the state and local level
- Maintain communication with the ENA Foundation Board of Trustees member and ENA Foundation staff regarding the grant review process
- Contact research grant recipients
- Network within the state and with other similar organizations on the promotion of research grants and development initiatives in venues such as, ENA National and local conferences, meetings, coalitions, and task forces Participate in ENA Foundation fundraising events at ENA conferences, if attending
- Ability to serve a two-year term

ENA FOUNDATION SCHOLARSHIP COMMITTEE – ENA Foundation Committee

Name	Position	State	Position Term	Service Term
1. Sally Snow, BSN, RN, CPEN, FAEN	Chair	TX	1/1/19 – 12/31/20	1/1/20 – 12/31/20
2. Chris Gisness, MSN, RN, APRN, FNP, CEN, FNP-C, TCRN, FAEN	Associate Chair	GA	1/1/19 – 12/31/20	1/1/20 – 12/31/20
3. Marvin Delfin, MSN-ED, RN, CEN, CPEN, CCRN, CNRN, TCRN	Member	CA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
4. Julie Jones, BSN, BS, CEN, CFRN	Member	SC	1/1/19 – 12/31/20	1/1/19 – 12/31/20
5. Anna J. May, MSN, BA, RN, CEN, CPEN, RN-BC	Member	NE	1/1/19 – 12/31/20	1/1/19 – 12/31/20
6. Annabelle May, BSN, RN, FAEN	Member	MD	1/1/19 – 12/31/20	1/1/19 – 12/31/20
7. Alexis Moore, BSN, RN	Member	VA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
8. Elizabeth A. Nolan, MA, BSN, RN, CEN, FAEN	Member	TX	1/1/19 – 12/31/20	1/1/19 – 12/31/20
9. Vicki Patrick, MS, APRN, CEN, ACNP-BC, FAEN	Member	TX	1/1/19 – 12/31/20	1/1/19 – 12/31/20
10. Audrey Snyder, PhD, RN, ACNP, FNP, CEN, ACNP-BC, CCRN, FNP-BC, FAEN, FAAN, FAANP	Member	CO	1/1/19 – 12/31/20	1/1/19 – 12/31/20
11. Kristen Tarrell, MS, BSN, RN, CEN, PHRN	Member	CA	1/1/19 – 12/31/20	1/1/19 – 12/31/20
12. Amanda Ward, DNP, RN, CNE	Member	IN	1/1/19 – 12/31/20	1/1/19 – 12/31/20
13. Roger Casey, MSN, RN, CEN, TCRN, FAEN	Member	WA	1/1/20 – 12/31/21	1/1/20 – 12/31/21
14. Kelly Collins, BSN, RN, CEN, CPEN, SANE	Member	ME	1/1/20 – 12/31/21	1/1/20 – 12/31/21
15. Carol Fridal, MS, RN, EMT-B, CEN, CLNC	Member	IA	1/1/20 – 12/31/21	1/1/20 – 12/31/21
16. Mary Harwood, MSN-ED, RN, CEN	Member	NY	1/1/20 – 12/31/21	1/1/20 – 12/31/21
17. Christina Kuehster, MS, RN	Member	CO	1/1/20 – 12/31/21	1/1/20 – 12/31/21
18. Thelma Kuska, BSN, RN, CEN, FAEN	Member	IL	1/1/20 – 12/31/21	1/1/20 – 12/31/21
19. Patricia Nierstedt, MS, RN, CEN, TCRN	Member	NJ	1/1/20 – 12/31/21	1/1/20 – 12/31/21
20. Hannah Thadeo, RN, CEN, CPEN, TCRN	Member	CA	1/1/20 – 12/31/21	1/1/20 – 12/31/21

Board Liaison: Michele Forness

Staff Liaison: Lise Jinno

2020 Charges:

1. Review and score applications for ENA designated scholarships for its membership.
2. Provide guidance and strategic outlook for future scholarships as it relates to Foundation direction
3. Champion ENA academic scholarship activity in your community and state

2020 Specific Criteria:

- Participate in conference calls for training and review of academic scholarships
- Maintain communication with the ENA Foundation Board of Trustees regarding the scholarship review process
- Contact scholarship recipients
- Network within the state and with other similar organizations on the promotion of academic scholarships and development initiatives in venues such as, ENA National and local conferences, meetings, coalitions, and task forces
- Participate in ENA Foundation fundraising events at ENA conferences, if attending
- Ability to serve a two-year term