

POLICY/PROCEDURE NUMBER:

D – 2.1

DATE: May 4, 1992	SUBJECT:
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1.0 Policy:

1.1 Applicants for membership in the Canadian Healthcare Engineering Society will be categorized according to their involvement in the delivery of healthcare engineering technology.

2.0 Procedure:

2.1 REGULAR MEMBERSHIP shall be open to any person who is active in the delivery of healthcare engineering technology in the areas of administration, planning, design, construction, operations, maintenance and other related disciplines. Regular Membership entitles the member to all basic privileges and responsibilities in the Society. Regular Members have voting privileges, and may hold office in the society. The majority of a regular member's day- to-day work is in a healthcare facility working for the facility or a third party.

This will include an individual who is employed:

- (1) by a hospital, nursing home, or long-term care facility in the application of engineering technology in the areas of administration, planning and design, construction, plant operations and maintenance, or other related discipline;
- (2) by a contract service provider working full-time in a hospital, nursing home, or long-term care facility in the application of engineering technology in the areas of administration, planning and design, construction, plant operations and maintenance, or other related discipline;
- (3) by a healthcare agency or other healthcare service provider actively in the business of the delivery of healthcare engineering technology in the areas of administration, planning and design, construction, plant operations and maintenance, or other related discipline;
- (4) by a federal or provincial healthcare ministry or agency in the application of engineering technology in the areas of administration, planning and design, construction, plant operations and maintenance, or other related discipline;

2.2 STUDENT MEMBERSHIP shall be open to any individual following a course of study or training in a field related to healthcare which, upon completion, make them eligible for regular membership. Student Members may not vote or hold office in the Society.

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Procedure (Continued):

2.3. ASSOCIATE MEMBERSHIP shall be open to any individual if they provide managerial support, consulting services, products, and other such services to those involved in day-to-day delivery of health facility services and interested in the objectives of the society. Associate Members have voting privileges and may hold a seat on the Board of Directors but may not hold Executive office in the Society.

This will include an individual who is employed:

- (1) as an architect, consulting engineer, healthcare planner, or other healthcare consultant in private practice whose assignments may, on occasion, include the application of engineering technology in the areas of administration, planning and design, construction, plant operations and maintenance, or other related discipline;
- (2) by a business or organization supplying engineering equipment, materials, and/or services to the healthcare industry or healthcare facilities;
- (3) by government or non-governmental agency which interacts on occasion with healthcare facilities and healthcare agencies regarding the application of engineering technology;
- (4) in the application of engineering technology in the areas of administration, planning and design, construction, plant operations and maintenance, or other related discipline, by a non-healthcare organization (eg, university, property management company) who shares common interests with CHES members and may wish to join the Society.

2.4. CORPORATE MEMBERSHIP shall be open to companies interested in the objectives pursued by the Society and peripherally involved in the delivery of healthcare services. The company shall assign one individual in their corporation as their designate. The assigned designate shall have voting privileges and may hold a seat on the Board of Directors but may not hold Executive office in the Society.

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Procedure (Continued):

These will include any companies who:

- (1) are architects, consulting engineers, healthcare planners, or other healthcare consultants in private practice whose assignments may, on occasion, include the application of engineering technology in the areas of administration, planning and design, construction, plant operations and maintenance, or other related discipline;
- (2) are a business or organization supplying engineering equipment, materials, and/or services to the healthcare industry or healthcare facilities;
- (3) by government or non-governmental agency which interacts on occasion with healthcare facilities and healthcare agencies regarding the application of engineering technology;
- (4) work in the application of engineering technology in the areas of administration, planning and design, construction, plant operations and maintenance, or other related discipline, by a non-healthcare organization (eg, university, property management company) who shares common interests with CHES members and may wish to join the Society.

Approved by: _____
President

Date: _____