



EMERGENCY NURSES ASSOCIATION
Annual Report



2015 / 2016

the year of
COLLABORATION

“
*Alone we can do so little;
together we can do so much.*
— *Helen Keller*
”

COLLABORATION originates from the Latin word *collaborare*, “to labor together.” In short, collaboration finds a common goal and vision, and works tirelessly in tandem to see it achieved. ENA members embody collaboration.

Everyday emergency nurses work alongside physicians, technicians, paramedics, and others with the common goal of providing safe practice and care.

When not saving and repairing lives, ENA members support each other’s educational efforts, because we know the increased knowledge of one increases the knowledge and effectiveness of all.

ENA members are known in the state houses and the U.S. Capitol, where they collaborate with legislators to advocate for their patients, fellow nurses, and their profession.

Collaboration made us more than 42,000 strong. Together, we do so much.

We thank you.



Cover photo: Emergency Nursing 2016 cadaver lab.



2016 ENA President
Kathleen E. Carlson, MSN, RN, CEN, FAEN

about. If there are any other opportunities to participate at a higher level, I would be honored to do so."

That's the power of collaboration. It forces us to achieve more than we would on our own.

efforts on one of the key goals of my presidency, emergency nurse retention. We are closer to understanding the issues affecting retention and how to counteract them.

For example, ENA's Institute for Emergency Nursing Research Advisory Council completed a number of research studies that focused on the effect of fatigue on nurse and patient outcomes, and on safe staffing considerations.

The Emergency Nursing 2016 conference education heavily focused on emergency

I witnessed that power over and over again this year. That power led to ENA growing its membership to record numbers in 2016, and creating new educational offerings and legislation designed to help members provide safe practice, safe care. I am most humbled, however, by the collaborative

THE DAY AFTER OUR 2016 DAY ON THE HILL EVENT IN OUR NATION'S CAPITAL, fellow ENA member Christian E. Lawson, RN from UNC at Chapel Hill emailed me, saying: **"I have never been more energized to participate at a higher level. I am very interested in participating in the pediatric trauma work we heard**

“

That's the power of collaboration. It forces us to achieve more than we would on our own.

— Kathleen E. Carlson
MSN, RN, CEN, FAEN

”



nurse retention, thanks to the efforts of our Emergency Nursing Conference Education Planning Committee. In addition to selecting the best clinical education sessions, the committee specifically chose leadership sessions on management skills, orientation and retention, competency, promoting healthy workplaces, and developing critical thinking,

intuition, and resilience in emergency department nurses.

There are many, many more examples of ENA members who work together to retain a healthy and experienced workforce. There is much more to be done, but the wheels are in motion and together we are dedicated to keeping nurses engaged in the profession.

Thank you for your teamwork, and for your dedication to our profession, our patients, and our fellow nurses. ●

Kathleen E. Carlson



2015 ENA President/2015–2016 Interim Executive Director
Matthew F. Powers, MS, BSN, RN, MICP, CEN

Serving in dual roles allowed me to oversee governance and fiduciary responsibilities which complemented the operational oversight of staff and products delivered to ENA and its members.

I can tell you unequivocally how ENA staff and volunteer leaders serve with pride and commitment to our mission and vision. This collaboration between staff and volunteers is what makes ENA strong.

This has been a year of healing and collaboration. We worked hard to build connections

internally and externally. It wasn't just connecting — it was creating an environment where we could engage our members and focus on growing our organization.

This year we achieved record membership, launched the Naloxone Education Toolkit, and three new products — CEN Online Review, TNCC™ 1-Day Renewal, and Instructor Path for TNCC and ENPC. We received a Power of A Silver Award from the American Society of Association Executives for our MCI drill in Orlando, and launched two new platforms —

ENA CONNECT, our online community, and ENA LEARN, our online education platform.

Our own member, Penny Blake, RN, CCRN, CEN, testified before the U.S. Senate Committee on Health, Education, Labor and Pensions about why mental health care reform is needed, and more than 120 members advocated during this year's Day on the Hill. Comprehensive mental healthcare reform was included in the 21st Century Cures Act which President Obama signed in December. Its purpose is to

improve the treatment of those suffering from serious mental illnesses including the elimination of the prohibition on same-day billing for mental health and primary care services, additional resources for suicide prevention, and expanded crisis intervention training for first responders.

In August we welcomed our new Executive Director Nancy MacRae, MS. She shares the vision of President Kathleen E. Carlson, MSN, RN, CEN, FAEN, and the Board of Directors, and has a strong affinity for the mission of ENA.

I have been proud to serve as your leader, both in the national office and on the Board of Directors. I urge you to treasure the opportunities to serve, from the stretcherside to state and chapter leadership roles, to the ENA boardroom.

I thank you for the wonderful opportunity to serve as your leader, and I thank the current and future leaders who make ENA the premier and distinguished association for emergency nursing! ●



I have been proud to serve as your leader, both in the national office and on the Board of Directors.
— Matthew F. Powers
MS, BSN, RN, MICP, CEN



ENA Executive Director
Nancy MacRae, MS

Prior to that she spent 20 years in different leadership positions at the American Medical Association.

MacRae has been hard at work providing strategic leadership to ENA, its staff, and the ENA Foundation through a collaborative partnership with the Board of Directors to ensure the organization achieves its mission, vision, and objectives.

We spoke with MacRae about her plans to advance ENA's mission and what she hopes to accomplish.

Q: You've spent your entire career working for healthcare associations. What about ENA appealed to you?

A: *What struck me when I was looking into the organization is it's a strong association with a clear mission and a very rich history of advancing its mission. Then, when I met the people here, what really impressed me and appealed to me was the leadership, the members, and the staff — just an incredibly engaged and passionate group.*

IN AUGUST, ENA WELCOMED NANCY MACRAE, MS, as the association's new Executive Director. She brings 30 years of healthcare association management experience most recently serving as Senior Vice President, Governance and Operations at the American College of Chest Physicians.



“
I see nothing but unlimited opportunities for us to further expand our reach and our impact.
— Nancy MacRae, MS
”



Q: Part of your job is to partner with ENA's Board of Directors. What does that mean to you?

A: *It really means to me that together we are stronger. What I am really excited about is to serve as that partner, and that bridge, between our Board, who have incredible expertise and passion for the mission of the organization, and our staff, who*

have incredible passion and skills to help advance the mission of the organization.

Q: What are some of the biggest opportunities you see for ENA?

A: *I see nothing but unlimited opportunities for us to strategically expand our reach and impact, and stay relevant in these changing times.*

Q: What was something that surprised you about ENA or emergency nursing?

A: *What surprised me about ENA was the amount and quality of work, and the expertise the organization has, with great teams, both Board and staff teams. What surprised me about emergency nurses is just how fun they are—a really fun group.*



“

Their initiative exemplifies how associations are a positive force in our everyday lives — not just to the profession or industry they represent, but to society at large.

*— Sharon J. Swan, FASAE, CAE
Chair of the Power of A Awards Judging Committee*

”



community college in Roseburg, Oregon, where 10 people died and seven were wounded. Eight months later, the worst mass shooting in American history unfolded 10 miles away from the drill site. The shooter in that incident killed 49 people and wounded 53.

The ENA drill was executed in front of more than 2,500 conference attendees and immersed 60 emergency nurse volunteers in a realistic mass casualty incident, forcing them to think on their feet during a mock active shooter situation. During the drill, the volunteers tended to the “victims” — 90 local volunteer actors, including EMT students and veteran amputees, who displayed life-like wounds and acted out injuries. Attendee response to the drill was overwhelmingly positive and has since been made available to the public on ENA’s YouTube channel (<http://bit.ly/2gicYG8>).

“Their initiative exemplifies how associations are a positive force in our everyday lives — not just to the profession or industry they represent, but to society at large,” said Sharon J. Swan, FASAE, CAE, Chair of the Power of A Awards Judging Committee.

ENA member Daniel Nadworny, MSN, RN, who directed the Boston Bombing response at Beth Israel Deaconess Medical Center, discussed lessons learned during a keynote address and moderated the drill. Attendees also learned about critical incident stress management following the drill — an often overlooked concept that aims to help healthcare providers cope with traumatic events. ●

ENA EARNED A 2016 ASAE POWER OF A SILVER AWARD from the American Society of Association Executives for the 2015 Surprise Mass Casualty Incident Trainig Drill that took place at the Emergency Nursing 2015 Conference. This is the second consecutive Power of A recognition for ENA.

It was a timely exercise. The mock drill — executed in Orlando, Florida — occurred a day after the shooting at a



- APRIL 28-29 2015 ENA advocates for Comprehensive Mental Health Reform Legislation at Day on the Hill
- JUNE 4 2015 The Helping Families in Mental Health Crisis Act introduced in House of Representatives
- JAN 20 2016 Penny Blake testifies in front of the U.S. Senate Committee on Health, Education, Labor and Pensions
- MAR 15 2016 The Mental Health Reform Act of 2016 introduced in Senate
- MAY 10-11 2016 ENA advocates for Comprehensive Mental Health Reform Legislation at Day on the Hill
- JULY 6 2016 The Helping Families in Mental Health Crisis Act passes in House of Representatives
- NOV 29 2016 ENA joins Coalition Letter to House and Senate Leadership in support of Comprehensive Mental Health Legislation
- NOV 30 2016 House of Representatives passes Comprehensive Mental Health Reform Legislation as part of the 21st Century Cures Act
- DEC 7 2016 Senate passes Comprehensive Mental Health Reform Legislation as part of the 21st Century Cures Act
- DEC 13 2016 President Obama signs into law the 21st Century Cures Act. Bill includes Comprehensive Mental Health Reform and Opioid Treatment Funding



“...on a typical shift, at least 10% of our cases involve psychiatric patients.”
 — Penny Blake
 RN, CCRN, CEN

“SINCE FEDERAL LAW PROHIBITS HOSPITALS FROM TURNING AWAY ANYONE

seeking emergency care, I see practically every kind of urgent medical condition imaginable,” Penny Blake, RN, CCRN, CEN, told the U.S. Senate Committee on Health, Education, Labor and Pensions on January 20, 2016. “However, on a typical shift, at least 10% of our cases involve psychiatric patients. This percentage has grown tremendously in the past several decades.”

As a result, “mental health is the top issue in emergency departments right now,” she said. Blake is Chair of ENA’s Advocacy Advisory Council and has been a nurse for nearly 40 years. She testified on behalf of ENA during the hearing, titled, “Federal Response to Challenges in Mental Health Care in America.” (Video at 1.usa.gov/1KLCVfh)

Blake’s testimony was one of several steps ENA took to promote mental health

legislation. Mental health reform also took top billing in ENA’s Day on the Hill advocacy efforts the past two years. This year, less than two months after more than 120 ENA members met with representatives, senators, and their staff to promote passage of H.R. 2646, the Helping Families in Mental Health Crisis Act, it passed the House on a 422-2 vote.

H.R. 2646 was later rolled into the 21st Century Cures Act which President Obama signed into law in December. Key elements that will improve the treatment of those suffering from serious mental illnesses include the elimination of the prohibition on same-day billing for mental health and primary care services, additional resources for suicide prevention and expanded crisis intervention training for first responders.

An estimated 26.2 percent of Americans 18 and older suffer from a diagnosable mental disorder — that’s more than 1 in 4 American adults. It affects virtually every American family.

Yet, access to mental health care treatment is severely lacking. As a result, mental health patients often turn to emergency departments for care, putting added strain on emergency services. For that reason, caring for the mentally ill is, and will continue to be, a top ENA legislative priority. ●





Stop an Overdose SAVE A LIFE

If you or someone you know uses opioids (such as heroin or prescription pain medications), please ask our emergency department staff for information on how to get a lifesaving naloxone kit. When a person overdoses on opioids, they stop breathing. Naloxone reverses the overdose, allowing the victim to breathe again. It is a safe antidote for opioid overdose, and does not harm the person if they have not taken opioids.

A person may be having an opioid overdose if they:

- Are known to use opioids
- Will not wake up, even when you shake them
- Are breathing slowly or not at all
- Have lips or fingernails that are blue or gray-colored
- Have clammy or pale skin

IF YOU SEE THESE SIGNS, IT MAY BE AN OPIOID OVERDOSE!

Opioids include:	
GENERIC	BRAND NAME
Buprenorphine	Suboxone, Subutex, Zubsolv, Butrans, Butrans
Codeine	Tylenol with codeine, Tylenol #3
Fentanyl	Duragesic
Hydrocodone	Vicodin, Norco, Lorcet, Lortab, Zohydro
	Hydromorphone Dilaudid
	Methadone Methadone
	Morphine Dolophine, Methadose, Avinza
	Oxycodone Percocet, OxyContin, Percodan, Roxicodone
	Oxycodone Opana

NALOXONE KITS AVAILABLE HERE.
Enter your State's Good Samaritan Laws here.



Lend a helping HAND

Signs of an Opioid Overdose

A person might be having an opioid overdose if they:

- Are known to use opioids
- Will not wake up, even when you shake them
- Are breathing slowly or not at all
- Have lips or fingernails that are blue or gray-colored
- Have clammy or pale skin

IF YOU SEE THESE SIGNS, IT MAY BE AN OPIOID OVERDOSE!

You can save a life by lending a HAND:

- H**ELP: Call 911
- A**IRWAY: Give rescue breaths
- N**ALOXONE: Give naloxone. Repeat dose in 2-3 minutes if the person does not wake up.
- D**ON'T LEAVE! Wait until 911 help arrives. Do place the person on their side, in case they vomit.

These actions will NOT stop the overdose:

- DO NOT slap, pinch, burn, or hurt the person
- DO NOT place the individual in a tub with cold water
- DO NOT inject the person with bleach or any other substance other than naloxone
- DO NOT let the individual sleep it off
- DO NOT leave the person



Opioid Safety

How to recognize and manage an opioid overdose



DEATHS CAUSED BY OPIOID OVERDOSES HAVE SKYROCKETED in the United States. According to the Centers for Disease Control and Prevention (CDC), more than 29,000 people died in 2014 from heroin and prescription opioid painkillers.

ENA proactively responded to the crisis by advocating for legislation that includes funding to attack the epidemic, and releasing its **Naloxone Education Toolkit (NET)**.

Naloxone is a safe and effective antidote to opioid overdoses, and works by blocking the effect of certain painkillers and heroin, reversing the slowed breathing and unconsciousness that come with an overdose.

NET delivers clear steps for what nurses can do to help, along with the context to understand the crisis in-depth. The resource is free to ENA members, and was developed by the ENA Institute for Quality, Safety and Injury Prevention (IQSIP) and released in August.

The toolkit presents evidence-based, collaborative approaches for educating patients and family members about opioid overdose, advises on the distribution and proper use of naloxone kits, and provides step-by-step instructions to implement custom opioid overdose prevention programs in an emergency department.

Several components of the toolkit are also available to the public, including a pamphlet on how to spot an overdose and administer naloxone, a template flyer advertising the availability of naloxone kits, and a poster on how the public can assist if they witness an overdose.

On the federal government front, ENA advocated for the Comprehensive Addiction and Recovery Act of 2016 (CARA) and the shift it represents in patient care.

Instead of relying primarily on punishment to deter opioid abuse, CARA provides additional tools to treat patients struggling with addiction and changes

prescribing practices to prevent addiction from ever taking hold.

CARA addresses perhaps one of the largest factors driving the overdose epidemic: overprescription of opioids, and provides greater public access to the opioid antidote naloxone.

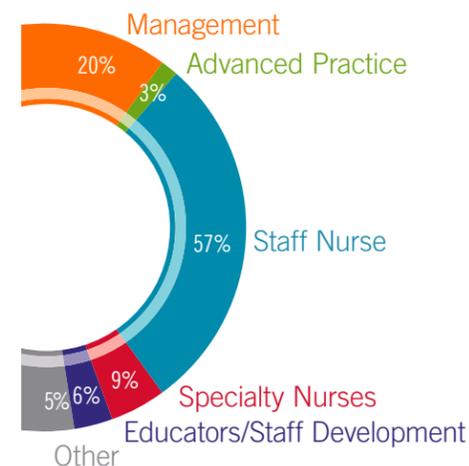
ENA also supported the 21st Century Cures act signed by President Obama in December. It contains \$1 billion in grants to states to expand their prescription opioid and heroin abuse prevention and treatment initiatives, such as the training of healthcare providers, improving prescription drug monitoring programs, implementing prevention activities and expanding access to opioid treatment programs.

CARA and the 21st Century Cures Act were major steps in the right direction for battling the opioid epidemic and heroin crisis plaguing emergency departments, and ENA remains committed to helping nurses fight the epidemic. ●

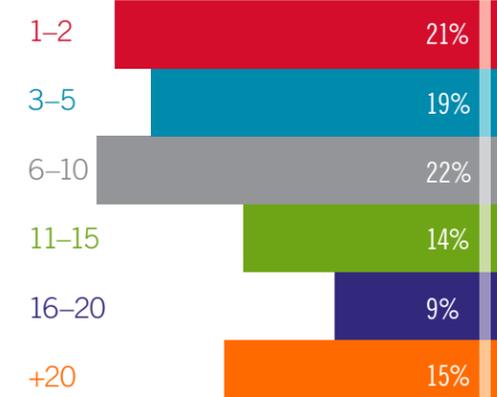


MEMBERSHIP

Areas of Practice

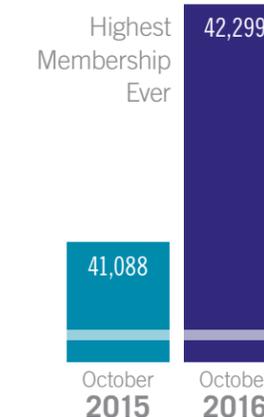


Years of Experience



ENA member-reported data.

Membership Comparison



ENA LEARN
ONLINE NURSING EDUCATION

ENA CONNECT

MORE EMERGENCY NURSES HAVE FOUND VALUE IN ENA

than ever before. ENA membership has grown over the past two years to a record high of 42,299 members as of October 2016.

A snapshot of ENA membership shows wide diversity. One-fifth of ENA members have been part of the association for two or fewer years, and nearly a quarter have been members for 16 or more years. Nearly six in 10 members are staff nurses, but 20% are in management and 6% are educators or in staff development.

Membership surveys tell us the number one reason emergency nurses join ENA is to further their emergency nursing knowledge. **"ENA provides a strong foundation and an impeccable resource for best practice,"** says ENA member Mark Mayes, MHA, BSN, RN, CEN. And to that end, ENA offers an array of educational offerings such as the new CEN Online Review, TNCC™ 1-Day Renewal, and Instructor Path for TNCC and ENPC. A new online education platform, ENA LEARN, also launched to simplify online course selection. Networking

with other ENA members is also a significant membership benefit. In 2016, ENA launched a new online community for members called ENA CONNECT. Engagement on the new platform is greater than anticipated, and is enhancing global connectivity among members.

A growing membership means more opportunity to connect and collaborate. Together we are stronger than ever before, and look forward to continued growth. ●

“

“ENA has always fostered a sense of belonging and community... ENA has connected me with people who are energetic, empowering, and encouraging.”

— longtime ENA member Kathleen Richardson, DNP, MSN, BSN, RN, FNP, CNS, CEN, ENP-BC, FNP-C, NP-C, FAEN

”



pictured left to right

DIRECTOR
Maureen Curtis Cooper, BSN, RN, CEN, CPEN, FAEN

DIRECTOR
Jean A. Proehl, MN, RN, CEN, CPEN, TCRN, FAEN, FAAN

DIRECTOR
Tiffany Strever, BSN, RN, CEN, FAEN

DIRECTOR
Patricia Kunz Howard, PhD, RN, CEN, CPEN, NE-BC, TCRN, FAEN, FAAN

PRESIDENT-ELECT
Karen K. Wiley, MSN, RN, CEN

DIRECTOR
Jeff Solheim, MSN, RN, CEN, TCRN, CFRN, FAEN

PRESIDENT
Kathleen E. Carlson, MSN, RN, CEN, FAEN

DIRECTOR
Mike Hastings, MSN, RN, CEN

DIRECTOR
Sally K. Snow, BSN, RN, CPEN, FAEN

IMMEDIATE PAST PRESIDENT
Matthew F. Powers, MS, BSN, RN, MICP, CEN

SECRETARY/TREASURER
Joan Somes, PhD, RN-BC, CEN, CPEN, NREMT-P, FAEN

ENA EXECUTIVE DIRECTOR
Nancy MacRae, MS

THE 2015 FINANCIAL RESULTS SHOW THE CONTINUED GROWTH OF ENA.

\$19.5 million in total revenue was generated in 2015, a growth of approximately 2.5%. ENA continues to revise and develop educational programs, invest in advocacy initiatives, and increase member value. ENA's diverse revenue base — primarily membership, educational programs, and conferences help keep ENA's financial status strong.

ENA's educational programs are the primary revenue source. These programs include Trauma Nursing Core Course™ (TNCC), Emergency Nursing Pediatric Course™ (ENPC), as well as diverse online course offerings delivered directly by ENA or by Elsevier, an ENA partner.

Membership, with almost 41,000 members at year's end, remained stable, generating close to \$3.7 million in dues. Overall course

revenue exceeded \$10.7 million, an increase of 2% from the previous year. The revenues generated from ENPC & TNCC allowed for profit sharing of over \$1.3 million to ENA state councils. Almost 53,000 nurses attended the TNCC™ provider course, and over 15,000 participated in the ENPC provider course. In 2015, ENA held the Emergency Nursing Conference in Orlando, which was a financial success.

Operating expenses totaled \$19.5 million for the year, approximately the same as the operating revenue. These operating expenses supported the core activities of membership, courses, and conferences, as well as the variety of other activities provided by ENA. ENA also supported the ENA Foundation with a gift of \$25,000 to create the Anita Dorr Memorial Endowment Fund.

ENA's investment portfolios ended the year with a balance of \$16.4 million. This is broken out into a long-term reserves portfolio in the amount of \$11.1 million and an operating reserves portfolio of \$5.3 million. The combined portfolios are 88% of operating expenses, well in excess of the minimum total requirement of 75%. ENA has an investment spending policy which provides monies to fund ENA initiatives from long-term investment proceeds. The use of these funds helps support initiatives to support the mission of ENA.

ENA's audited financial statements are posted in the ENA Members Only section of the ENA website: ena.org ●

Emergency Nurses Association

Statements of Financial Position as of December 31, 2015 and 2014

	2015	2014
Assets		
Current Assets:		
Cash and cash equivalents	\$ 586,969	\$ 5,501,948
Receivables less allowance for doubtful accounts	1,540,317	1,082,433
Due from affiliate — ENA Foundation	2,723	-
Inventory	128,662	202,949
Prepaid expenses and other current assets	153,338	226,606
Total current assets	2,412,009	7,013,936
Property and equipment, net	3,685,761	4,215,650
Investments	16,405,634	10,764,818
Total assets	\$ 22,503,404	\$ 21,994,404
Liabilities and Net Assets		
Current liabilities:		
Accounts payable and accrued expenses	\$ 1,003,886	\$ 937,483
Wages and benefits payable	661,732	665,073
Due to affiliate — ENA Foundation	-	6,584
Deferred revenue	3,047,289	2,614,348
Credits on customer accounts	706,156	611,202
Assessments payable	1,310,630	1,034,836
Total current liabilities	6,729,693	5,869,526
Long-term liabilities — deferred revenue	1,004,871	1,040,071
Total liabilities	7,734,564	6,909,597
Net assets — unrestricted	14,768,840	15,084,807
Total liabilities and net assets	\$ 22,503,404	\$ 21,994,404

A complete copy of the audited financial statements is posted on the ENA website: ena.org

Emergency Nurses Association

Statement of Activities and Changes in Net Assets for the Years Ended December 31, 2015 and 2014

	2015	2014
Revenue:		
Courses	\$ 10,735,438	\$ 10,506,000
Membership dues	3,677,681	3,589,443
Conferences	2,787,895	2,435,331
Publications	744,770	820,094
Marketplace	410,664	410,592
Sponsorships	472,834	518,300
Royalties	355,431	295,533
Other	150,057	298,110
Grants	65,562	85,951
Mailing lists	23,210	55,037
Donated services	116,000	50,000
Total revenue	19,539,542	19,064,391
Functional expenses:		
Program services	13,192,705	12,832,791
Support services, management, and general	5,398,111	5,205,045
Fundraising and development	980,678	660,058
Total expenses	19,571,494	18,697,894
Increase/(decrease) in net assets — before investment income	(31,952)	366,497
Investment income	(284,015)	487,010
Increase in net assets	(315,967)	853,507
Net assets, beginning of year	15,084,807	14,231,300
Net assets, end of year	\$ 14,768,840	\$ 15,084,807

A complete copy of the audited financial statements is posted on the ENA website: ena.org

ENA LAUNCHED SEVERAL NEW COURSES AND TWO NEW ONLINE PLATFORMS TO ENHANCE EDUCATIONAL OPPORTUNITIES FOR EMERGENCY NURSES. THE NEW COURSES INCLUDE ENA'S CEN ONLINE REVIEW, TNCC™ 1-DAY RENEWAL AND THE INSTRUCTOR PATH FOR TNCC AND ENPC.



ENA'S CEN ONLINE REVIEW helps registered nurses prepare for the Certified Emergency Nursing (CEN®) exam. It allows emergency nurses to set their own pace and learn where and when they want.

Whether renewing credentials, or testing for the first time, ENA's CEN Online Review provides everything necessary to get ready.



TNCC™ 1-DAY RENEWAL allows current TNCC verification card holders to spend more self-directed study time and less time in the classroom. Emergency nurses can prepare on their own time, review, and test in class.



INSTRUCTOR PATH FOR TNCC AND ENPC is a new course instructor training program that includes online adult learning and instruction, live practice, mentorship, and monitored instruction.



The Emergency Nurses Association is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

The Emergency Nurses Association is approved by the California Board of Registered Nursing, Provider #2322.



I am excited to see where this leads. Already I can attest to the fact that I have become a stronger and more confident bedside nurse as well as informal leader. As a fellow donor, please know that your donations make a huge difference.

— Karla Nygren, BSN, RN, CEN, CFRN, CPEN, TCRN, CCRN, CPN
Judith C. Kelleher Memorial Scholarship recipient

This scholarship funds the study of a lifelong learner committed to community service, mentoring, patient and family advocacy, quality builder, innovator, and change agent. Through education I continue to build my skill sets, and leadership abilities to work within healthcare and the world to solve the most complex health issues on the local, national, and international level.

— Germaine Nelson, MSN, MBA, RN, CEN
BCEN Doctoral Scholarship recipient

The quality of care provided to my patients will improve due to becoming more familiar with evidence-based care that has shown to improve outcomes through nursing research. Thank you for believing in me and supporting my education. It's amazing what giving to others can do.

— Karen Drum, BSN, RN, CEN
Georgia ENA State Council
Georgia State Council Scholarship recipient



CONGRATULATIONS TO THE ENA FOUNDATION FOR CELEBRATING ITS 25TH ANNIVERSARY 1991-2016.

The mission of the ENA Foundation is to provide academic scholarships and research grants in the discipline of emergency nursing. These scholarships and grants provide the funding for emergency nurses to attend ENA's annual conference, pursue higher education, and explore new nursing research projects each year.

In 2016, the ENA Foundation Management Board, led by chairperson, Christine M. Gisness, MSN, RN, APRN, FNP, CEN, FAEN, set a State Fundraising Challenge goal of \$125,000. Thanks to ENA members, ENA State Councils and Chapters, the Foundation raised more than \$129,000 to fund academic scholarships. The New Jersey State Council had the largest number of individual donations



I am forever thankful for the ENA Foundation and the opportunity it has given me in my journey as an emergency nurse.

*— Peter D. Dagher, BSN, RN, CEN
Emergency Nursing
Conference Scholarship recipient*



per state and the South Dakota State Council had the largest percentage increase in donations per capita.

The success of the State Fundraising Challenge and other fundraising efforts allowed the Foundation to award 60 academic scholarships or research grants totaling more than \$260,000 in 2016.

Of the 43 scholarships awarded to ENA members attending Emergency Nursing 2016, seven were funded by ENA staff.

Gifts given to the ENA Foundation are making a real difference for emergency nurses at every career level. 2016 has been a record year for membership giving to the ENA Foundation with over 15% of ENA members giving a gift to the Foundation.

On behalf of all of the emergency nurses that received scholarships and grants in 2016, as well as the patients they serve, the ENA Foundation is grateful for all benefactors for a year full of collaboration and accomplishment. ●





Christine M. Gisness, MSN,
RN, APRN, FNP, CEN, FAEN
ENA FOUNDATION
CHAIRPERSON



Michele (Mickey) Forness,
BSN, RN, CEN
MEMBER-AT-LARGE



Thelma Kuska,
BSN, RN, CEN, FAEN
ENA FOUNDATION
IMMEDIATE PAST
CHAIRPERSON



Carla Duryee
Duryee Consulting, LLC
CORPORATE
MEMBER-AT-LARGE



Anne May, BSN, RN
MEMBER-AT-LARGE



Michelle Fox, BSN, RN
Teleflex
CORPORATE
MEMBER-AT-LARGE



Steven J. Jewell, BSN,
RN, CEN, CPEN
MEMBER-AT-LARGE



Don Payerle
Stryker
CORPORATE
MEMBER-AT-LARGE



Howard William (Bill) Miller,
BSN, RN, PHRN, NREMT-P
MEMBER-AT-LARGE



Patricia Kunz Howard, PhD,
RN, CEN, CPEN, NE-BC,
TCRN, FAEN, FAAN
ENA FOUNDATION
BOARD LIAISON



I am honored to be the recipient of the Gisness Advanced Practice Scholarship. This scholarship opportunity renewed my passion and excitement for continuing my education and here I am back on my transformational journey. Nursing is at the forefront of healthcare change. With the rise of population health, value-based reimbursements, Obamacare, patient quality metrics, and the added challenges of caring for patients that are sicker than ever before, preparing our future nurses for this immense task is more important than ever before.

— Meri Trajkovski, BSN, RN, SANE
Gisness Advanced Practice Scholarship recipient



**THE 2015 ENA FOUNDATION
FINANCIAL RESULTS
CONTINUED TO SUPPORT**

ENA's values and its membership by providing continuing education opportunities through scholarships and research.

Total revenue was \$828,945 in 2015, an increase of 20% over what was achieved in 2014. This increase in overall giving led to awarding 43 scholarships,

five research grants as well as grants to ENA state councils. In total more than \$265,000 was awarded by the Foundation.

Academic scholarships were provided for doctoral candidates as well as advanced degrees, continuing the strong tradition of ENA to support the future of emergency nursing by providing for its membership through its many educational opportunities.

ENA Foundation continues to be well-positioned financially with endowment funds that have grown to a value of over \$1.85 million. The ongoing growth of these endowments, along with increases in unrestricted contributions, will allow the foundation to continue to have strong financial performance while providing ENA members with continuing education and research opportunities. ●

ENA Foundation

Statements of Financial Position as of December 31, 2015 and 2014



	2015	2014
Assets		
Current Assets:		
Cash and cash equivalents	\$ 276,692	\$ 358,586
Due from affiliate — ENA	-	6,584
Prepaid expenses and other current assets	3,300	-
Other	-	365
Total current assets	279,992	365,535
Property and equipment, net	3,367	10,100
Investments	2,330,151	2,067,932
Total assets	\$ 2,613,510	\$ 2,443,567
Liabilities and Net Assets		
Current liabilities:		
Accounts payable	\$ 9,192	\$ 6,868
Due to affiliate — ENA	2,723	-
Deferred revenue	-	2,350
Other	497	400
Total current liabilities	12,412	9,618
Net assets:		
Unrestricted:		
Undesignated	749,910	625,745
Board designated	1,069,217	1,172,185
Temporarily restricted	104,869	119,962
Permanently restricted	677,102	516,057
Total net assets	2,601,098	2,433,949
Total liabilities and net assets	\$ 2,613,510	\$ 2,443,567

A complete copy of the audited financial statements is posted on the ENA website: ena.org

ENA Foundation

Statement of Activities and Changes in Net Assets for the Years Ended December 31, 2015 and 2014



	2015	2014
Support, revenues and other additions:		
Support:		
Contributions	\$ 797,956	\$ 644,118
Special event revenue net of expenses	30,967	46,681
Other	22	329
Total revenue	828,945	691,128
Functional expenses:		
Programs, grants, and scholarships	265,846	275,859
General and administrative	215,355	202,794
Fundraising and development	115,665	93,270
Total expenses	596,866	571,923
Increase/(decrease) in net assets — before investment income	232,079	119,205
Investment income	(64,930)	74,751
Increase in net assets	167,149	193,956
Net assets, beginning of year	2,433,949	2,239,993
Net assets, end of year	\$ 2,601,098	\$ 2,433,949

A complete copy of the audited financial statements is posted on the ENA website: ena.org



“

Three and a half years ago I attended my first ENA conference in Ft. Lauderdale FL. It was after that trip that I was inspired and motivated to continue my education. I am honored today to have received the Texas State Council — Vicki Patrick Texas Legacy Scholarship. Thank you for believing in me. I now enter the next phase of my nursing career as an educator and am again inspired and empowered by everyone involved in the ENA.

*— Elizabeth Saska, BSN, RN, CEN
Texas State Council
Vicki Patrick Texas Legacy Scholarship recipient*

”

“

I started this journey with the goal of attaining a position as a nurse educator for the ED. With my master’s degree, many new doors will open to new and exciting opportunities in education. Receiving my master’s has better prepared me in my work environment with patients to view their healthcare from a more global perspective. I have grown to think about evidence-based practice and “big picture” in providing care for the ED patient.

*— Lynn Howard, BSN, RN, CEN
Anita Dorr Graduate Scholarship recipient*

”

EXECUTIVE OFFICE
execoffice@ena.org

MEMBER SERVICES
membership@ena.org

ENA FOUNDATION
ena.foundation@ena.org

Special thanks and photo credits go to the following individuals:

Richard Izui | Izui Photography, Incorporated
Brian McCarthy | Corporate Close Ups
Jules Clifford | Event Photography of North America Corporation

CEN/BCEN are registered trademarks of the Board of Certification for Emergency Nursing, and this trademark owner does not sponsor, endorse, or support the ENA in any manner.

ENA and logo, TNCC, and ENPC are trademarks of the Emergency Nurses Association.



EMERGENCY NURSES ASSOCIATION

915 Lee Street

Des Plaines, IL 60016-6569

800.900.9659

ena.org