AUA Staff Liaison: Jennifer Bertsch

Chair: Matthew Nielsen, MD

Terms of Office:
- Members: 3-year term, renewable once
- Chair: 3-year term (non-renewable)

Committee Makeup:
The QIPS Committee consists of the Chair and approximately 12 additional members appointed based upon knowledge and expertise in the subject matter. The Chair recommends committee members. The staff liaison and Chair work to assure appropriate geographic and practice diversity. The Chair is appointed by the AUA President based on a recommendation from the Science & Quality Council Chair and approval from the AUA Compensation Committee.

Mission & Vision Statements:
**Mission:** To foster quality urologic care through the development of quality improvement initiatives such as developing and testing physician performance measures, implementing initiatives on patient safety and other important and timely issues of concern to urology (including white papers) and monitoring federal quality programs and alerting AUA members of these initiatives.

**Vision:** AUA, as a recognized leader for quality initiatives in urology, will continue to promote the highest standards of urologic care while guarding patient safety.

Committee Meetings:
The committee meets twice per year at AUA headquarters—once in the spring and once in the fall. There is email correspondence throughout the year; conference calls are scheduled on an as needed basis.

Time Commitment:
- **Chair:** 10-15 hours a week/ approximately 600 hours per year
- **Member:** 30-50 hours per year

Qualifications/ Responsibilities:
**Chair:** The Chair should have the ability to organize and motivate the committee towards common goals and work objectives, have a strong background in quality measurement and improvement, patient safety and health policy overall, and be able to coordinate the activities of the committee with the assistance of AUA staff. The Chair will oversee the committee's work in responding to government and private payor healthcare quality initiatives and direct the AUA Board towards an action plan for responding to public and private quality and safety initiatives. The Chair should also keep abreast of regulatory and legislative issues that could have an impact on quality, safety and related issues, such as payment, in urology practice. The Chair also needs to engage and work with other members and outside organizations (e.g., LUGPA, SUNA, NQF, AHRQ) who have knowledge of this field.
Members: Members should have knowledge of healthcare quality and patient safety issues, including measure development and reporting, federal quality programs, electronic medical records, and quality improvement. Members must be willing to serve on at least one committee panel (such as a white paper workgroup) and when appropriate be nominated to national quality organizations.

Recent Accomplishments 2018

- Development of measures related to testosterone replacement therapy and erectile dysfunction to be included in the AUA’s 2019 QCDR self-nomination to CMS
- Creation of the AUA’s opioid position statement
- Update of the AUA’s HPV position statement
- Convening of Quality Improvement Summit on opioid use in urology held on December 8, 2018
- Creation of a three-part series of white papers focused on optimizing surgical outcomes as well as an update of the White Paper on Reprocessing Flexible Cystoscopes
- Development of a proceedings paper based on the 2017 Quality Improvement Summit