I. POLICY PURPOSE:
To establish a uniform procedure for: the creation of a new Chapter within the state of California; the re-creation of a previously existing Chapter; the probation of a Chapter; and the suspension of charter and dissolution of a Chapter.

II. POLICY BACKGROUND:
An active Chapter is one that meets criteria set forth in national Emergency Nurses Association (ENA) Procedures. Upon formation, each Chapter is issued a formal charter by the National Association. This charter is maintained by the yearly submission of an annual report to both the California State Council and the National Association, by following all of the applicable National and State Council Bylaws and Procedures, and by proper financial reporting to the California State Council.

III. PROTOCOL:
1. Creation:
   a. Requests for activation or reactivation of a Chapter shall be made in writing to the President of the State Council Board of Directors.

   b. A minimum of ten (10) active ENA members is required to form the proposed chapter.


   d. Upon State Council approval of the activation/reactivation request:
      i. A liaison will be assigned from the State Council Board of Directors to the Chapter;

      ii. The organizing Chapter will be granted “local committee” status and they will elect a committee Chairperson and Chair-elect to serve in the place of Chapter officers;

      iii. The organizing Committee will complete documentation as required by national ENA and submit the documentation to the State Council for final Chapter verification.

      iv. The Committee will actively participate in the Cal ENA state council meetings and fulfill the Chapter requirements for the first
year. If the Local Committee is able to meet all the Chapter requirements after one year of formation then the Cal ENA State Council Board of Directors will grant chapter status.

v. The State Council Board of Directors will work with its National Board of Directors Liaison to facilitate this process.

2. Probation:
   a. Concerns may be raised regarding Chapter activity at the local, state or national level. The Board liaison will notify the Chapter Officers in writing of the issues to be addressed according to ARTICLE V of the State Council Bylaws. The Board liaison will work with the Chapter to create a plan for improvement.
   b. If these concerns are not addressed in a timely manner, the Cal ENA Board of Directors may place the Chapter on probation and membership assessments will be withheld until concerns are addressed to the satisfaction of the Cal ENA Board of Directors.

3. Dissolution
   a. In the event that a Chapter on probation does not make satisfactory progress on the plan for improvement, the Cal ENA BOD will make written notice to the Chapter and its charter will be suspended according to National Association Procedures.
   b. In the event of insufficient or inactive membership, the Chapter officers may elect to dissolve the chapter if the Chapter membership is unable to recruit sufficient Board members or increased membership.
      i. Assistance by the State Council will be offered in order to maintain the Chapter as active.
      ii. In the event that a Chapter is unable or unwilling to elect officers, the Chapter will be considered nonfunctioning and the State Council will dissolve the chapter.
   c. Dissolution proceedings will include the Board-determined distribution of:
      i. Chapter membership to the nearest active Chapter(s); and
      ii. Chapter funds to Chapter(s) receiving membership, the State Council or a combination of both.

4. The Board shall be responsible for reporting Chapter creation, probation and/or dissolution to the National Association.
Appendix A

GUIDELINES FOR CHAPTER FORMATION:

1. A minimum of five (5) active ENA members is required to form the Chapter.

2. A meeting must be scheduled providing advanced notice to allow membership participation. Provide meeting notification to emergency department nurse managers within the region. Provide bulletin board announcements for staff notification.

3. Notify the State Council President of the meeting date.

4. A hosting hospital may consider organizing a ED/hospital tour within their facility.

5. Consider the following agenda:
   a. Call to order
   b. Introductions
   c. Description of the plan for “Local Committee” and then Chapter formation.
   d. Select a “Local Committee” name that will become the Chapter name upon activation of the Chapter.
   e. Elect, or ask for volunteers to be Committee Chair & Chair Elect and plan for the election of Chapter officers upon Chapter activation. A President, President-Elect and Secretary/Treasurer (this position may be combined initially) if needed.
   f. Plan for next meeting and develop goals.
   g. Provide information on ENA membership benefits. The State Recruitment / Retention or Membership Chair may supply materials or may get them directly from the National Office.
   h. Consider a clinical or educational presentation.
   i. Provide networking time.
   j. Adjournment

6. Utilize a sign-in sheet with the name, address, telephone number, e-mail address, membership status (member / nonmember) and ENA ID# of each person present. Provide ENA membership brochure to all non-members.

7. One year after formation of a “Local Committee” the Committee can submit the completed Chapter Petition (see Appendix B) to the State Council President for review and signature. Once approved, the form to the National Office for final approval.
APPENDIX B: Petition for Formation of a Local Committee

Petition for formation of a Local Committee from the Emergency Nurses Association for a local chapter to be known as the __________________________ committee, headquartered in the State of California.

WHEREAS, we whose signatures appear, representing the above-named proposed Committee, wish to advance the objectives of the Emergency Nurses Association through a concerted effort at the local level; and

WHEREAS, we are current active members in good standing with the Emergency Nurses Association; and

WHEREAS, we represent a geographic and institutional cross section of emergency nurses; and

WHEREAS, we pledge to abide by the Philosophy, Bylaws and Standard Procedures of the Emergency Nurses Association; and

WHEREAS, we agree to participate in the activities of the chartered State Council; now therefore,

BE IT RESOLVED, that we formally petition the Board of Directors of the Emergency Nurses Association to grant a charter with all appropriate privileges to __________________________ Local Committee. Within one year will be eligible to Petition for Chapter formation.

Respectfully submitted,

Name: __________________________ (print) Committee Chairperson

ENA Membership ID# __________________ Address: ________________________________

Telephone: Home: __________________ Work ________________________________

Date submitted: ______________________

A minimum of five (5) active members of ENA, including the submitting member above must sign this petition. Membership can be verified by reviewing ENA membership cards and checking the expiration date.
Petition for Formation of a Local Committee (page 2)

The name and ENA ID# of each member must be provided along with a signature. Additional signatures may be added on an attached sheet.

Print Name (Chair Elect)__________________________ Print Name (Member)__________________________

Signature______________________________ Signature______________________________

ENA ID#______________________________ ENA ID#______________________________

Print Name (Member)__________________________ Print Name (Member)__________________________

Signature______________________________ Signature______________________________

ENA ID#______________________________ ENA ID#______________________________

This portion to be filled out by the State Council President

Petition reviewed and approved by the California State Council

Signed__________________________________________________

California State Council President

Date:______________________________
APPENDIX C: Petition for Charter

Petition for Charter from the Emergency Nurses Association for a local chapter to be known as the ___________________________Chapter, headquartered in the State of California.

WHEREAS, we whose signatures appear, representing the above-named proposed Committee, wish to advance the objectives of the Emergency Nurses Association through a concerted effort at the local level; and

WHEREAS, we have maintained an active Local Committee for one year attending the annual ENA Business Meeting and two other Cal ENA State Council meetings, distributed a newsletter and conducted two local meeting; and

WHEREAS, we are current active members in good standing with the Emergency Nurses Association; and

WHEREAS, we represent a geographic and institutional cross section of emergency nurses; and

WHEREAS, we pledge to abide by the Philosophy, Bylaws and Standard Procedures of the Emergency Nurses Association; and

WHEREAS, we agree to participate in the activities of the chartered State Council; now therefore,

BE IT RESOLVED, that we formally petition the Board of Directors of the Emergency Nurses Association to grant a charter with all appropriate privileges to ___________________________ Chapter.

Respectfully submitted,

Name: __________________________ (print) Chapter President

ENA Membership ID#____________ Address:______________________________

Telephone: Home:________________________ Work________________________

Date submitted: ___________________
Petition for Charter (page 2)

A minimum of five (5) active members of ENA, including the submitting member above must sign this petition. Membership can be verified by reviewing ENA membership cards and checking the expiration date.

The name and ENA ID# of each member must be provided along with a signature. Additional signatures may be added on an attached sheet.

Print Name (Treasurer)_________________________ Print Name (Secretary)_________________________
Signature_________________________ Signature_________________________
ENA ID#_________________________ ENA ID#_________________________

Print Name (President Elect)_________________________ Print Name ___________________________
Signature_________________________ Signature_________________________
ENA ID#_________________________ ENA ID#_________________________

This portion to be filled out by the State Council President

Petition reviewed and approved by the California State Council

Signed ________________________________
California State Council President

Date:________________________________